PP-PN-04

HIGHER FOLLICLE STIMULATING HORMONE WAS ASSOCIATED WITH POOR HANDGRIP STRENGTH AND GAIT SPEED IN OLDER MEN WITH TYPE 2 DIABETES

https://doi.org/10.15605/jafes.037.AFES.117

Serena Low,[1] Jonathon Khoo,[1] Tianmin Lu,[1] Chee Fang Sum,[2] Tavintharan Subramaniam,[2] Su Chi Lim[1]
[1]*Khoo Teck Puat Hospital, Singapore*
[2]*Admiralty Medical Centre, Singapore*
[3]*Lee Kong Chian School of Medicine, Singapore*
[4]*Saw Swee Hock School of Public Health, Singapore*

OBJECTIVES
Sarcopenia is characterised by age-related loss of muscle mass, strength and physical performance. It is accelerated in type 2 diabetes mellitus(T2DM). Higher follicle-stimulating hormone(FSH) reportedly contributes to muscle mass decline. The association between FSH with muscle strength and physical performance remains unknown. We aimed to investigate association between FSH and handgrip strength and gait speed in men with T2DM.

METHODOLOGY
We conducted a cross-sectional on male patients with T2DM. Serum FSH was measured using electrochemiluminescence immunoassay. Handgrip strength was measured using hand dynamometer and was low if <28 kg. Slow gait speed was defined as ≤0.8 m/s. Modified Poisson regression was used to examine relationship between FSH with handgrip strength and gait speed, adjusting for age and clinical covariates.

This research has been approved by an ethical committee.

RESULTS
There were 100 patients with mean age 63.3 ± 7.3 years. Forty percent had low handgrip strength and 51% had slow gait speed. Univariate analysis showed that Tertile 3 FSH was associated with low handgrip strength and slow gait speed with corresponding relative risk (RR) 1.96 (95% CI 1.07-3.57; p=0.028) and 1.74 (95% CI 1.06-2.85; p=0.027) compared to Tertile 1 FSH. The association persisted in fully adjusted model with RR 1.88 (95% CI 1.02-3.43; p=0.042) and 1.80(95% CI 1.03-3.16; p=0.040) for low handgrip strength and slow gait speed respectively.

CONCLUSION
Elevated FSH, likely indicative of subclinical primary hypogonadism, was independently associated with low handgrip strength and slow gait speed. Hence FSH may potentially be used to identify risk of poor muscle strength and physical performance in men with T2DM.

PP-PN-05

OSILODROSTAT IS EFFECTIVE AND WELL-TOLERATED IN ASIAN AND NON-ASIAN PATIENTS WITH CUSHING'S DISEASE: RESULTS FROM LINC 3 (PHASE III STUDY)

https://doi.org/10.15605/jafes.037.AFES.118

Akira Shimatsu,[1] Beverly Biller,[2] Maria Fleseriu,[3] Eun jig Lee,[4] Rattana Leelawattana,[5] Jung Hee Kim,[6] Rama Walia,[7] Andrea Piacentini,[8] Alberto Pedroncelli,[9] Rosario Pivonello[10]
[1]*Advanced Medical Care Center, Omi Medical Center, Kusatsu, Japan*
[2]*Neuroendocrine and Pituitary Tumor Clinical Center, Massachusetts General Hospital, Boston, USA*
[3]*Pituitary Center, Departments of Medicine and Neurological Surgery, Oregon Health & Science University, Portland, USA*
[4]*Pituitary Tumor Center, Severance Hospital, Yonsei University College of Medicine, Seoul, South Korea*
[5]*Prince of Songkla University, Songkhla, Thailand*
[6]*Department of Internal Medicine, Seoul National University College of Medicine, Seoul, South Korea*
[7]*Department of Endocrinology, Postgraduate Institute of Medical Education and Research (PGIMER), Chandigarh, India*
[8]*Recordati SpA, Milan, Italy*
[9]*Recordati AG, Basel, Switzerland*
[10]*Dipartimento di Medicina Clinica e Chirurgia, Sezione di Endocrinologia, Università Federico II di Napoli, Naples, Italy*

OBJECTIVES
Osilodrostat, a potent oral 11β-hydroxylase inhibitor, normalised mean urinary free cortisol (mUFC) in most patients with Cushing's disease (CD) during a Phase III study (LINC 3; NCT02180217). We describe outcomes for Asian and non-Asian patients enrolled in LINC 3.

METHODOLOGY
CD patients with mUFC>1.5x upper limit of normal (ULN) received osilodrostat during the 48-week (W) core phase. Patients benefiting from osilodrostat at W48 could enter an optional extension. Dose adjustments were permitted (maximum dose 30 mg bid). Data are reported separately for Asian and non-Asian patients.