CORTICOTROPIN-INDEPENDENT CUSHING SYNDROME IN A 2-YEAR-OLD GIRL: DIAGNOSIS AND TREATMENT ARE NOT A STRAIGHTFORWARD ROAD

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INTRODUCTION

• Endogenous Cushing Syndrome (CS) in the paediatric age group is a rare disease, and corticotropin-independent forms are even less frequent.
• In childhood, it carries a significant burden, not only because of the prolonged hypercortisolism long-term effects, but also for the treatment-associated morbidity.

CASE REPORT

• 23 month-old girl
• Irritability, depressed mood
• Rapid weight gain + gross motor skills and language regression in the previous 4 months
• BP 164/114 mmHg (>> 99th centile)
• Morbid central obesity: BMI-SD +7.36
• Waist to height ratio: 73%
• Hypertrochisis
• “Full moon” and facial acne
• Cervical acochithosis nigrans and buffalo hump
• Photos were taken after parental consent.

CONCLUSIONS

• Some forms of adrenal cortisol hyperproduction may not be readily apparent on routinely used imaging techniques, posing additional difficulties in the diagnosis in pediatric patients.
• Scintigraphic studies are a safe and effective diagnostic option even in young children.
• Unfortunately, despite the attempt, unilateral adrenalectomy did not solve bilateral micronodular adrenal hyperplasia. The remission of the other gland, and posterior replacing hormonal therapy will be inevitable.

REFERENCES


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