

SHEEHAN'S SYNDROME- A RARE DISEASE WITH TYPICAL SYMPTOMS



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INTRODUCTION

The enlarged pituitary gland of pregnancy is susceptible to any compromise to its blood supply. **Sheehan's syndrome (SS)** occurs as a result of post-partum pituitary infarction or haemorrhage and usually leads to hypopituitarism. It can be fatal but clinical manifestations may change from one patient to another and symptoms may not occur for many years.



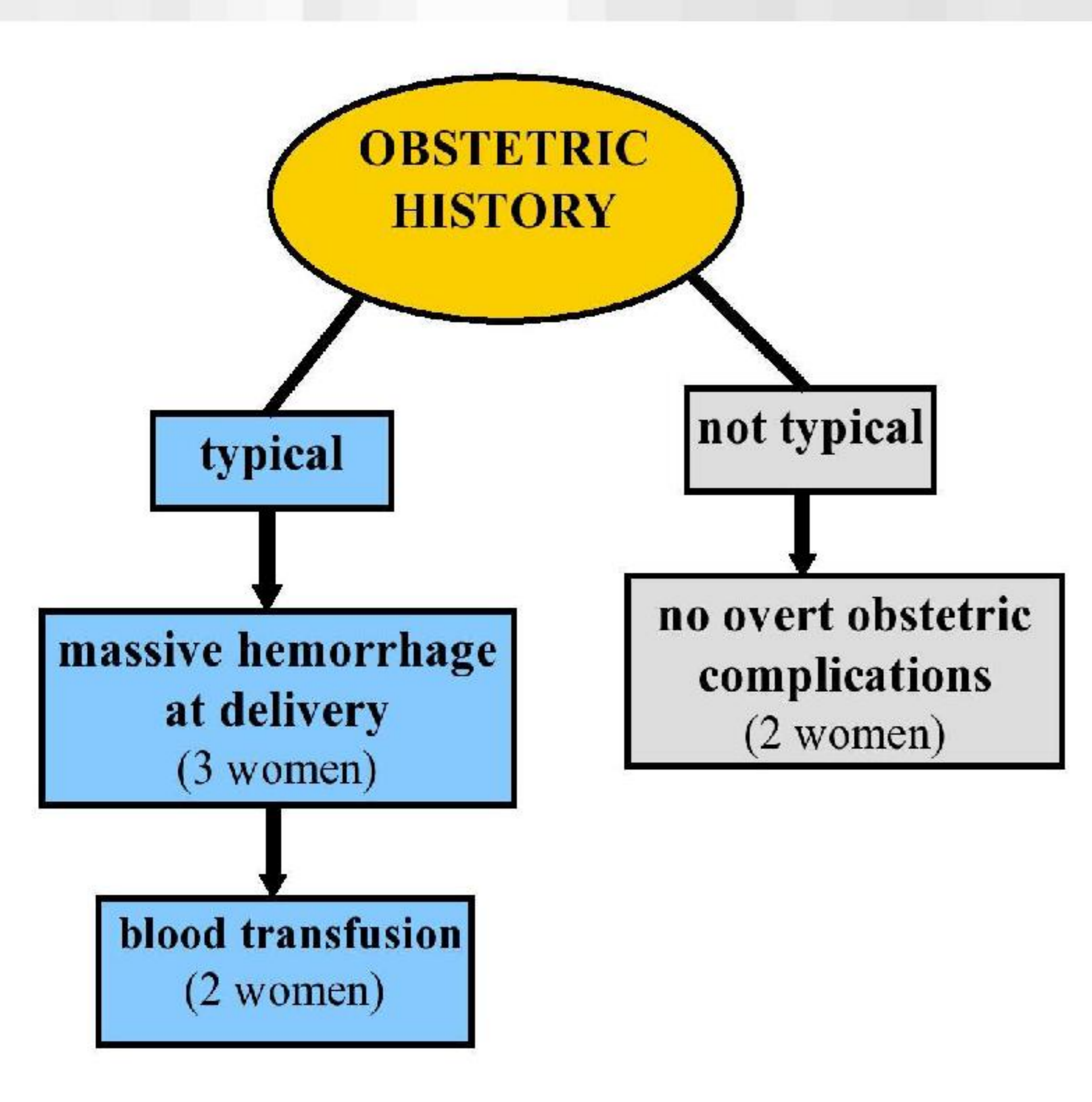
METHODS

We analyzed retrospectively **5 cases of women with SS** aged 26-56 years, treated at Endocrinology Department between 2003 and 2014, to describe clinical manifestations. The diagnosis of SS was made based on medical history, clinical symptoms, hormonal tests and MRI scans.

RESULTS

Mean age of the patients was **41.00 ± 12.33 years** (range 26-56 years).

All subjects had typical physical signs of SS.



The **duration** between **date of the last delivery** and **time of diagnosis** was 9.82 ± 8.85 years (ranged from 1 month to 19 years).

The **number of pregnancies** was from 1 to 4.



MRI scans revealed total or partially empty sella in 3 women and small (beyond the normal range) pituitary gland in 2 cases.

SYMPTOMS	TREATMENT
1. prolactin deficiency with a lack of postpartum milk production	-
2. hypogonadotropic hypogonadism with a lack of menstruation following delivery	sex hormone replacement
3. secondary hypothyroidism (partial or total)	levothyroxine (75.00 ± 43.30 µg/day)
4. secondary adrenal cortex failure (partial or total)	hydrocortisone (25.00 ± 7.07 mg/day)
5. growth hormone deficiency	-
6. diabetes insipidus (transient- only in 1 woman)	desmopressin (120 µg/day for 17 months)

CONCLUSION: Although SS is not a common disease, it should be remembered about concerning women with pituitary insufficiency developing at different times after delivery.

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