



THE ADVENT OF DISORDERS OF SEXUAL DIFFERENTIATION TEAM AT A MAJOR TEACHING HOSPITAL IN NIGERIA: IMPACT ON PATIENT MANAGEMENT AND OUTCOME



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Background

Disorders of Sexual Differentiation (DSD) constitute a great challenge in patient management especially in a low resource setting with inadequate manpower in various specialities, as it involves critical reasoning, careful evaluation, multidisciplinary involvement and making difficult decisions such as rearing sex and gender issues.

Aim

- * To highlight the importance of forming a DSD team in the management of these children and to document our initial experience in the Paediatric Endocrine/Genetic unit of UCH, Ibadan, Nigeria.

Methods

- * The DSD team of the hospital was formed in the year 2010 with members from Paediatric endocrinology,

Paediatric surgery, Psychiatry, Radiology and Obstetrics & Gynaecology and held jointly bimonthly clinics.

- * We present patients with DSD managed in the unit between 2010 and 2014.
- * Information was obtained from patients' records and from the Endocrinology register.
- * Details of bio data, clinical history, investigations, treatment and outcome were retrieved.

Conclusion

The presence of a DSD team on ground has caused an integrated approach to the management of these children despite the intense limitations in terms of inability to get important hormonal and genetic tests done in every case because of financial constraints.

Characteristics of Patients with DSD

CHARACTERISTICS	
Age at presentation	
0 – 28days	4
1 – 12months	2
1 – 5 years	3
> 5years	4
Presence of palpable gonads	9 (69%)
Pelvic ultrasound scan	11 (85%)
Karyotype	3 (23%)
Mutational analysis	2 (15%) partial androgen insensitivity syndrome, 5 alpha reductase deficiency
Interventional surgery	5 (39%), 2 awaiting surgery
Commonest cause of DSD:-	CAH 3 (23%)
Number of deaths	2 (15%) CAH, multiple congenital anomalies
Number of defaults	1 (67%)

