EP_P030

ARM SPAN MINUS HEIGHT AND ITS RELATION TO FINAL HEIGHT IN PATIENTS WITH CONGENITAL ADRENAL HYPERPLASIA

https://doi.org/10.15605/jafes.039.S1.245

Wan Alyaa Atiqah binti Wan Zainalam,[1] Najib Majdi Yaacob,[2] Suhaimi bin Hussain[1]

[1]Department of Paediatrics, Hospital Universiti Sains Malaysia Jalan Raja Perempuan Zainab II, Kota Bharu, Kelantan, Malaysia
[2]Department of Biostatistics, Hospital Universiti Sains Malaysia Jalan Raja Perempuan Zainab II, Kota Bharu, Kelanta, Malaysia

INTRODUCTION

This study aimed to analyse the sensitivity and specificity of arm span minus height (AS-Ht) in predicting final height outcomes in paediatric patients with Congenital Adrenal Hyperplasia (CAH) at Hospital Universiti Sains Malaysia, Kelantan. The management of CAH with glucocorticoid replacement is challenging. Undersuppression of sex hormones leads to precocious puberty and short final height while over-suppression with glucocorticoid leads to obesity and impaired growth too. Therefore, we need clinical tools to help clinicians to predict final height. Good control CAH will have near normal AS-Ht. Poor control CAH will have a high value of AS-Ht which indicates short linear height.

METHODOLOGY

A cross-sectional study that recruited 31 CAH patients and 78 control group participants. We analysed patients' demographics, clinical characteristics, and auxological parameters (arm span, arm span height, midparental height). The sensitivity and specificity of AS-Ht in predicting final height were calculated.

RESULT

AS-Ht was significantly higher in the CAH group; (3.8 ± 3.9) compared to the control group; (1.0 ± 2.0, $p<0.001$). The Sensitivity and specificity of AS-Ht for predicting final height were 60.9% and 62.5%, respectively with AUC of 0.622, 95%CI (0.38,0.86). 74.2% of CAH patients had good predicted final height while 25.8% had poor final height outcome.

EP_P031

LATE PRESENTATION OF ADVANCED CENTRAL PRECOCIOUS PUBERTY

https://doi.org/10.15605/jafes.039.S1.246

Mohd Fyzal Bahrudin, Parvina Jayaraman, Noor Rafhati Adyani Abdullah

Endocrine Unit, Hospital Sultanah Bahiyah, Kedah, Malaysia

INTRODUCTION/BACKGROUND

Precocious puberty is characterized by the emergence of secondary sexual traits in females before the age of eight, and in males before the age of nine. Late presentation in a setting of precocious puberty inadvertently resulted in short final adult height. We describe a case of advanced central precocious puberty diagnosed at a later stage.

CASE

A 9-year-old female visited Klinik Kesihatan with symptomatic anaemia. Later, at 10 years and 4 months old, she visited the combined reproductive endocrine clinic. Her mother was unsure of her exact height changes, but she weighed 42 kg (>97th centile) and experienced thelarche at 6-7 years old. She attained pubarche at 8 years old and menarche at 8 years and 6 months old. Her bone age was advanced >3.4 SD with an estimated bone age of 14 years and a chronological age of 10 years and 8 months. Her height was 147 cm (3rd centile).

Hormonal profiles revealed E2 82 pg/mL, LH 10.34 IU/L, FSH 4.7 IU/L, Prolactin 573.7 m IU/L, TSH 1.08 m IU/L (0.35-4.94), T4 11.83 pmol/L (9-19.05), DHEAS 3.2 ug/dL (0.92-7.6), Basal 17-OHP 12.64 nmol/L (1.2-11.4). Synacthen 17-OHP test ruled out nonclassical congenital adrenal hyperplasia with peak 17-OHP 21.8 nmol/L at 60 minutes.

Transabdominal sonography revealed a uterus 5.8 cm x 3.8 cm with an endometrial thickness 11.55 mm. No obvious ovarian/adnexal mass and no obvious adrenal mass. Elevated LH level >0.3 IU/L indicates central precocious puberty and obviates the need for further GnRH stimulation test. IM Decapepty (Triptorelin) 3.75 mg monthly was administered to arrest her puberty aiming to reduce psychosocial stress due to early menarche and to improve final adult height.

CONCLUSION

Menarche is a late manifestation of puberty. In cases where a young girl presents with menses, likely, the optimal timing for pubertal blocker administration has already been missed. Therefore, early detection and management of precocious puberty is imperative.