HDR SYNDROME (BARAKAT SYNDROME): CASE REPORT
Omneya Magdy Omar
Alexandria University, Pediatrics, Alexandria, Egypt

INTRODUCTION

- Barakat syndrome (HDR syndrome) components are hypoparathyroidism (H), sensorineural deafness (D) and renal disease (R).
- It caused by an autosomal dominant inheritance, being mostly associated with deletions in chromosome 10p14 or mutations in GATA3 gene.
- We present a girl with HDR syndrome in Alexandria university

CASE REPORT

- Here we describe an eleven years old girl
- She was born to non-consanguineous parents.
- She came to an emergency department complaining of the occurrence of one attack of tonic convulsion with loss of consciousness.
- Physical examination on admission revealed positive spasm of the feet and hands, she wears hearing aids.
- Laboratory assessment revealed
  - Low total serum calcium (5.2 mg/dL, reference value (RV): 8.8 to 10.8 mg/dL)
  - Low parathyroid hormone (PTH) concentration (9.12 pg/mL, RV: 9 to 52 pg/mL)
  - Magnesium (2.1 mg/dL, RV: 1.7 to 2.7
  - High serum phosphorus (10 mg/dL, RV: 4.7 mg/dL)
- The abdominal ultrasound revealed a simple cyst with a thin wall and clear content in mid zone diffuse increase in cortical echogenicity of the kidneys.
- The audiogram revealed bilateral sensorineural hearing impairment.
- CT brain revealed normal morphological features of both cerebral hemisphere and absent basal ganglia’s calcificat
- Treatment was initiated with calcitriol and calcium carbonate supplementation.

CONCLUSIONS

- The combination of hypoparathyroidism congenital and sensorineural deafness and in pointed to the diagnosis of HDR syndrome

REFERENCES


ACKNOWLEDGEMENTS

We acknowledge the patient and their parents

CONTACT INFORMATION

drmonymagdy@yahoo.com
o_magdy09@alexmed.edu.eg