

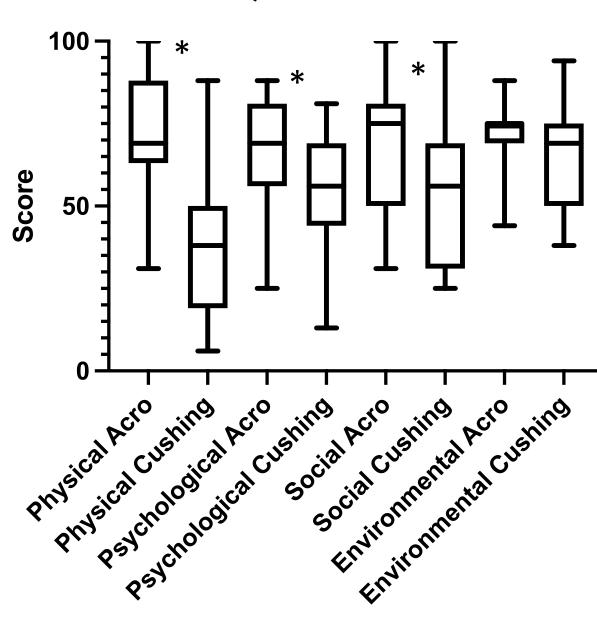
THE RELATIVES' QUALITY OF LIFE AND PERCEPTION OF THE DISEASE DIFFER BETWEEN ACROMEGALY AND CUSHING'S SYNDROME IN REMISSION



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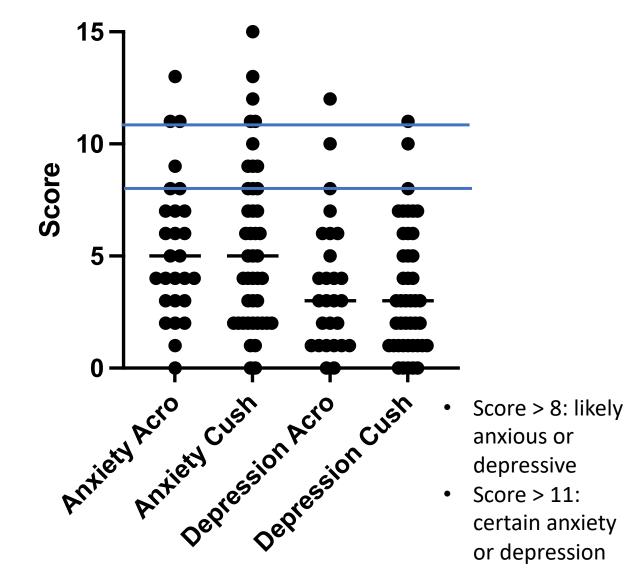
Introduction: We recently reported the relative's perception of 27 patients with acromegaly in remission for at least 1 year (Fourneaux et al., EJE, 2021). Our aim was to compare the quality of life and perception of relatives of patients with Cushing's syndrome (CSRelative) *vs.* acromegaly (AcroRelative) in remission for at least 1 year. **Methods**: 27 patients with acromegaly and 43 with Cushing's syndrome completed questionnaires on quality of life (WHOQOL), anxiety and depression (HAD), and body image perception (Stunkard score as shown in the figures). Relatives were asked to fulfill WHOQOL and HAD; Stunkard figures were fulfilled as if they were the patients. We report the results of the comparison between CSRelatives and AcroRelatives.

Results: There was a significant difference for 3 of the 4 domains of the WhoQol (Physical p<0.001, psychological p=0.002 and social relationships p=0.004) with a lower score in CSRelatives than in AcroRelatives. Anxiety and depression scores were not statistically different: 9/43 (20.1%) vs. 4/27 (14.8%) were likely anxious and 2/43 (4.7%) vs. 2/27 (7.4%) were likely depressive, in CSRelatives vs. AcroRelatives, respectively. While the Stunkard score was not significantly different between patients (median score of 4 vs. 5 in Cushing's syndrome *vs.* acromegaly, p=0.09), there was a significant difference of perception for CSrelatives in comparison with the CS patients (median Stunkard score of 6 when seen by the relative, vs. 4 when seen by the patient, p=0.0173). In contrast, Stunkard score was not significantly different between AcroRelatives and patients with acromegaly (median Stunkard score, 5 in both groups).



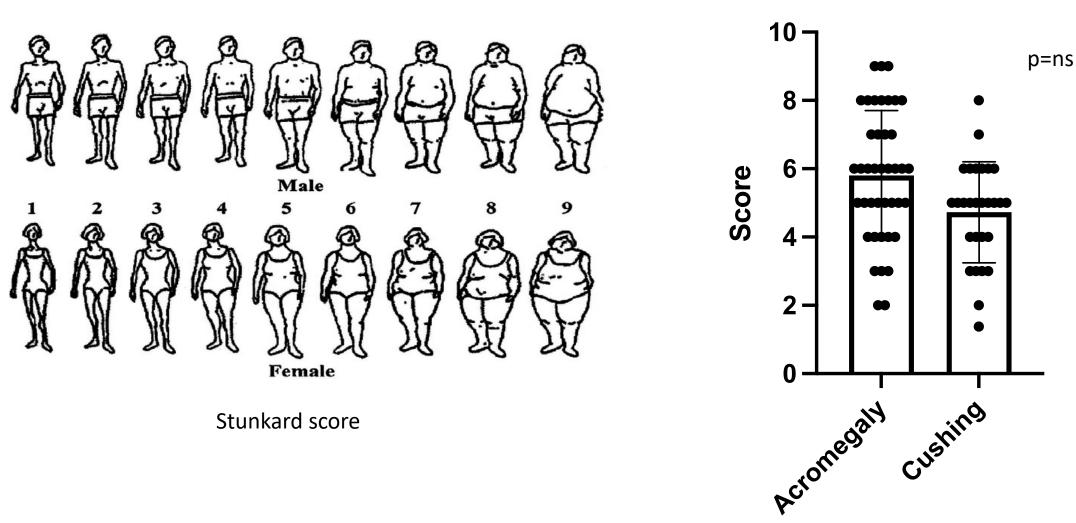
WHOQoL Relatives' scores

Anxiety and depression scores (HAD)



*: p < 0.005

Stunkard score seen by the relative (patient in remission)



Conclusion: Cushing's syndrome impacts more the quality of life of relatives than acromegaly. CSRelatives show a more altered perception of the patient's body image than AcroRelatives, a point that should be integrated to educational therapeutic programs.

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