If You Have a Pituitary Tumor

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What is pituitary cancer?

Cancer can start any place in the body. Cancer that starts in the pituitary gland is called pituitary cancer. But it’s very rare.

Most tumors in the pituitary are not cancer. They start when cells in the pituitary gland grow out of control. Sometimes they make too much of a certain hormone. This can make it hard for the body to work the way it should.

The pituitary gland sits below your brain in the center of your head. Sometimes tumors in the pituitary grow a lot and push on nearby parts of the brain. This can cause a lot of problems too.
Ask your doctor to use these pictures to show you where the tumor is.

**Different kinds of pituitary tumors**

There are many [types of pituitary tumors](#). Pituitary tumors are also called pituitary adenomas. They are grouped by the kind of hormone the tumor makes and if it make hormones.

**Non-functional adenomas** do not make hormones.

**Functional adenomas** make hormones. The most common type is called a prolactinoma because it makes a hormone called prolactin. There are other less common types. Your doctor can tell you more about the type of tumor you have.

**Questions to ask the doctor**
• Why do you think I have a pituitary tumor?
• Is the tumor cancer?
• Is there a chance I don’t have a tumor?
• Would you please write down the kind of tumor you think I might have?
• What will happen next?

How does the doctor know I have a pituitary tumor?

These tumors may not be found until they cause problems that make the person go to the doctor.

The doctor asks you questions about your health and does a physical exam. If signs are pointing to a pituitary tumor, more tests will be done. Here are some of the tests you may need:

Blood and urine tests: These tests are used to measure the amount of hormones your body is making. They can also tell the doctor more about your overall health.

MRI scan: MRIs use radio waves and strong magnets instead of x-rays to take detailed pictures. MRIs can be used to look for a tumor and see how big it is.

CT scan: This is also called a CAT scan. It’s a special kind of x-ray that takes detailed pictures of the inside of your head. But an MRI is better.

Questions to ask the doctor

• What tests will I need to have?
• Who will do these tests?
• Where will they be done?
• Who can explain them to me?
• How and when will I get the results?
• Who will explain the results to me?
• What do I need to do next?

What kind of treatment will I need?

There are many ways to treat pituitary tumors, but the main types of treatment are local
or systemic.

Surgery might be used to take the tumor out. Radiation can shrink or destroy the tumor. Surgery and radiation are used to treat only the tumor. They do not affect the rest of the body. This is called *local treatment*.

Drugs can be used to keep the tumor from making hormones or stop the problems the extra hormone is causing. Drugs go through the whole body. This is called *systemic* (pronounced sis-TEM-ick) *treatment*.

Here are the key things your doctor needs to know to treat your pituitary tumor:

- How big is the tumor?
- Has it grown into nearby parts of the head (like the brain or bones)?
- Is the tumor causing problems (like headaches or changes in how you see)?
- Is it making hormones? If so, which one?

The treatment plan that’s best for you will also depend on:

- The chance that a type of treatment will cure the tumor or help in some way
- Your age
- Other health problems you have
- Your feelings about the treatment and the side effects that come with it

No matter what treatment your doctor suggests, talk about what side effects you might have.

*Side effects* depend on the type of treatment that’s used. Most get better after treatment ends. Some might last longer. There are ways to treat most side effects. If you have side effects, talk to your treatment team so they can help.

**Clinical trials**

*Clinical trials* are research studies that test new drugs or other treatments in people. They compare standard treatments with others that may be better.

If you would like to be in a clinical trial, start by asking your doctor if your clinic or hospital conducts clinical trials. See Clinical Trials to learn more.

Clinical trials are one way to get state-of-the-art treatment. They are the best way for
doctors to find better ways to treat pituitary tumors. If your doctor can find one that’s studying the kind of tumor you have, it’s up to you whether to take part. And if you do sign up for a clinical trial, you can always stop at any time.

**What about other treatments I hear about?**

When you have a pituitary tumor you might hear about other ways to treat the tumor or treat your symptoms. These may not always be standard medical treatments. These treatments may be vitamins, herbs, special diets, and other things. You may wonder about these treatments.

Some of these are known to help, but many have not been tested. Some have been shown not to help. A few have even been found to be harmful. Talk to your doctor about anything you’re thinking about using, whether it’s a vitamin, a diet, or anything else.

**Questions to ask the doctor**

- What treatment do you think is best for me?
- What's the goal of this treatment? Do you think it could cure the tumor?
- Will treatment include surgery? If so, who will do the surgery?
- What will the surgery be like?
- What will I look like after surgery?
- Will I need other types of treatment, too?
- What's the goal of these treatments?
- What side effects could I have from these treatments?
- What can I do about side effects that I might have?
- Is there a clinical trial that might be right for me?
- What about special vitamins or diets that friends tell me about? How will I know if they are safe?
- How soon do I need to start treatment?
- What should I do to be ready for treatment?
- Is there anything I can do to help the treatment work better?
- What's the next step?

**What will happen after treatment?**

You’ll be glad when treatment is over. But it’s hard not to worry about the tumor coming back. Even when a pituitary tumor never comes back, people still worry about it. For
years after treatment ends, you will see your doctor. Be sure to go to all of these follow-up visits. You will have exams, blood tests, and maybe other tests to see if the tumor has come back.

At first, your visits may be every few months. Then, the longer you’re tumor-free, the less often the visits are needed. Lab tests or imaging tests (like MRI scans) may be done to look for signs of a tumor. Your doctor will tell you which tests should be done and how often based on the type of tumor and the type of treatment you had.

Having a pituitary tumor and dealing with treatment can be hard, but it can also be a time to look at your life in new ways. You might be thinking about how to improve your health. Call us or talk to your doctor to find out what you can do to feel better.

You can’t change the fact that you have a pituitary tumor. What you can change is how you live the rest of your life – making healthy choices and feeling as well as you can.

Hyperlinks

2. www.cancer.org/cancer/pituitary-tumors/about/what-is-pituitary-tumor.html

Words to know

Adenoma (ad-uh-NO-muh): Cancer that starts in the gland cells that line some organs. Gland cells make and release substances into the body, like hormones. See hormones.

Benign (be-NINE): Not cancer.
**Biopsy** (BY-op-see): Taking out a small piece of tissue to see if there are cancer cells in it.

**Carcinoma** (CAR-sin-O-muh): Cancer that starts in the lining layer of organs. Most cancers are carcinomas.

**Hormones**: Chemical substances released into the body by the certain glands, like the thyroid, adrenal, or pituitary. Hormones travel through the blood and control certain body functions.

**Tumor** (TOO-mer): A lump or mass of tissue, that's not normal. It may or may not be cancer.

**How can I learn more?**

We have a lot more information for you. You can find it online at [www.cancer.org](http://www.cancer.org). Or, you can call our toll-free number at 1-800-227-2345 to talk to one of our cancer information specialists.

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