

ied between 19 and 73 years, 16 were males and 14 females. The adenomas had a volume smaller than 1 cm³ in nine cases, between 1 and 4 cm³ in six cases and in 15 patients, the volume was superior to 4 cm³. Of the 30 cases studied 21 (70%) were functional adenomas (9 producing adrenocorticotropin hormone, 4 producing growth hormone – prolactine hormone, 3 producing growth hormone, 3 producing prolactin hormone, and 2 cases were plurihormonal adenomas).

The presence of an increased intrasellar pressure in patients with hypopituitarism is evidenced in this series: 17 patients presented a medium intrasellar pressure of 20.3 mmHg while in the 13 patients with normal pituitary function the pressure was 16.2 mmHg. This result suggests that the increase of the intrasellar pressure would be involved in the pathogenesis of the hypopituitarism, either by the intrasellar tumoral compression of the pituitary or by the extrasellar hypothalamic compression of the macroadenomas. However in our cases this results did not present statistical significance.

The intrasellar pressure (PIS) was measured ba-

sed on the classification of Hardy and Vezina (1976). It was more elevated in the type I microadenomas with average 32.6 mmHg, sharply superior to the value of a normal intracranial pressure. In the type 0 adenomas PIS was of 7.66 mmHg, in the type II it was 19.2 mmHg, in the type III it was 11 mmHg, and in type IV it was 14.8 mmHg. These values showed that the macroadenomas confined in the sella without destruction of the floor and integrity of the diaphragm presented a value of PIS much higher than extrasellar macroadenomas. The statistical study of these data showed that the patients classified as degree I differed from the others.

It was evidenced that these patients presented the highest intrasellar pressure and they were different from all the other degrees. The patients with adenomas classified as degrees II, III and IV presented an intrasellar pressure comparatively similar. The adenomas classified as degree 0 and III were also considered statistically the same.

KEY WORDS: intrasellar pressure, pituitary, adenoma, endoscopy, sella turcica.

*Pressão intra-selar nos tumores da hipófise. Estudo da relação: pressão intra-selar X função hipotalâmica-hipofisária (Resumo). Dissertação de Mestrado, Universidade Federal de São Paulo. Orientador: Osvaldo Inacio de Tella Junior.

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A SLEEP DISORDERS TRAINING PROGRAM FOR MEDICAL PROFESSIONALS (ABSTRACT)*. **DISSERTATION, HABANA, CUBA, 2004.**

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In Minas Gerais steel valley, one of the main Brazilian iron mining fields, large industrial plants as USIMINAS, ACESITA and CENIBRA are located. These large plants together with smaller ones have a greater part of their workers in shift work. We know that the night worker is particularly exposed to sleep difficulties, with a two to five times higher chance of sleeping during workhours than the that of the daytime worker.

Sleep disorders lead to higher risk to the individual worker as well as to those who work with him. Sleep impairment means health hazard and also increased traffic safety risk. There are already 88 sleep disorders coded and described in the International Classification of Sleep Disorders. Our con-

cern of how these sleep disorders patients are treated lead this research in order to identify the learning needs of practicing physicians about sleep and sleep disorders.

In most Medical school graduation curricula, time dedicated to sleep disorders is not enough or this subject have not yet been included. A total of 120 physicians from the steel valley region were evaluated with standardized questionnaire in order to detect their learning needs regarding sleep disorders.

The results allowed us to design a sleep disorders program to enable medical professionals to diagnose and manage sleep disorders.

KEY WORDS: sleep, sleep disorders, medical learning, shift work.

*Transtornos do sono: o programa de um curso de capacitação para profissionais médicos (Resumo). Dissertação de Mestrado, Escola Nacional de Saúde Pública (Escuela Nacional de Salud Publica), Havana, Cuba. (Área: Educação Médica). Orientador: Ramón Salas Perea; co-orientador, Rubens Reimão. Assessor em Cuba: Ramón Aneiros Riba (in memoriam).

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