Cardiovascular Assessment In Girls And Women With Turner Syndrome: A Survey of Current Practice In The United Kingdom

A Mason1, A Smyth 2, SC Wong 1

1 Developmental Endocrinology Research Group, University of Glasgow, Royal Hospital for Children, Glasgow, UK
2 Turner Syndrome Support Society, UK

In 2007, the Turner Syndrome (TS) Consensus Study Group developed an international guideline for clinical care of girls and women with TS. Given emerging concerns of long term cardiovascular complications, the consensus recommends that cardiac MRI should be performed when girls are old enough to tolerate the procedure or at the time of transition and to be repeated at least every 5-10 years.

We conducted a survey of cardiovascular (CVS) assessment in girls and women with TS in all tertiary paediatric endocrinology centres and all adult centres with dedicated TS clinical service in the UK.

An online survey was sent to 49 consultants (20 paediatric, 29 adult). There were 26/49 (53%) responders.

Do you provide information on cardiovascular risk with your girls and women with Turner Syndrome

Professional Background of Responders

Frequency of BP monitoring in Paediatrics (responders,n=12)
- Annually (n,%): 3, 25%
- 6-monthly: 6, 50%
- 3-4 monthly: 3, 25%
- Every Clinic: -

Frequency of BP monitoring in Adults (responders,n=13)
- Annually: 10, 77%
- 6-monthly: 2, 15%
- 3-4 monthly: 1, 8%

Despite the existing consensus, this survey, of clinicians providing care to individuals with TS in the UK, demonstrates wide variation in cardiovascular assessment especially in adolescence. This variability may relate to access to local expertise and specialist investigations. Uncertainties surrounding the value of investigations to clinical outcome of aortic dissection especially in childhood may also be a factor.