Pituitary stalk interruption syndrome (PSIS) is a rare congenital abnormality of the pituitary responsible for anterior pituitary deficiency. It is characterized by a triad of thin or interrupted pituitary stalk, small or absent pituitary gland, and ectopic posterior pituitary location [1].

The cause of PSIS is still unknown and many theories are proposed like mutations in the genes involved in pituitary embryogenesis or perinatal asphyxia [2].

Most cases of stalk transection syndrome present with growth retardation in childhood in association with GH deficiency. Posterior pituitary function is intact.

MRI is diagnostic showing the characteristic triad (Figure 1):
- Ectopic posterior pituitary (A). The ectopic neurohypophysis is most commonly seen in the infundibular recess or the hypothalamus.
- Thin or absent pituitary stalk (B): evaluated in postcontrast images
- Anterior pituitary hypoplasia (C)

Treatment consists of hormonal replacement.

References