## CLINICAL SKILLS: CUSHING'S SYNDROME EXAMINATION

Examining a patient for signs of Cushing's Syndrome involves an <u>general inspection</u> of the patient, along with a <u>systematic examination</u> of the main organs involved in the disease

- Wash your hands
- Introduce yourself
- Ask permission to examine patient
- Expose patient, preferably in underwear
- Reposition patient lying down

## **General Inspection:**

- The patient as a whole (for the 'gestalt' picture of Cushing's syndrome):
  - For central obesity
  - o For stooped posture (due to osteoporotic damage)
- Generalised changes over the body, including:
  - Easy bruising
  - o Striae
  - o Thin skin
  - Classical central fat distribution

## **Systemic Examination:**

- Examine each of the following body parts separately: (as for the cardiovascular, respiratory and abdominal examinations, start with the hands)
  - o Hands and arms for...
    - Bruisina
    - Thin arms
    - Ask to measure blood pressure (would be raised)
    - Shoulder abduction power reduced in proximal myopathy
    - Rheumatoid arthritis (suggesting an iatrogenic cause of the Cushingoid features)
  - Face for...
    - Rounded face (moon face)
    - Visible vessels on the cheeks suggesting thin skin
    - Greasy skin
    - Acne
    - Hirsutism
    - At this point you may wish to test Visual fields (looking for a bitemporal hemianopia that may be the result of an ACTH producing pituitary tumour pressing on the optic chiasm)
  - Shoulders for...
    - Supra-clavicular fat pads
    - Buffalo hump
  - Abdomen for...

- Central obesity
- Striae
- Bruising
- Renal transplant scars (patient may be on long term steroids which is causing the Cushing's syndrome)
- Legs for...
  - Skin ulceration
  - Ask patient to get up from a sitting position without using hands to test for proximal myopathy
- Spine for...
  - Spinal tenderness (may occur with osteoporosis if vertebral fractures)

## To end my examination, I would like to:

- Do bedside tests:
  - Carry out a urine dipstick and check BM blood sugar at bedside (Diabetes Mellitus)
  - o Check blood pressure if not already done (Hypertension)
- Inspect this patient's drug chart for any steroid use.
- Consider further investigations, such as a dexamethasone suppression test.