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INTRODUCTION

Hyperthecosis ovarian is a type of hyperandrogenism and severe insulin resistance, usually found in postmenopausal women.

CASE REPORT

She came to our hospital because of a rapidly progressive virilization.

She had no medical history

For the previous 10 months, she had felt progressive growth of terminal hair in androgen-dependent areas (face, upper abdomen, breasts, lumbar and interpectoral zone), abundant hair loss, facial acne and voice changes.

12-YEAR-OLD GIRL

Axilarche and pubarche had occurred when she was 10 years old. She had not had menarche. She was not in contact with exogenous testosterone preparations.

Physical examination revealed a score of 28 on the Ferriman Gallway scale, mild cervical acanthosis nigricans, clitoris hypertrophy and Tanner stage 2 breast development.

Table 1. LABORATORY TEST

	VALUE	NORMAL
Glucose (mg/dl)	78	70-100
HbA1C (%)	4,8	4,5-5,6
FSH (mU/ml)	7,47	3,6-12,5
LH (mU/ml)	10,3	1,7-12,5
Prolactin(ng/ml)	21,47	6-30
17 OH-PG (ng/ml)	2,8	0,1-1,4
DHEAS (mcg / dl)	96,3	33,9-280
Androstenedione (ng/ml)	3,2	0,5-4,7
Total Testosterone (ng/ml)	4,23	0,06-0,82
Free testosterone (pg/ml)	6,2	0,2-3,2
SHBG (nmol/l)	7	20-14
Insulin(mU/ml)	100,9	2,6-24,9

Hypercortisolism and 21-hydroxylase deficiency tests were negative.

The pelvic MRI showed enlarged ovaries with oval morphology of 50x17x18mm (right) and 48x19x18 mm (left), which had cystic images with multiple peripheral hypointense central stroma and normal adrenal glands.

The patient underwent a laparoscopic bilateral ovarian wedge resection.

The pathology showed ovarian hyperthecosis with androgen-positive receptors.

After the surgery, the total testosterone levels were 4.12 ng / ml. Treatment was initiated with flutamide 250 mg / day and metformin 2000mg / day. The patient experimented the menarche two months after starting treatment. Currently it is being considered to start GnRH analogues and hormone replacement therapy with metformin.

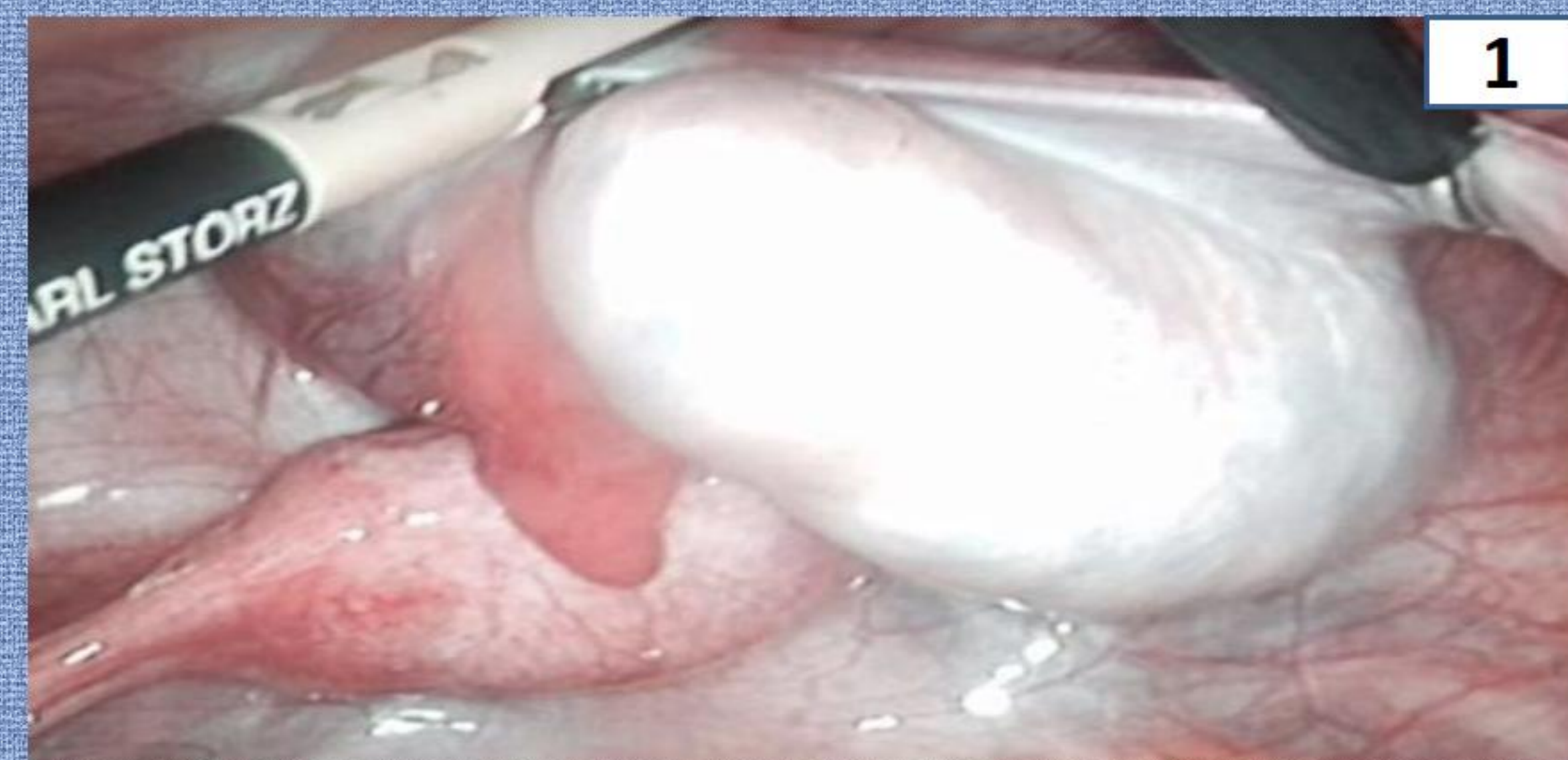


Figure 1 and 2 . Ovarian wedge resection

CONCLUSION

The clinical interest of this case lies in the severity of the disease, early age of onset and the difficult therapeutic management of the disease in premenopausal women, with very little bibliography available.