

DOCUMENT 9

-----Original Message-----

From: [REDACTED]
Sent: 09 June 2009 14:10
To: Fergus Macbeth
Cc: 'Ian Gilmore'
Subject: RE: Hypopituitarism following head injury

Dear Dr. Macbeth,

Thank you very much indeed for your letter. I was working with [REDACTED] in 1974.

With regard to head injury and hypopituitarism we have actually done our own study which has just been completed. [REDACTED]

[REDACTED]

We have only just finished this study and so we have not published it but we will definitely do so.

[REDACTED] but we feel our patient group is the same as others and that our findings are endocrinologically secure.

Thus, hypopituitarism can definitely occur but is uncommon.

Most people do not recognise it at all. Certainly pan hypopituitarism has been described.

Therefore it is uncommon, potentially serious and under recognised.

I hope this is helpful.

Best wishes
[REDACTED]

-----Original Message-----

From: Fergus Macbeth
Sent: 05 June 2009 11:10
To: [REDACTED]
Cc: Ian Gilmore
Subject: Hypopituitarism following head injury

Dear [REDACTED]

Ian Gilmore suggested that I should contact you for advice.

I am Director of the Clinical Guidelines Programme at NICE. Recently we published an update of the clinical guideline on Head Injury (see <http://guidance.nice.org.uk/CG56>). Since publication we have been in correspondence with a lady whose son apparently died of unrecognised pituitary failure some years after sustaining a significant head injury. She complains that the guideline does not deal with this issue nor give advice in the follow up section that this should be monitored. We contacted the technical team who developed the guideline for us and they took advice from the chair of the guideline group and the advice was that this was not really a big issue and did not warrant a special update/addendum to the guideline.

She has come back to us again and I felt that rather than rebuff her again, I should seek an independent opinion on this, especially as there was not an endocrinologist on the guideline development group. I have done a high level evidence search and very quickly found two authors (one from Dublin and one from Italy - sorry I cannot remember the names and I am drafting this on the train) saying that the incidence of late hypopituitarism (not just transient DI) following traumatic brain injury was 25 to 40%. It also appears to be an under-recognised problem. I would very grateful for your view on this and whether this really is a common, serious and under-recognised problem that really should be included in the clinical guideline. Her view is that this a 'serious error' that would justify, under NICE's methodology, further guidance being issued. This would of course entail considerable resource to do and we could not do it unless there was enough justification.

Thanks for your help. Please get in touch if you want to discuss or need more information.

Yours

Fergus Macbeth

PS If you were [REDACTED] on the [REDACTED] firm at Kings in [REDACTED], I was the houseman

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