

Solution

Type 1 Diabetes is not the correct diagnosis because blood test showed insulin levels to be high, and glucose levels continued to fluctuate even after the patient had been put on a monitored diet.

Acromegaly is not the correct diagnosis because abdominal and cranial MRI showed no thickening of the skull or pelvis. Also, acromegaly is extremely rare in adults.

Pancreatic carcinoma is not the correct diagnosis because a defect in pancreatic function would lead to decreased synthesis of several digestive proteins, including lipase. Thus, weight loss would occur, not weight gain as observed in the patient. Also, abdominal MRI showed no masses in pancreas.

Hypocortisolism is not the correct diagnosis because decreased activity of cortisol would lead to weight loss, not weight gain as observed in the patient. Also, abdominal MRI showed no trauma or abnormal masses in adrenal cortex. Hypocortisolism is usually always ATCH-independent.

Nephrolithiasis is not the correct diagnosis because no stones were observed in the kidneys in the MRI of the abdomen.

Hypercortisolism, or Cushing's disease, is the correct diagnosis. The cranial MRI shows a macroadenoma on the pituitary gland. This causes abnormal secretion of ACTH into the bloodstream, which prompts high cortisol secretion by adrenal cortex. Cortisol is responsible for all the symptoms the patient has been experiencing.