Hospital Universitario Ramón y Cajal

ENDOCRINOLOGY & NUTRITION DEPARTMENT

MARTA ARAUJO CASTRO, MD, PhD
Medical physician of Endocrinology & Nutrition. Coordinator of the Neuroendocrinology & Adrenal Unit of the Ramón y Cajal Hospital. Coordinator of the primary aldosteronism group of the Spanish Endocrinology & Nutrition Society (SEEN). Member of the scientific board of the working group of Aldosterone Producing Adenomas (APA) of ENSAT
Areas of special interest: Hypothalamic-pituitary pathology, adrenal diseases, and neuroendocrine tumors.

BIOGRAPHICAL INFORMATION

NAME: Marta Araujo Castro BIRTH DATE & LOCATION: March 14, 1988. Vigo, Spain	POSITION TITLE: Medical Doctor (MD) of the Hospital Universitario Ramón y Cajal. Doctor of Philosophy (PhD) in Medicine.

CONTACTS

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EDUCATION/TRAINING

INSTITUTION AND LOCATION	DEGREE	YEAR(s)	FIELD OF STUDY
• Universidad Santiago de Compostela. Galicia. Spain	M.D.	2011	Medicine & Surgery
• Hospital Universitario Puerta de Hierro. Madrid, Spain.	Specialist	2017	Endocrinology & Nutrition
• Laboratorio de Estadística Aplicada Universidad Autónoma de Barcelona: Máster en Metodología de la investigación en Ciencias de la Salud, Barcelona, Spain.	Master´s degree	2021	Statistics
• Laboratorio de Estadística Aplicada Universidad Autónoma de Barcelona: Diplomatura en Estadística en Ciencias de la Salud. Barcelona, Spain	Master´s degree	2019	Statistics
• Universidad Internacional Menéndez Pelayo: Máster en Gestión Clínica de Unidades Asistenciales (Endocrinología y Nutrición). Madrid, Spain	Master´s degree	2018	Endocrinology & Nutrition
• Universidad Autónoma de Barcelona: Diplomatura en Tratamiento de la Diabetes Mellitus tipo 2	Master´s degree	2019	Endocrinology & Nutrition
• Doctorate in Health Sciences in the Alcalá University, Madrid, Spain.	PhD	2022	Medicine

1. POSITIONS

- **2013-2017.** Medical Residency, Endocrinology & Nutrition, Hospital Universitario Puerta de Hierro, Madrid
- **2017-2018.** Medical Specialist in Endocrinology, Department of Endocrinology, Hospital Rey Juan Carlos, Madrid
- **2017-2019**. Medical Specialist in Endocrinology, Department of Endocrinology, Hospital Universitario La Princesa, Madrid
- **2019-present**. Medical Specialist in Endocrinology & Clinical Nutrition, Department of Endocrinology & Clinical Nutrition. Coordinator of the Neuroendocrinology & Adrenal Unit. Hospital Universitario Ramón y Cajal, Madrid

2. OTHER EXPERIENCE AND PROFESSIONAL MEMBERSHIPS

- **Memberships**: Spanish Society of Endocrinology and Nutrition (SEEN; 2013-present); European Society of Endocrinology (ESE; 2016-present), European Network for the Study of Adrenal Tumours (ENS@T; 2021-present), Society of Endocrinology, Nutrition and Diabetes of the Community of Madrid (SENDIMAD; 2016-present); European Society of Hypertension (ESH; 2022-present); Spanish group of endocrine and neuroendocrine tumors (GETNE; 2020-present) and Endocrine Society (ENDO; 2023-present).
- Member of the scientific board of the working group of Aldosterone Producing Adenomas (APA) of ENSAT.
- Coordinator of the hyperaldosteronism group of the Spanish Society of Endocrinology (2022-present).
- Member of the Instituto Ramón y Cajal de Investigación Sanitaria (IRYCIS) (2019-present),
- Member of the Endocrine tumor committee of the Hospital Universitario Ramón y Cajal (2019-present)
- Member of the Hereditary tumor committee of the Hospital Universitario Ramón y Cajal (2023-present)
- Member of the editorial team of international journals: Hormones and Journal of Clinical Medicine (2020-present).
- Topic Editor of the research topic Advances in Diagnostics and Management of Adrenal Tumors of Frontiers in Endocrinology (Q1 journal) (2022-present)
- Topic Editor of the research topic Adrenal Diseases: An Update of Biomedicines (Q1 journal) (2023-present).
- Coordinator of the University course on pheochromocytomas and paragangliomas of the TECH University (July 2022-September 2022)

3. HONORS

- 2002 Extraordinary Baccalaureate Award. IES Beade. Vigo
- 2019 Award for best oral communication on adrenals, gonads, sexual identity and differentiation at the 60th SEEN Congress.
- 2019 Grant “Beca intramural de ayuda a proyectos de investigación de investigadores noveles, investigadores clínicos asociados y/o grupos emergentes del Hospital Universitario Ramón y Cajal”
- 2019 Grant of the SENDIMAD “Beca SENDIMAD de ayuda a la investigación en

Endocrinología, Nutrición y Diabetes 2019"

- 2019 Award for the best oral communication of the XVIII SENDIMAD Congress 2019
- 2021 Award for the second-best oral communication of the XIX SENDIMAD Congress 2021
- 2021 Award for best oral communication on adrenals, gonads, sexual identity and differentiation at the 62th SEEN Congress.
- 2022 Grant of the SENDIMAD "Beca SENDIMAD de ayuda a la investigación en Endocrinología, Nutrición y Diabetes 2022"
- 2022 Award for the best intercongress publication of the XIX SENDIMAD Congress 2022
- 2022 Award for the author with the highest number of citations of articles published in the Endocrinology Diabetes and nutrition Journal, FSEEN 2022
- 2022 Award for the best publication about primary aldosteronism, ENSAT 2022
- 2022 Grant from the I+D+I in Health Projects (COD.SIA 080570), Instituto de Salud Carlos III 2023
- 2023 Grant of the SEEN "Beca junior SEEN" to the project Impact of prolactin secretion in the response to medical treatment and molecular expression in patients with acromegaly

4. PUBLICATION RECORD OF SCIENTIFIC ARTICLES (OCTOBER 2023)

1. Prolactin and Growth Hormone Signaling and Interlink Focused on the Mammosomatotroph Paradigm: A Comprehensive Review of the Literature. Int J Mol Sci. 2023 Sep 12;24(18):14002. doi: 10.3390/ijms241814002.
2. Efficacy and safety of temozolomide in the treatment of aggressive pituitary neuroendocrine tumours in Spain. Front Endocrinol (Lausanne). 2023 Aug 31;14:1204206. doi: 10.3389/fendo.2023.1204206. eCollection 2023.
3. Diagnostic Accuracy of Adrenal Iodine-131 6-Beta-Iodomethyl-19-Norcholesterol Scintigraphy for the Subtyping of Primary Aldosteronism. Biomedicines. 2023 Jul 7;11(7):1934. doi: 10.3390/biomedicines11071934
4. An Integrated CT and MRI Imaging Model to Differentiate between Adrenal Adenomas and Pheochromocytomas. Cancers (Basel). 2023 Jul 23;15(14):3736. doi: 10.3390/cancers15143736.
5. Impact of obesity on clinical characteristics of Primary Aldosteronism patients at diagnosis and post-surgical response. J Clin Endocrinol Metab. 2023 Jul 10;dgad400. doi: 10.1210/clinem/dgad400. Online ahead of print
6. Autonomous cortisol secretion in patients with primary aldosteronism: prevalence and implications on cardiometabolic profile and on surgical outcomes. Endocr Connect. 2023 Aug 2;12(9):e230043. doi: 10.1530/EC-23-0043.
7. Is the 1mg-dexamethasone suppression test a precise marker of glucocorticoid excess and cardiometabolic risk in patients with adrenal incidentalomas? Endocrine. 2023 Oct;82(1):161-170. doi: 10.1007/s12020-023-03429-0. Epub 2023 Jun 23.
8. Prevalence and incidence of type 2 diabetes mellitus in patients with adrenal incidentalomas: a study of 709 cases. Endocrine. 2023 Sep;81(3):484-491. doi: 10.1007/s12020-023-03396-6. Epub 2023 May 22.
9. The prevalence of primary and secondary hyperparathyroidism and its cardiometabolic implications in primary aldosteronism. Minerva Endocrinol (Torino). 2023 May 11. doi: 10.23736/S2724-6507.23.03866-6. Online ahead of print.
10. Primary bilateral macronodular adrenal hyperplasia: A series of 32 cases and literature review.

Endocrinol Diabetes Nutr (Engl Ed). 2023 Apr;70(4):229-239. doi: 10.1016/j.endien.2023.04.005

11. Differences in clinical, hormonal, and radiological presentation and in surgical outcomes in patients presenting with and without pituitary apoplexy. A multicenter study of 245 cases. Pituitary. 2023 Apr;26(2):250-258. doi: 10.1007/s11102-023-01315-6. Epub 2023 Apr 27.
12. Surgical and postsurgical management of abdominal paragangliomas and pheochromocytomas. Actas Urol Esp (Engl Ed). 2023 Mar;47(2):68-77. doi: 10.1016/j.acuroe.2022.08.008. Epub 2022 Aug 5.
13. Prevalence, risk factors and evolution of diabetes mellitus after treatment in primary aldosteronism. Results from the SPAIN-ALDO registry. J Endocrinol Invest. 2023 Apr 10. doi: 10.1007/s40618-023-02090-8. Online ahead of print.
14. Mortality in Acromegaly Diagnosed in Older Individuals in Spain Is Higher in Women Compared to the General Spanish Population. J Clin Endocrinol Metab. 2023 Aug 18;108(9):2193-2202. doi: 10.1210/clinem/dgad141.
15. Cortisol: Analytical and clinical determinants. Adv Clin Chem. 2023;113:235-271. doi: 10.1016/bs.acc.2022.11.005. Epub 2022 Dec 26
16. The importance of the genetic study in primary bilateral macronodular adrenal hyperplasia. Endocrinol Diabetes Nutr (Engl Ed). 2023 Jan;70(1):1-3. doi: 10.1016/j.endien.2022.11.035.
17. Possible, probable, and certain hypercortisolism: A continuum in the risk of comorbidity. Ann Endocrinol (Paris). 2023 Apr;84(2):272-284. doi: 10.1016/j.ando.2023.01.005. Epub 2023 Feb 1.
18. Genetic Study in Pheochromocytoma: Is It Possible to Stratify the Risk of Hereditary Pheochromocytoma? Neuroendocrinology. 2023;113(6):657-666. doi: 10.1159/000529319. Epub 2023 Jan 24.
19. Formas familiares y perfil molecular del hiperaldosteronismo primario. Hipertensión y Riesgo Vascular. 28 Junio 2022
20. A Proposal for Nomenclature Revision of Non-functioning Adrenal Incidentalomas as Adrenal Lesions of Undetermined Secretion of Adrenal Steroids (ALUSAS). Endocr Pract. 2022 Jun 22;S1530-891X(22)00540-7. doi: 10.1016/j.eprac.2022.06.007
21. Adrenalectomy improves blood pressure control in nonfunctioning adrenal incidentalomas and glycemic and lipid control in patients with autonomous cortisol secretion. Endocrine. 2022 Jun 25. doi: 10.1007/s12020-022-03120-w.
22. Adrenal venous sampling in primary aldosteronism: Experience of a Spanish multicentric study (Results from the SPAIN-ALDO Register). Endocrine. 2022 Jun 25. doi: 10.1007/s12020-022-03122-8.
23. Tumour size in adrenal tumours: its importance in the indication of adrenalectomy and in surgical outcomes-a single-centre experience. J Endocrinol Invest. 2022 Jun 24. doi: 10.1007/s40618-022-01836-0
24. Causes of hyperprolactinaemia in the primary care setting: How to optimise hyperprolactinaemia management. Endocrinol Diabetes Nutr (Engl Ed). 2022 Dec;69(10):771-778. doi: 10.1016/j.endien.2022.11.019.
25. First survey on the diagnosis and treatment of primary aldosteronism by Spanish Endocrinology and Nutrition specialists. Endocrinol Diabetes Nutr (Engl Ed). 2022 Dec 12;S2530-0180(22)00241-4.
26. Presurgical predictive factors of surgical remission in Cushing's disease. Study of 32 cases. Endocrinol Diabetes Nutr (Engl Ed). 2022 Oct;69(8):584-590.

27. Role of imaging test with radionuclides in the diagnosis and treatment of pheochromocytomas and paragangliomas. Endocrinol Diabetes Nutr (Engl Ed). 2022 Oct;69(8):614-628.
28. Differences in intraoperative and surgical outcomes between normotensive pheochromocytomas and sympathetic paragangliomas (PPGLs) and hypertensive PPGLs: results from the PHEO-RISK STUDY. J Endocrinol Invest. 2022 Nov 2. doi: 10.1007/s40618-022-01954-9.
29. Endoscopic endonasal approach to pituitary adenomas: Impact on adenohypophyseal function. Study of 231 cases. Neurocirugia (Astur : Engl Ed). 2022 Nov-Dec;33(6):300-309.
30. Surgical and non-surgical management of thoracic and cervical paraganglioma. Ann Endocrinol (Paris). 2022 Nov 2;S0003-4266(22)00857-5.
31. Effect of cabergoline on tumor remnant after surgery in nonfunctioning pituitary adenoma. J Neurooncol. 2022 Nov;160(2):351-359. doi: 10.1007/s11060-022-04149-7.
32. Indications for genetic study in gastro-entero-pancreatic and thoracic neuroendocrine tumors. Endocrinol Diabetes Nutr (Engl Ed). 2022 Nov 14;S2530-0180(22)00178-0.
33. Predictive model for autonomous cortisol secretion development in non-functioning adrenal incidentalomas. Hormones (Athens). 2022 Oct 24. doi: 10.1007/s42000-022-00406-6
34. Nonfunctioning adrenal incidentalomas with cortisol post-dexamethasone suppression test >0.9 µg/dL have a higher prevalence of cardiovascular disease than those with values ≤0.9 µg/dL. Endocrine. 2022 Oct 20. doi: 10.1007/s12020-022-03228-z
35. Factors associated with therapeutic response in acromegaly diagnosed in the elderly in Spain. Front Endocrinol (Lausanne). 2022 Sep 16;13:984877. doi: 10.3389/fendo.2022.984877.
36. Glycemic disorders in patients with pheochromocytomas and sympathetic paragangliomas. Endocr Relat Cancer. 2022 Oct 7;29(12):645-655. doi: 10.1530/ERC-22-0218
37. Predictive model of hypertension resolution after adrenalectomy in primary aldosteronism: the SPAIN-ALDO score. J Hypertens. 2022 Aug 24. doi: 10.1097/HJH.0000000000003284.
38. Cushing´s syndrome due to bilateral adrenal cortical disease: Bilateral macronodular adrenal cortical disease and bilateral micronodular adrenal cortical disease. Front Endocrinol (Lausanne). 2022 Aug 5;13:913253. doi: 10.3389/fendo.2022.913253.
39. Characterisation of the urinary steroid profile of patients with nonfunctioning adrenal incidentalomas: A matched controlled cross-sectional study. Clin Endocrinol (Oxf). 2022 Aug 16. doi: 10.1111/cen.14811
40. Familial forms and molecular profile of primary hyperaldosteronism. Hipertens Riesgo Vasc. 2022 Oct-Dec;39(4):167-173. doi: 10.1016/j.hipert.2022.05.007.
41. A Proposal for Nomenclature Revision of Nonfunctioning Adrenal Incidentalomas as Adrenal Lesions of Undetermined Secretion of Adrenal Steroids (ALUSAS). Endocr Pract. 2022 Sep;28(9):918-920. doi: 10.1016/j.eprac.2022.06.007.
42. Adrenalectomy improves blood pressure control in nonfunctioning adrenal incidentalomas and glycemic and lipid control in patients with autonomous cortisol secretion. Endocrine. 2022 Oct;78(1):142-150. doi: 10.1007/s12020-022-03120-w. Epub 2022 Jun 25.
43. Adrenal venous sampling in primary aldosteronism: Experience of a Spanish multicentric study (Results from the SPAIN-ALDO Register). Endocrine. 2022 Nov;78(2):363-372. doi: 10.1007/s12020-022-03122-8. Epub 2022 Jun 25.
44. Tumour size in adrenal tumours: its importance in the indication of adrenalectomy and in surgical outcomes-a single-centre experience. J Endocrinol Invest. 2022 Oct;45(10):1999-2006. doi: 10.1007/s40618-022-01836-0. Epub 2022 Jun 24.
45. Prevalence and phenotype of primary bilateral macronodular adrenal hyperplasia with

autonomous cortisol secretion: a study of 98 patients. Rev Clin Esp (Barc). 2022 Oct;222(8):458-467. doi: 10.1016/j.rceng.2022.01.003. Epub 2022 May 18.
46. Differences in the presentation and evolution of primary aldosteronism in elderly (≥65 years) and young patients (<65 years). Endocr Connect. 2022 Jun 23;11(6):e220169. doi: 10.1530/EC-22-0169. Print 2022 Jun 1
47. Cardiometabolic profile and urinary metabolomic alterations in non-functioning adrenal incidentalomas. A review. Clinical Endocrinology. Clin Endocrinol (Oxf). 2022 Apr 21. doi: 10.1111/cen.14745. Online ahead of print.
48. Situación actual del diagnóstico y tratamiento del hiperaldosteronismo primario en los Servicios de Endocrinología y Nutrición españoles. Endocrinol Diabetes Nutr 2022.
49. Prevalence and causes of hyperprolactinemia in Primary Care setting. How to optimize hyperprolactinemia management? Endocrinol Diabetes Nutr 2022.
50. Prevalence and phenotype of primary bilateral macronodular adrenal hyperplasia with autonomous cortisol secretion: A study of 98 patients. Revista Clínica Española. 2022.
51. Response to the Letter to the Editor by Dr. Efremov and Alexeev "An alternative way to define hemodynamic instability in the pheochromocytoma surgery". Endocrine 2022. March 12
52. Evolution of the cardiometabolic profile of primary hyperaldosteronism patients treated with adrenalectomy and with mineralocorticoid receptor antagonists: Results from the SPAIN-ALDO Registry. Endocrine. 2022. March 11
53. Predictive model of pheochromocytoma based on the imaging features of the adrenal tumours. Sci Rep 2022 Feb 17
54. Bronchial Carcinoids: From Molecular Background to Treatment Approach. Cancers (Basel) 2022 Jan 20
55. Radiological Knosp, Revised-Knosp, and Hardy-Wilson Classifications for the Prediction of Surgical Outcomes in the Endoscopic Endonasal Surgery of Pituitary Adenomas: Study of 228 Cases. Front Oncol 2022 Jan
56. Diagnosis of primary hyperaldosteronism. Med Clin (Barc) 2021 December
57. Differential macroscopic and histologic features between pituitary adenomas presenting with and without presurgical anterior pituitary dysfunction. A study of 232 patients. Endocrinol Diabetes Nutr 2021 December
58. Predictors of Tumour Growth and Autonomous Cortisol Secretion Development during Follow-Up in Non-Functioning Adrenal Incidentalomas. J Clin Med. 2021 Nov 25;10(23):5509
59. Diagnostic accuracy of the different hormonal tests used for the diagnosis of autonomous cortisol secretion. Sci Rep. 2021 Oct 15;11(1):20539
60. Special situations in pheochromocytomas and paragangliomas: pregnancy, metastatic disease, and cyanotic congenital heart diseases. Clin Exp Med. 2021 Sep 30
61. Presurgical predictive factors of surgical remission in Cushing's disease. Study of 32 cases. Endocrinol Diabetes Nutr (Engl Ed). 2021 Sep 2: S2530-0164(21)00191-9
62. Risk factors for intraoperative complications in pheochromocytomas. Endocr Relat Cancer. 2021 Sep 8;28(11):695-703
63. Surgical outcomes in the pheochromocytoma surgery. Results from the PHEO-RISK STUDY. Endocrine. 2021 Dec;74(3):676-684.
64. Endoscopic endonasal approach to pituitary adenomas: impact on adenohypophyseal function. Study of 231 cases. Neurocirugía. 2021 Aug.
65. Protocol for presurgical and anesthetic management of pheochromocytomas and sympathetic paragangliomas: a multidisciplinary approach. JEI.. 25 July 2021

66. The Dose of Somatostatin Analogues during Pre-Surgical Treatment Is a Key Factor to Achieve Surgical Remission in Acromegaly. Endocrines. 5 August 2021
67. Accuracy of the dexamethasone suppression test for the prediction of autonomous cortisol secretion-related comorbidities in adrenal incidentalomas. Hormones. 2021 July 18.
68. Higher risk of chronic kidney disease and progressive kidney function impairment in primary aldosteronism than in essential hypertension. Case-control study.Endocrine. 2021 Apr 2.
69. Maximum adenoma diameter, regardless of uni- or bilaterality, is a risk factor for autonomous cortisol secretion in adrenal incidentalomas.Journal of Endocrinological Investigation. 8-3-2021
70. Immunotherapy in Adrenocortical Carcinoma: predictors of response, efficacy, safety, and mechanisms of resistance. Biomedicines. 16 March 2021.
71. Differential macroscopic and histologic features between pituitary adenomas presenting with and without presurgical anterior pituitary dysfunction. A study of 232 patients.Endocrinología, Diabetes y Nutrición. 6-1-2021.
72. Urine steroid profile as a new promising tool for the evaluation of adrenal tumors. Literature review Endocrine. 23-11-2020.
73. Presurgical somatostatin receptor ligands treatment does not affect tumor consistency in GH-secreting pituitary macroadenomas. Endocrine Connections. 1-12-2020
74. Is it possible to predict the development of diabetes insipidus after pituitary surgery? Study of 241 endoscopic transsphenoidal pituitary surgeries. J Endocrinol Invest. 2021 Jul;44(7):1457-1464
75. Riesgo cardio-metabólico en pacientes con hiperaldosteronismo primario y secreción autónoma de cortisol. Estudio de casos y controles. Medicina Clínica. Nov 2021
76. Status and clinical and radiological predictive factors of presurgical anterior pituitary function in pituitary adenomas. Study of 232 patients. Endocrine.
77. Treatment of primary aldosteronism. Medicina Clínica. June 2020
78. Predictive model of surgical remission in acromegaly: age, presurgical GH levels and Knosp grade as the best predictors of surgical remission. JEI. 21-5-2020.
79. Practical Guide on the Initial Evaluation, Follow-Up, and Treatment of Adrenal Incidentalomas Adrenal Diseases Group of the Spanish Society of Endocrinology and Nutrition. Endocrinología, diabetes y nutrición. 27-4-2020.
80. Pituitary tumors: epidemiology and clinical presentation spectrum. Hormones. 14-1-2020.
81. Postoperative management of patients with pituitary tumors submitted to pituitary surgery. experience of a spanish pituitary tumor center of excellence. Endocrine. 13-3-2020.
82. Cardiometabolic profile of non-functioning and autonomous cortisol-secreting adrenal incidentalomas. Is the cardiometabolic risk similar or are there differences? Endocrine. Septiember 2019.
83. Phenotype and resistance patterns of 10 resistant prolactinomas. Revista Endocrinología, diabetes y nutrición. March 2020.
84. Autonomous cortisol secretion in adrenal incidentalomas. Endocrine. March 2019.
85. SEEN Guidelines for the Management and Prevention of Acute Adrenal Insufficiency. Endocrinología Diabetes y Nutrición. April 2019.
86. Two types of ectopic Cushing syndrome or a continuum? Review. Pituitary. May 2018.
87. Ectopic Cushing Syndrome: Report of 9 Cases. Endocrinología y Nutrición. April 2018.
88. The Refeeding Syndrome. Importance of Phosphorus. Medicina Clínica. Febrary 2018.
89. A thyrotropin-secreting pituitary adenoma treated with radiosurgery: Long-term outcomes. Endocrinología y Nutrición. Febrary 2018.

90. Hipercupremia secundaria a anticonceptivos hormonales: a propósito de 2 casos. Revista de Endocrinología, Diabetes y Nutrición. October 2017
91. Primer caso documentado de SIADH secundario a adenocarcinoma seroso de ovario tratado con tolvaptan. Revista chilena de Obstetricia y Ginecología. January 2017.
92. Giant parathyroid adenoma. Differential aspects compared to parathyroid carcinoma. Diabetes & Metabolism Case Reports. May 2017.

5. PUBLICATION RECORD OF BOOK CHAPTERS

1. **INCIDENTALOMA ADRENAL. Actualización.** Octubre 2023
2. ACTH-Independent Macronodular Adrenal Hyperplasia (AIMAH). Springer Nature Switzerland AG 2023. N. Rezaei (ed.), Genetic Syndromes, https://doi.org/10.1007/978-3-319-66816-1_1807-1
3. McCune-Albright Syndrome. Springer Nature Switzerland AG 2023. N. Rezaei (ed.), Genetic Syndromes, https://doi.org/10.1007/978-3-319-66816-1_1839-1
4. **INCIDENTALOMA ADRENAL**. Manual SEEN. 2022.
5. **ADENOMAS HIPOFISARIOS FUNCIONANTES**. MEDICINE (13ª SERIE). October 2020
6. **EJE HIPOTÁLAMO HIPOFISARIO. FISIOLOGÍA Y PATOLOGÍA**. MEDICINE (13ª SERIE). October 2020
7. **ADENOMAS HIPOFISARIOS Y ADENOMAS HIPOFISARIOS NO FUNCIONANTES.** MEDICINE (13ª SERIE). October 2020
8. **DIAGNÓSTICO DE LA HIPERPROLACTINEMIA**. MEDICINE (13ª SERIE). October 2020
9. **DIAGNÓSTICO DEL INCIDENTALOMA HIPOFISARIO**. MEDICINE (13ª SERIE). October 2020
10. **HIPOPITUITARISMO. ENFERMEDADES HIPOTALÁMICAS E HIPOFISARIAS.** MEDICINE (13ª SERIE). October 2020
11. **TRATAMIENTO DEL PANHIPOPITUITARISMO.** MEDICINE (13ª SERIE). October 2020
12. **DIAGNÓSTICO DEL HIPOGONADISMO EN VARONES**. MEDICINE (13ª SERIE). October 2020
13. **DIABETES INSÍPIDA.** MEDICINE (13ª SERIE). October 2020
14. **TUMORES NEUROENDOCRINOS.** MEDICINE (13ª SERIE). October 2020
15. **SECRECIÓN INADECUADA DE HORMONA ANTIDIURÉTICA.** MEDICINE (13ª SERIE). October 2020
16. **HIPERANDROGENISMO FEMENINO.** MEDICINE (13ª SERIE). October 2020
17. **DIAGNÓSTICO DEL HIRSUTISMO**. MEDICINE (13ª SERIE). October 2020
18. **DIAGNÓSTICO DEL SÍNDROME DE OVARIOS POLIQUÍSTICOS EN ADULTAS Y ADOLESCENTES.** MEDICINE (13ª SERIE). October 2020
19. **EVALUACIÓN DE LOS NIVELES BAJOS CIRCULANTES DE TESTOSTERONA EN EL ADULTO Y EN EL ANCIANO**. MEDICINE (13ª SERIE). October 2020
20. **TRATAMIENTO CON TESTOSTERONA**. MEDICINE (13ª SERIE). October 2020

6. RESEARCH SUPPORT ROLE: SELECTED GRANTS AS PRINCIPAL & CONTRIBUTOR RESEARCHER

1. **Estimation of fracture risk using the FRAX scale and analysis of bone mineral density on CT in patients with non-functioning adrenal incidentalomas.** CALL FOR HEALTH RESEARCH PROJECTS. AES 2022. Period: 2023-2026 (3 years).
2. **Utility of urinary metabolomics by gas chromatography coupled to mass spectrometry (GC/MS) for the diagnosis of localization and prediction of response to surgery in primary hyperaldosteronism**..SENDIMAD SCHOLARSHIP Call for Research Assistance in Endocrinology, Nutrition and Diabetes 2022.Period: 2023-2025 (2 years).
3. **Nutritional status of patients with Gastroenteropancreatic neuroendocrine tumor in Spain: NUTRIGETNE,** Sub investigator. PIs: Javier Molina-Cerrillo y Teresa Alonso-Gordoa. December 2021-2023
4. **foresiGHt: A multicenter, randomized, parallel-arm, placebo controlled (double blind), active-controlled (open-label) trial to compare the efficacy and safety of once weekly lonapegsomatropin with placebo and a daily somatropin product in adults with growth hormone deficiency.** PI of the Ramón y Cajal Hospital. Sponsor: Ascendis Pharma. March 2021-23
5. **Wearables en pacientes con tumores neuroendocrinos gastroenteropancreaticos metastásicos. Estudio NETFIT.** Subinvestigador. PIs: Javier Molina-Cerrillo y Teresa Alonso-Gordoa. March 2021-2023
6. **National and multicenter registry of patients with pheochromocytomas and sympathetic paragangliomas (PHEO—RISK study).** *Promotor and principal investigator. March 2021-currentlyy.*
7. **A Randomized, Controlled, Multi-Center Study, to Evaluate the Safety and Efficacy of Paltusotine in Biochemically controlled or Partially controlled Subjects with Acromegaly Treated with Long-acting Somatostatin Analogs.** Subinvestigator. PI: Eider Pascual Corrales. January 2021-2023
8. **National and multicenter registry of patients with primary Hyperaldosteronism of the SEEN.** *Promotor and principal investigator. January 2021-currentlyy.*
9. **Registry of patients with neuroendocrine tumors**. *Promotor and principal investigator. Co-IP: Eider Pascual-Corrales. January 2021-currently*
10. **Usefulness of urinary metabolomics by gas chromatography coupled to mass spectrometry (GC/MS) for the diagnosis of localization and prediction of response to surgery in primary hyperaldosteronism.** *Promotor and principal investigator. Co-PI: Gregori Casals y Felicia Hanzu. January 2021-currently*
11. **Surgical registry of adrenal pathology. Single-center study.** *Principal investigator. August 2020-present.*
12. **Study of cardiovascular risk factors in patients with primary hyperaldosteronism.** *Promotor and principal investigator of the single-center study of the Ramón y Cajal Hospital. April 2020-present.*
13. **Prospective study on the utility of intravenous contrast for the interpretation of postoperative magnetic resonance imaging in patients operated on for pituitary tumors using a transsphenoidal endoscopic endonasal approach.** *Collaborator in the single-center study of the Ramón y Cajal Hospital. March 2020-present.*
14. **Prospective study on the utility of early pituitary resonance in pituitary tumors operated on by endonasal endoscopic transsphenoidal approach.** *Collaborator in the single-center*

study of the Ramón y Cajal Hospital. March 2020-present.

15. **Utility of urinary steroid metabolomics for the identification of "non-functioning" adrenal incidentalomas with increased cardio-metabolic risk.** *Promotor and principal investigator of the single-center study of the Ramón y Cajal Hospital. November 2019-present.*
16. **Multicenter national registry of patients with primary adrenal insufficiency.** *Principal investigator of the Ramón y Cajal Hospital. November 2019-present.*
17. **Observational, prospective, multicenter, national study to evaluate the best response time to achieve hormonal control with the use of a personalized treatment, through the implementation of a personalized and predictive algorithm, in patients with acromegaly.***Principal investigator of the Ramón y Cajal Hospital. November 2019-present*
18. **Study about Autonomous cortisol secretion in adrenal incidentalomas (Proyecto SCORE-SAC). National and multicentric study.** *Promoter and principal investigator. January 2017-currently.*
19. **ACROVAL Study: Observational, transversal and multicentric study to assess the degree of activity of acromegalic patients in Spain according to the ACRODAT scale (Acromegaly Disease Activity Tool.** *Collaborator in the study. November 2017- 2018.*
20. **Study of the changes in body composition induced by exenatide LAR in type 2 diabetes and obesity with inadequate glycemic control.** *Collaborator in the study. Princesa University Hospital (2018-2019).*
21. **IDAPADM1 Study: Impact of treatment with dapagliflozin (inhibitor of SGLT-2) on metabolic control and glycemic pattern in patients with type 1 DM**. *Clinical trial collaborator at Puerta de Hierro University Hospit*