

investigations including renal and liver function, serum calcium, vitamin D, testosterone and oestradiol levels. Osteoporosis-associated factors were identified using logistic regression and adjusted with confounders.

RESULTS

Our patients had a mean age of 73.1 years old (SD 7.2), with 62.6% being Malay (n = 67) and a mean BMI of 24.96 (SD 4.31). Among PCa patients treated with ADT, the prevalence of osteoporosis was 57.9% (n = 62), osteopenia was present in 39.3% (n = 42), and only 2.8% (n = 3) had normal bone mineral density. The most vulnerable site was the 1/3 radius with the highest osteoporosis prevalence of 43% (n = 46), followed by femoral neck at 29% (n = 31), lumbar spine at 22.4% (n = 23), and total hip at 11.2% (n = 12). Several predictive factors of osteoporosis were identified, including the absence of calcitriol usage (Adjusted Odd Ratio (AOR) = 5.07, CI 1.04-24.75, $p = 0.04$), duration of ADT (AOR = 1.02, CI 1.0-1.04, $p = 0.03$), and ongoing ADT (AOR = 5.08, CI 1.169-22.09, $p = 0.03$). In contrast, a higher weight conferred a lower risk for osteoporosis (AOR = 0.957, CI 0.92-0.99, $p = 0.01$).

CONCLUSION

This study highlights the importance of screening for osteoporosis in men who are undergoing ADT for PCa. Peripheral BMD is an effective tool to assess their bone health. Various risk factors, such as being underweight, not receiving calcitriol, continuous ADT, and longer treatment duration, can increase the likelihood of osteoporosis.

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A RARE CASE OF RECURRENT PARATHYROID CARCINOMA

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INTRODUCTION/BACKGROUND

One of the rare causes of primary hyperparathyroidism is parathyroid cancer. It is usually diagnosed post-operatively with histopathology. Surgery is always definitive in parathyroid carcinoma, but there have been reported recurrences of parathyroid cancer up to 20 years after a successful surgery. We report a case of a 61-year-old male who had bilateral inferior parathyroid carcinoma, surgically cured in 2020, but had a recurrence of parathyroid carcinoma after 3 years.

CASE

A 54-year-old male presented with headaches and dizziness and was suspected of having had a stroke. Further investigations revealed that the patient had primary hyperparathyroidism, with a corrected calcium level of 3.56 mmol/L (normal range 2.1-2.55), a phosphate level of 0.93 mmol/L (normal range 0.74-1.52), and an iPTH level of 148.28 pmol/L (normal range 1.59-7.24). Thyroid ultrasound detected a bilateral enlarged inferior parathyroid gland measuring 1.5 x 1.3 cm and 1.6 x 1.3 cm, and a SESTAMIBI scan confirmed the presence of parathyroid hormone hypersecretion. He underwent a successful bilateral inferior parathyroidectomy, and a histopathological examination revealed parathyroid carcinoma. He remained normocalcaemic, but his iPTH levels increased with time, from 12.05 pmol/L to 30.23 pmol/L. A subsequent ultrasound of the thyroid showed a tiny extra-thyroidal lesion adjacent to the left internal jugular vein, and a repeat SESTAMIBI scan revealed concordant parathyroid hypersecretion over the left superior thyroid gland. However, a neck CT scan failed to locate the lesion. Parathyroid carcinoma is commonly related to Multiple Endocrine Neoplasia (MEN Syndrome) and familial isolated hyperparathyroidism. 4D CT, MRI, and hybrids of SESTAMIBI and CT/MRI enable more precise localization of ectopic disease glands.

CONCLUSION

It is important to have lifetime surveillance for parathyroid carcinoma survivors, as the recurrence rate is high despite surgery, with a mean survival of 6-7 years.

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25 HYDROXY-VITAMIN-D LEVEL INVESTIGATION AND MANAGEMENT: CLINICAL AUDIT IN A TERTIARY HOSPITAL IN CENTRAL PAHANG, MALAYSIA

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INTRODUCTION/BACKGROUND

The prevalence of vitamin D deficiency in Malaysia in different populations has been quoted to be between 20 to 90%. Adequate vitamin D in food sources, sun exposure, or supplementation are preventative measures for vitamin D deficiency. Vitamin D level screening is limited by resources in government hospitals and targeted screening in high-risk patients are performed. This study was conducted to ascertain the practice of 25-hydroxyvitamin D screening and management of vitamin D deficiency.