

LATE DIAGNOSIS, EARLY RESPONSE - OR THE STORY OF A SMILE

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CASE:

33 year old man

1st presenting in may 2014 for:

- marked asthenia
- drowsiness
- muscular aches
- delay in growing

H=1.66m
W=43kg
BMI=15,6kg/m²

The **physiological exam** showed - difficulties in communicating and relation with the others based on his own negative image of himself, - lack of self- trust , - auto-isolation tendency, - state of depression.



LABS / IMAGISTICS



PANHYPOPITUITARISM:

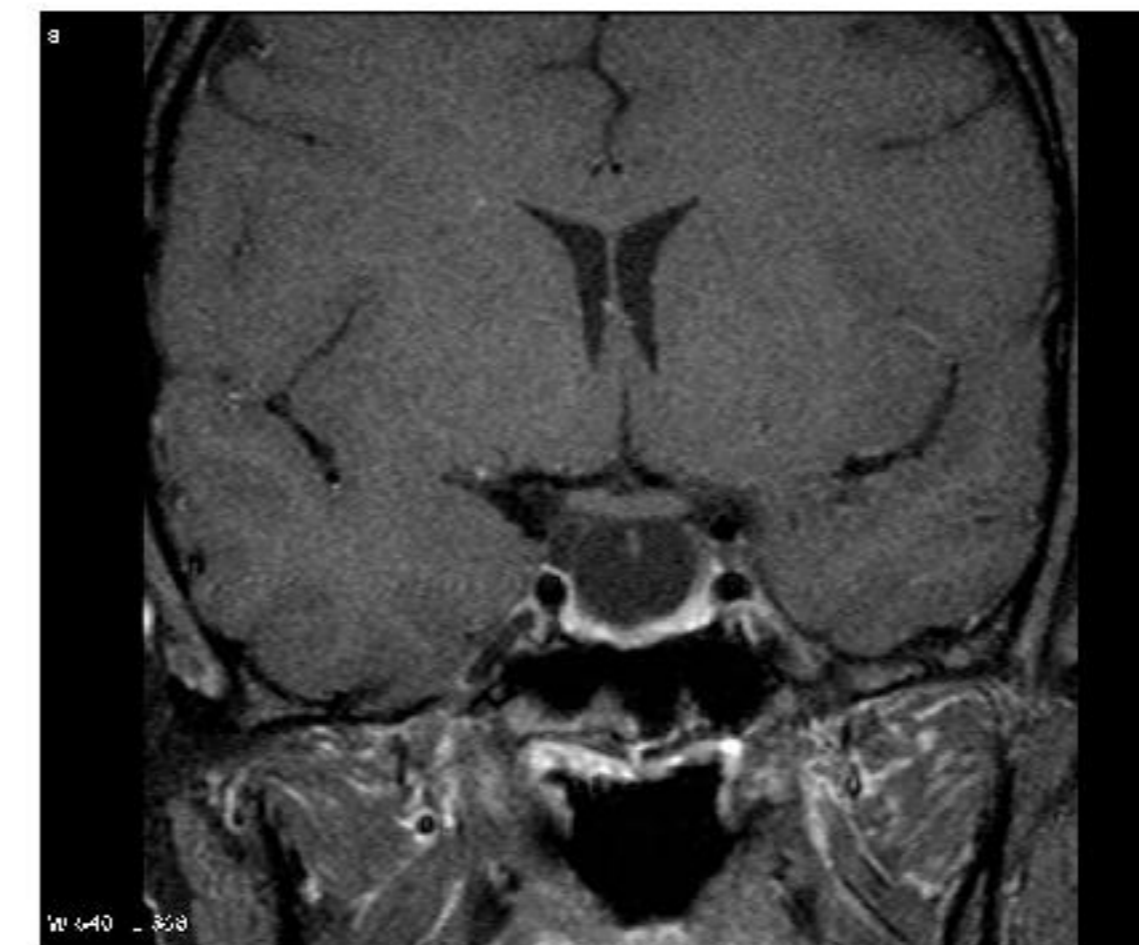
TSH=0,38UI/ml(0,4-4,2) FT4=3,44pmol/l (9-22)

ACTH=7,66pg/ml(7,2-63,3) CORTISOLE=62nmol/l (171-536)
PRL = 88uUI/ml (98-456)

FSH <0,3 mUI/ml

LH <0,1 mUI/ml TESTOSTERONE=0,6nmol/l(9,9-27,8)

GH=0,1ng/ml(<0,5) IGF1=25ng/ml (85-283)



TREATMENT

PREDNISOLONE 7,5 mg/day
LEVO-THYROXINE 87,5ug/day
TESTOSTERONE UNDECANOATE 1mg/3 months

NO hGH !!!

6 months

EVOLUTION: - blood pressure raised,
-hair and skin improved,
-started puberty,

- **changes in his emotional area :**

- + improved self-image,
- +absence of depressive estates,
- + increased capacity of communication,
- + relating availability and most of all ... the appearance of a + **smile**.

CONCLUSIONS

Appropriate substitution therapy has a great impact not only on the clinical appearance of our patient but also on his psychological development.

Interestingly was that at the beginning of treatment he identified himself with teenagers of 14-16 years old (exactly as his bone age) and afterwards he started making new older friends (more appropriate to his biological age).

