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Some Aspects of Pituitary Function in the Male Diabetic

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In order to elucidate the hypothalamic-pituitary function in diabetes, the pituitary responsiveness of LH, FSH, prolactin (PRL), and growth hormone (GH) to a thyrotropin releasing hormone (TRH, 200 μg) plus gonadotropin releasing hormone (GnRH, 100 μg) intravenous bolus injection was studied in a group of 13 insulindependent male patients aged 23-47 years. The results obtained for gonadotropin secretion showed LH responses to be significantly higher than those obtained in a group of controls, while basal and stimulated FSH levels were

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not different from those in the controls. There were no significant differences in PRL secretion between diabetics and control subjects. However, most of the diabetic patients studied (nine out of 12) showed an unexpected but definite GH response to the combined TRH + GnRH test. In conclusion, the observed pattern of gonadotropin release is consistent with gonadal failure previously documented in diabetics. However, the paradoxical GH responses suggest that diabetes also affects the function of the hypothalamic-pituitary unit in a manner similar to that documented in other pathologic conditions.

Key words: pituitary function, diabetes, gonadotropin releasing hormone (GnRH), thyrotropin releasing hormone (TRH), growth hormone

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