

INTRODUCTION

Non-classic congenital hyperplasia adrenal syndrome (NCCAH) and polycystic ovary (PCOS) present with similar hyperandrogenic signs symptoms in adolescent girls and may be associated with the development of cardiometabolic disorders.

AIM

• To evaluate the prevalence and the association between the clinical and biochemical parameters of hyperandrogenism and metabolic disorders in girls with NCCAH and PCOS at the time of the initial diagnosis.

Clinical and metabolic characteristics of hyperandrogenic girls with nonclassic congenital adrenal hyperplasia and polycystic ovary syndrome

Hirsutis

Acne

Alopec

Overw obesity

Menst disorde

METHODS

A total of 114 girls (mean age 14.7±2.8 years) newly diagnosed with NCCAH and PCOS between 2016-2020, were included in the study.

Data was collected about:

- Anthropometrics
- height, weight,
- BMI (the overweight/obesity was defined according to IOTF scales)
- Physical examination
- Laboratory tests:
- Metabolic parameters (serum lipids, glucose, insulin, CRP)
- Hormonal analysis (total testosterone, 170HProgesterone, DHEAS, androstendione, LH, FSH)
- Pelvic ultrasound

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RESULTS

	NCCAH	PCOS	P-VALUE
sm	84.7 %	52.7 %	<0.0001
	33.9%	9.1%	0.001
ia	18.6 %	3.6 %	0.012
eight/ /	27.1 %	56.4 %	0.001
rual ers	60%	94.5%	0.02

CONCLUSIONS

The current results suggest that:

hirsutism and acne are the main clinical symptoms in NCCAH girls at diagnosis

PCOS patients present more often with menstrual disorders and obesity.

metabolic disorders are not expressed at the diagnosis of both disorders.

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- Mean age 14.7 ± 2.8 years
- NCCAH girls were 51.8% (n=59) vs PCOS 41.9% (n=55)
- DHEAS and FSH levels, showed **no** differences between the groups.
- Testosterone level correlated significantly with the presence of menstrual disturbances (r=0.642, p=0.001).
- Polycystic ovarian morphology was observed in 32.5% of all participants, with a significantly higher prevalence **among PCOS patients** (56.4% vs. 10.2%, p<0.0001).
- The parameters of lipid and glucose metabolism between the groups, did not differ significantly
- Patients with **PCOS had higher CRP values** (p=0.025).

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