Disclosure Statement: The authors have nothing to disclose

**Background:** Diagnosis of craniopharyngiomas (CP) in childhood is often delayed due to non specific symptoms.

**Objective:** We retrospectively reviewed auxological data, clinical presentation, duration of symptoms, tumor location of 117 patients (M/F 56/41) diagnosed after 01/01/2000, followed-up in 14 Italian centers of pediatric endocrinology belonging to the Italian Society for Pediatric Endocrinology and Diabetology (see also poster 401-P1)

**Results:** The patients were treated in 18 different centers across Italy. Median age at diagnosis was 8.3 years (yrs) (range 0.1-18, one case diagnosed prenatally). Height-SDS: -1± 0.13; Weight-SDS: -0.33±0.15.

Median duration of symptoms was 10.2±12.4 months (mo) (range 0-60 mo)

**CORRELATION OF DURATION OF SYMPTOMS AND AGE**

Duration of symptoms was positively correlated with age (r=0.21, p 0.02) (especially in patients younger than 7 yrs)

**Tumor location**

Tumor size, location (intra/suprasellar) and third ventricle involvement were not related to duration of symptoms

OVERWEIGHT : BMI-SDS at diagnosis was positively correlated with suprasellar location (p=0.03)

**Symptoms at diagnosis**

53% of patients presented with ≥ 2 symptoms (most frequent association: headache plus visual impairment or vomits)

**ENDOCRINE DEFICITS (60 % of patients):**

1- GH Deficit 65%
2- TSH Deficit 37%
3 - ACTH Deficit 5.5%

**Conclusion:**

Diagnosis of craniopharyngiomas (CP) in childhood is often delayed, especially in older children.

The hypothalamic involvement correlated with elevated BMI at diagnosis.

Headache with visual deficits and growth impairment should be considered alarming symptoms.