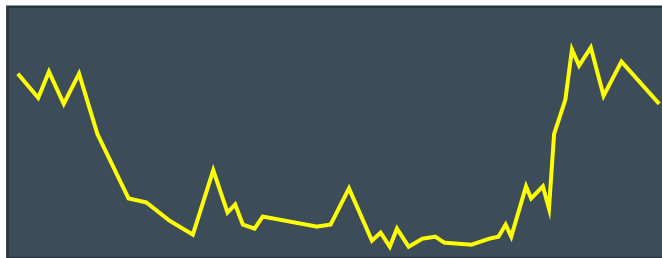


What Causes Hypercortisolism?

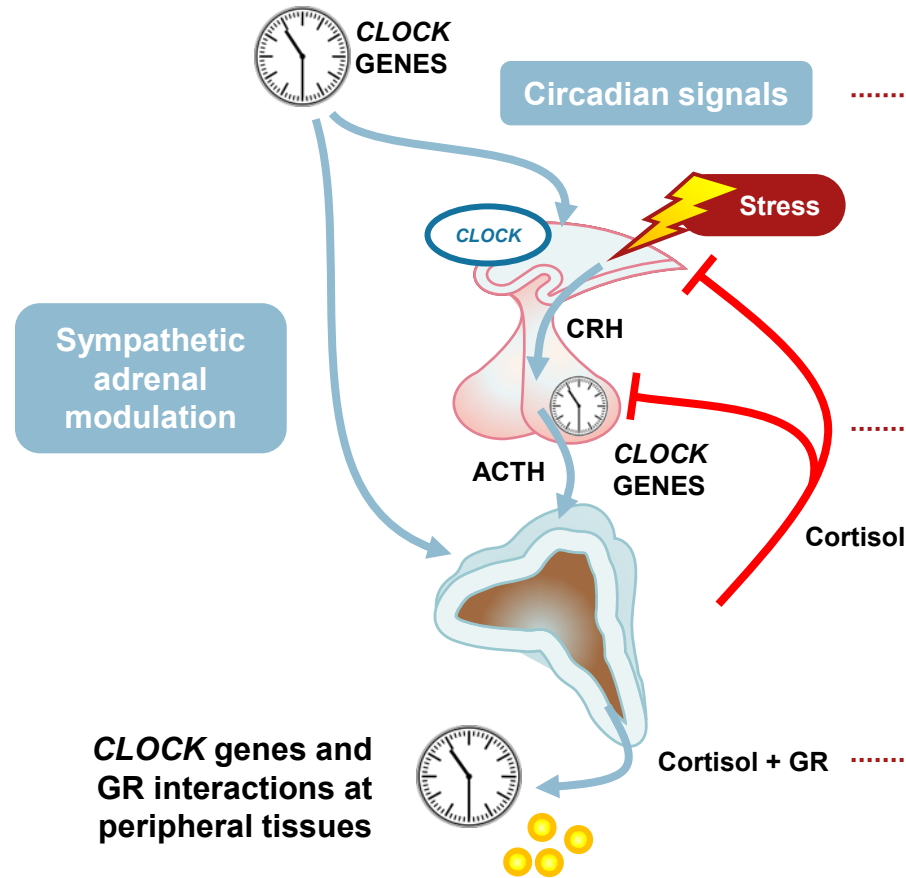
Cortisol production: Circadian signaling

Normal cortisol circadian rhythm follows a diurnal variation



06h 10h 14h 18h 22h 02h 06h

Normal individual



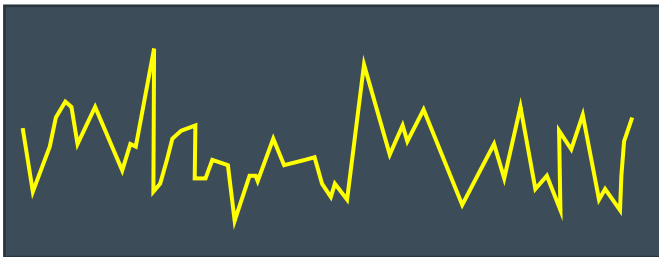
Circadian timing signals are propagated downstream from the hypothalamic suprachiasmatic nucleus *CLOCK* genes to the HPA axis

Cortisol can influence *CLOCK* genes via the feedback loop at the HPA axis, which oscillates at a periodicity of ~24 hours

Crosstalk between *CLOCK* genes and GRs helps modulate the effects of cortisol circadian rhythm in the peripheral tissues

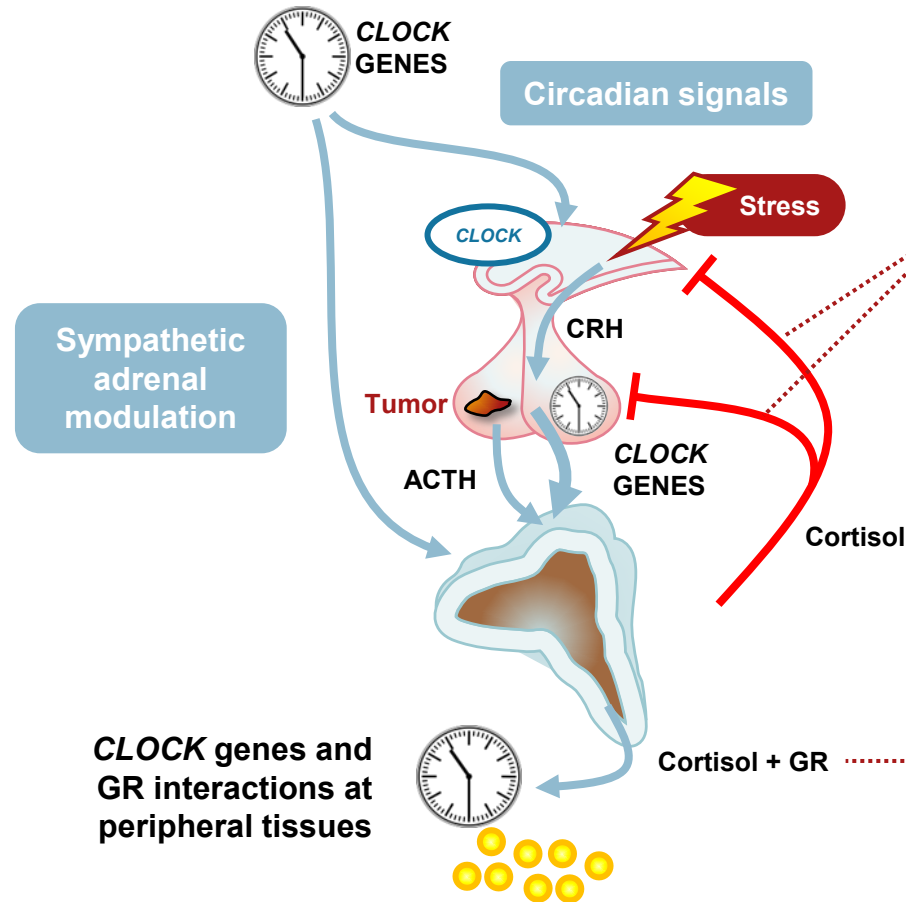
Excess cortisol can impair the circadian rhythm

Loss of cortisol circadian rhythm in hypercortisolism



06h 10h 14h 18h 22h 02h 06h

Hypercortisolism



Increased cortisol impairs circadian CRH release and potentially also the HPA *CLOCK* genes, leading to **abnormal cortisol rhythm**.

Adenomas may also be resistant to the cortisol feedback loop, resulting in **loss of pulsatile ACTH signaling**.^{1,2}

CLOCK system dysregulation in target tissues leads to intermediary metabolic dysregulation and clinical features of Cushing's syndrome.¹

Different etiologies of endogenous hypercortisolism

Endogenous hypercortisolism

Non-neoplastic physiologic hypercortisolism

Cushing phenotype

- Alcohol-induced
- Chronic kidney disease
- Neuropsychiatric disorders
- Poorly controlled T2DM
- Pregnancy
- GC resistance
- OSA

Non-Cushing phenotype

- Starvation equivalent disorders
 - Relative energy deficiency in sports
 - Eating disorders (anorexia/bulimia)

Neoplastic pathologic hypercortisolism

ACTH-secreting neoplasm

- Pituitary (Cushing disease)
- Non-pituitary (ectopic)

Adrenal nodular disease

- Adenoma
- Carcinoma
- Bilateral nodular disease

Salient features of non-neoplastic hypercortisolism



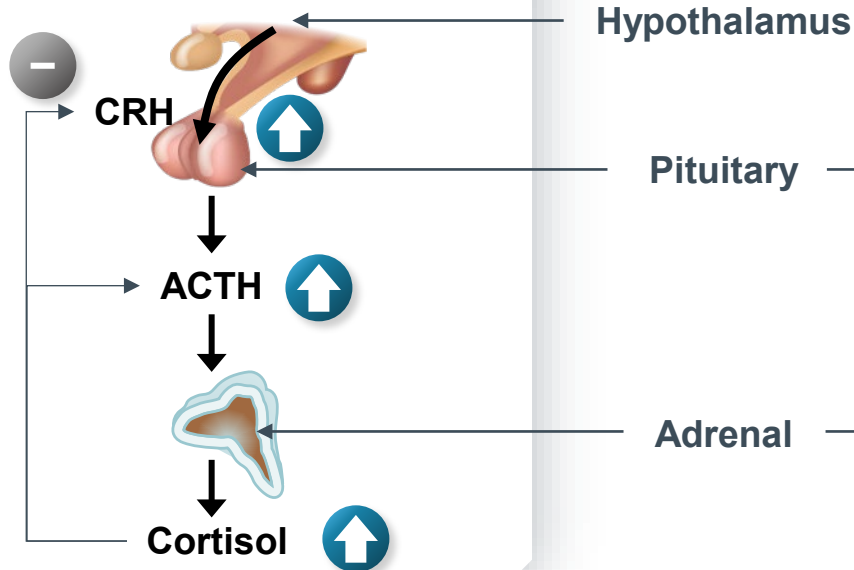
Non-neoplastic hypercortisolism^{1,2}

Preservation of some:

- Cyclicity
- Negative feedback

Poorly responsive to stimulation by:

- CRH
- ddAVP



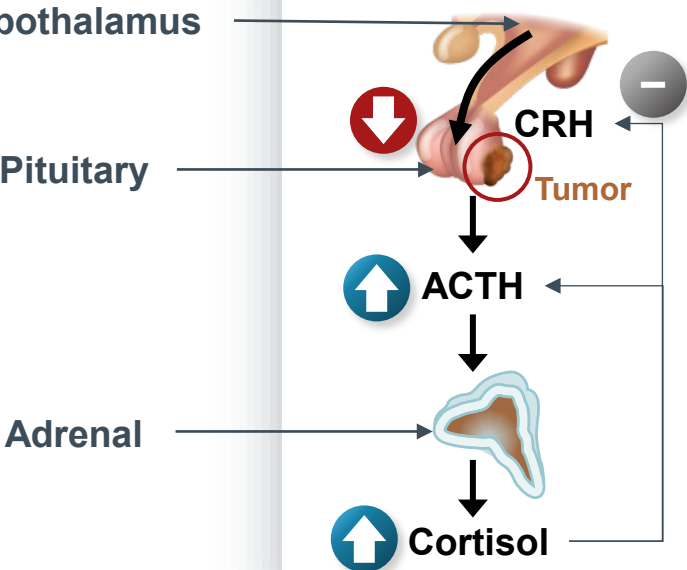
Cushing disease²

Little preservation of:

- Cyclicity
- Negative feedback

Highly responsive to stimulation by:

- CRH
- ddAVP



ddAVP=1-deamino-8-D-arginine vasopressin (desmopressin).
 1. Findling JW, Raff H. *J Endocr Soc.* 2023;7(8):bvad087. doi: 10.1210/jendso/bvad087 2. Chabre O. *Ann Endocrinol (Paris).* 2018;79(3):138-145.