**Introduction and Objectives**

Turner’s syndrome (TS) is the most common genetic disorder in females affecting approximately 1 in 2500 live female births, as a result of partial or complete X chromosomal monosomy. Age at diagnosis is important to start growth hormone at younger age to attain optimal adult height and to decide on hormone replacement therapy (HRT). This audit evaluated trends in presentation, age at diagnosis and investigation findings of children with TS at presentation and overall surveillance.

**Method**

Retrospective data analysis carried out on children diagnosed with Turner syndrome and followed up in Paediatric Endocrinology Clinic in Tertiary care Hospital for Children. Patient data (n=18) were analysed to evaluate trends in diagnosis and to audit clinical presentation, investigations and management.

**Results**

- **Age of Diagnosis**
  - Majority had small uterus and atretic ovaries and only two girls (11%) had renal anomalies

- **Chromosomal Abnormalities**
  - Majority had 45, X0
  - 6% had 45, X0/46, XX
  - 6% had 45, X0/46, XY
  - 6% had 45X INV(9) (p)
  - 6% had 45x[4]/46, xx, r(x)[3]
  - 6% had 46xx del(x)q21.3->27 terminal deletion on the long arm on X
  - not done

- **Initial Presentation**
  - 72% had short stature
  - 17% had cardiac lesions
  - 11% had dysmorphism

- **Echocardiogram Findings**
  - Normal 44.40%
  - trival MR 5.60%
  - trival AR 5.60%
  - PAPVD 11%
  - bicuspid AV 16.70%
  - COA 16.70%

- **Management**
  - 72% on growth hormone therapy
  - 16% on hormone replacement therapy
  - Two of them underwent bilateral gonadectomy as they carry Y chromosome material.
  - Abnormal thyroid functions found in 22% and currently on thyroxine.
  - Screening for hearing detected 22% of girls with mild to moderate hearing impairment
  - Ophthalmologic assessment found two girls (11%) with strabismus and two (11%) with refractory errors.

**Conclusion**

This study shows delay in diagnosing and referring patients with TS commonly after 11 years of age which limit growth hormone therapy and delay in detecting other system involvement.

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