



What is AGHD?

A rare endocrine disorder, characterized by the deficiency of GH that can persist from childhood into adulthood or be newly acquired in adulthood^{1,2}



Clinical effects include abnormal body composition, impaired cognitive function, and reduced QoL^{3,4}



Identifying adults likely to have AGHD for diagnostic referral can be challenging, as there is no single biomarker and many clinical features resemble aspects of normal aging⁵



Recombinant human GH therapy has been consistently demonstrated as beneficial for the treatment of AGHD, with low risks¹



There is limited epidemiological information on the prevalence within a large US population



Iterative algorithm development process

Clinical guidelines⁶⁻⁸



Draft algorithm



Testing



Revision



Expert clinical input



Final algorithm to categorize people by their likelihood of having AGHD



Application of the final algorithm to an administrative healthcare database

135

million people from the US



0.5%

high likelihood of AGHD



6.0%

moderate likelihood of AGHD



93.6%

low likelihood of AGHD



59.3% female



32.6% hyperlipidemia



58.3% ≥50 years old



31.4% hypertension



2.2% GH therapy as adults



14.1% Impaired glucose tolerance/diabetes*



71.6% female



28.8% hyperlipidemia



49.0% ≥50 years old



25.9% hypertension



0.0% GH therapy as adults



11.8% Impaired glucose tolerance/diabetes*



50.4% female



27.8% hyperlipidemia



37.6% ≥50 years old



14.6% hypertension



0.0% GH therapy as adults



5.7% Impaired glucose tolerance/diabetes*

*diabetes mellitus
AGHD, adult growth hormone deficiency; GH, growth hormone; QoL, quality of life
Date of preparation: May 2021. Novo Nordisk Health Care AG, Zurich, Switzerland.

References 1. Yuen *et al. Endroc Pract* 2019;25:1191–232; 2. Molitch *et al. J Clin Endocrinol Metab* 2011;96:1587–609; 3. Melmed. *N Engl J Med* 2019;380:2551–62; 4. Gupta. *Indian J Endocrinol Metab* 2011;15 Suppl 3: S197–S202; 5. Reed *et al. Front Endocrinol* 2013;4:64; 6. Boguszewski. *Rev Argent Endocrinol Metab* 2010;47:30–8; 7. Giustina *et al. J Endocrinol Invest* 2008;31:820–38; 8. Ho. *Eur J Endocrinol* 2007;157:695–700.