



Pituitary Network Association

**The Scientific Management Review Board of the National
Institute of Health**

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It is very difficult within 5 minutes to encapsulate of over 7,000 years of medical history and create a meaningful picture about hormonal health as it exists today and which we are hoping you will help us change.

Since the time of Goliath of the Old Testament 7,000 years ago and up to the present time, hormonal medicine in its many variations and overlapping functions has mystified and bedeviled most of the medical and lay communities of the world.

Hormonal medicine and Pituitary Adenomas encompasses medical issues as diverse as cardiac failure, diabetes insipidus, diabetes mellitus, Colon and rectal polyps, kidney stones, sleep apnea, obesity, depression, memory loss, vision impairment, lack of fertility, short stature, gigantism, anger and violence, and many more issues than we have time to recite.

It is clear that both hormonal disease and metabolic disorders are receiving inordinate attention in the popular media and in family conversations but remarkably few (in or out of medicine) are capable of putting the picture into words and therefore create a blueprint or battle plan for dealing with these diseases and disorders.

Along with increased obesity and high risk of death, both for the young and the elderly, we are dealing with issues of anger, violence, and mood distortions clearly of national and international importance, now referred to as Major Public Health Issues.

“In 1913, Dr. Harvey Cushing, the famed Neurosurgeon and endocrine researcher, said; it is quite probable that the psycho-pathology of every day life hinges largely upon the effects of the ductless gland discharge upon the nervous system.”

As of this moment, no one inside or outside of the medical community or the NIH can tell you how many people suffer and are treated for hormonal disorders, nor can they dispute or disprove Dr. Cushing’s assertion.

We certainly know of children of short stature and menopausal women and patients at high risk for numerous disorders are being treated in a hit and miss fashion but when you add their millions to members to the Pituitary tumor body of patients, we are dealing with somewhere between 20 and 30 percent of the population or more.

In 1936, Dr. Robert Costello of the Mayo clinic published his startling findings at the end of a 1,000 cadaver autopsy series, that 22.4 percent of the bodies examined had pituitary tumors of various sizes and shapes.

A Meta analysis commissioned by our organization in 2004 point conclusively and very conservatively to at least a 16.7 percent prevalence of pituitary adenomas. The researchers were from the University of Toronto, The University of Utah, The University of Virginia and the University of Houston and well known to the NIH. It was published by the Cancer Society, 28, June 2004.

Subsequent to that, the Department of Endocrinology, University of Liege, Belgium, published its own exhaustive series on the high prevalence of pituitary adenomas in a tightly defined geographic area in Liege.

They concluded that the number of patients already discovered and under treatment by non-endocrinologists was more than 3.5-5 times the number previously reported. (J Clin Endocrinol Metab 91:4769-4775, 2006).

The findings since 1936 conclusively overthrow the previous presumption about Pituitary adenomas as rare or unusual. We know better. But I repeat, hormonal and metabolic disorders come in high numbers and do not necessarily need pituitary or adrenal tumors attached before the patient experience severe or life threatening illness.

We now know that pituitary tumors ALONE strike over 20 percent of the population of the United States and in the same percentages for the rest of the world. Allow me to recap the most urgent aspects of my plea;

- The pituitary is a bean shaped gland at the surface of the brain.
- It is essential for growth and the propagation of species
- It receives inputs from the brain and the body
- It Integrates information and responds by producing hormones to regulate other glands and bodily functions.

What causes the pituitary to malfunction?

- Tumors are most common
- Inflammation following pregnancy
- Infections
- Injury
- Cancerous spread

What are the pituitary tumors?

- Non cancerous growths or “adenomas”
- Cancer is very rare
- Variable pattern of growth
 - ❖ It may be small, hormonally inactive, incidental findings
 - ❖ Maybe small but cause hormone excess
 - ❖ Maybe rapidly growing mass lesions

In your handouts are numerous explanations for the development, growth and behavior for pituitary adenomas, but that does not cover other hormonally significant functions within the human body.

For 18 years we have sought to find a “home” for all aspects of pituitary diseases and disorders at the NIH but as many members of the staff have repeatedly told me; “there is no *home* here for pituitary patients the way there is for stroke patients, alcoholic or drug addicted patients, cancer patients, ect.”

For 7,000 years the medical community have known of the existence of many aspects of pituitary disease and instead treated many of us as circus freaks or human aberrations.

Having learned what I have over the past 18 years and being advised by some of the finest minds in medicine today, I will flatly say, that the time has come for the governmental, scientific, and medical communities to gather all Governmental hormonal research under one roof, one leadership, in order to put an end to the wildly swinging guess work of doctors and the horrendously expensive suffering of patients and by extension, their families, co workers, the healthcare system, and society.

We all know that healthcare costs are getting totally out of hand, and we must also recognize that we are trying to treat between 20 to 30 percent of the population by pure guess work and “whatever feels good”, without regard to scientific findings and what is best for society and the patient. I urge you to put a stop to the “merry-go-round” and focus on the most obvious issue which is: the cost of care and successful outcomes.

Now is the opportunity, and I lay the challenge in your lap: if you can help 30 percent of the patient population, you can also improve the lives and well being of another 30 percent of the population which constitutes their spouses, co workers and others.

In short, 60 percent of the population is looking to you for answers, which have been hidden for 7,000 years. This must stop and as you all know, the problem is that the hormonal medicine is still not seen as a serious issue by the medical community, while the media and political leadership focus on these very issues almost daily. You may just have the first opportunity to face hormonal issues for what they are- a serious Public Health problem directly on in directly affecting all of us.