Introduction

The brain plays a key role in regulating the body’s hormones. Damage to the parts of the brain that control the monitoring and release of hormones can cause a disruption in the body’s ability to maintain a stable internal environment. Hormone release can become increased or insufficient, causing a range of physical, psychological or emotional issues.

This factsheet has been written to offer information about hormonal imbalances after brain injury and where to seek support with such issues.

A glossary is provided at the end of the factsheet to define words in **bold**.

What are hormonal imbalances?

The body is responsible for maintaining its internal environment through a process called **homeostasis**. This monitors and regulates basic bodily functions such as energy, temperature, thirst, hunger and sleep/wake cycles, among others, and relies on the activity of hormones.

Small structures at the base of the brain called the **hypothalamus** and the **pituitary gland** are responsible for regulating hormones. Damage to these parts of the brain can therefore cause hormonal imbalances, affecting the body’s ability to regulate its internal environment.

If damage to the **pituitary gland** leads to a reduction in hormone production, the resulting condition is known as **hypopituitarism**.

Symptoms of hormonal imbalances

In the early days of brain injury, hormone levels are often severely affected, which can make it difficult to diagnose **hypopituitarism** at this stage. Later on in the recovery process, it may become clear that some of the symptoms are specifically caused by hormonal changes, and some rehabilitation units can test for this on assessment.
The effects of pituitary and hypothalamus injury are many and varied because of the large numbers of different hormones that can be affected. Some symptoms are similar to the more common effects of brain injury, and that is another reason why the problem may be under-diagnosed.

Some examples of symptoms that are common to both hormonal imbalance issues and brain injury are:

- Depression (for more information on this, see the factsheet *Depression after brain injury*)
- Sexual difficulties, such as impotence and reduced sex drive (for more information on these issues, see the booklet *Sex and sexuality after brain injury*)
- Fatigue (for more information on this, see the booklet *Managing fatigue*)
- Mood swings
- Headaches
- Vision disturbance

Symptoms more unique to hormonal imbalances include:

- Muscle weakness
- Reduced body hair
- Irregular periods/loss of normal menstrual function
- Reduced fertility
- Increased sensitivity to cold
- Constipation
- Dry skin
- Pale appearance
- Low blood pressure/dizziness
- **Diabetes insipidus**

Each of the above symptoms is caused by a change in the level of a particular hormone that is produced by the **pituitary gland**. However, there are many possible causes of the above symptoms, especially after brain injury, so a thorough assessment is required before any diagnosis can be made.

**Assessment of hormonal imbalances**

If you suspect someone, either yourself or a relative, may be experiencing the symptoms of **hypopituitarism** or any other hormonal condition, you should speak to your GP. If they feel it is appropriate, they will be able to refer you for further assessment with a specialist in the field, such as an **endocrinologist**.
Endocrinologists are able to run a variety of hormone level tests, and may refer you for a brain scan to look for signs of damage to the hypothalamus or pituitary gland. More information on the different types of scans that are commonly used to diagnose brain injury is available in the factsheet Scans and tests after brain injury.

It is important to remember that symptoms may not be apparent immediately. In some cases, the issues don’t manifest themselves until weeks, months or even years later. It is important therefore not to dismiss the possibility of hormonal imbalances issues just because a brain injury happened a long time ago. Indeed, research has found that even though the number of brain injury survivors with hormonal imbalance issues reduces over time, even a year on around a third of survivors still had these issues.

**Treatment of hormonal imbalances**

In the early stages, hormonal problems can cause a specific condition known as diabetes insipidus (this is not the same as the condition diabetes), which is characterised by increased thirst and excessive production of dilute urine. This occurs due to a reduction in the production and secretion of a hormone called vasopressin (an anti-diuretic hormone), and can be treated by administering an anti-diuretic medication called desmopressin. In most cases, diabetes insipidus disappears fairly quickly, but in some rare instances it can persist, sometimes permanently, requiring lifelong hormone replacement therapy.

In the later stages of brain injury, when a diagnosis of hypopituitarism can be confirmed, appropriate treatment may be given. Hormone replacement therapy may be used to restore hormones to normal levels, which should help to manage the symptoms. There are different treatments available, depending on the particular hormones involved and the nature and extent of the symptoms.

The assessment and treatment of hypopituitarism after brain injury is a complex process and more research is needed into the potential long-term benefits of hormone replacement therapy. As with any treatment, you should discuss the pros and cons with your doctor before making any decisions.

**Further information**

There are a number of studies into hypopituitarism after brain injury, but as yet the full extent of the problem is unknown. It seems to occur mainly after severe brain injury; however, some studies have shown that the pituitary gland is also vulnerable to seemingly minor injuries and this could be due to its location within the brain.

You should be particularly aware that many of the symptoms listed earlier in this factsheet can be caused by damage elsewhere in the brain, and if this is the case, treatment for
pitu**itary** dysfunction will not be effective.

Further information and guidance on coping with many of the effects of brain injury are available in Headway’s booklets and factsheets, available at www.headway.org.uk/information-library.

**Glossary**

**Anti-diuretic** - a substance that helps to control fluids in the body. Anti-diuretic hormones can help to reduce the production of urine in conditions such as diabetes insipidus.

**Diabetes insipidus** - a condition following damage to the brain causing excessive thirst and dilute urine production.

**Endocrinologist** - a professional who specialises in hormones and can carry out appropriate tests to investigate, diagnose and treat hormonal imbalances.

**Homeostasis** - the body’s system of monitoring and regulating its internal environment.

**Hypopituitarism** - a condition following damage to the pituitary gland in the brain resulting in a reduction of hormone production.

**Hypothalamus** - a small part of the brain responsible for hormonal regulation.

**Pituitary gland** - a small part of the brain responsible for hormonal regulation.

To discuss any issues raised in this factsheet, or to find details of our local groups and branches, please contact the Headway helpline free of charge on 0808 800 2244 (Monday - Friday, 9am-5pm) or by email at helpline@headway.org.uk.

You can also find more information and contact details of groups and branches on our website at www.headway.org.uk/supporting-you.