SLEP SUMMER SCHOOL 2020

Fellow 2. Noemi Oropeza

The patient was evaluated by a pediatric endocrinologist at one month of life due to bilateral cryptorchidism and poor weight gain. He was born at 40 weeks of gestational age by cesarean. His birth weight was 3670 gr. He had hyperbilirubinemia at 6 days of life with spontaneous resolution. The baby is the first child of healthy non-consanguineous parents with no family pathological history.

At one month and 24 days of age, the laboratory tests showed normal cortisol 24 ug/dl VR (5 - 25 ug / dl) and high 17 OH Progesterone 8.4 ng / ml VR (0.15 - 1.45 ng / ml). Congenital Adrenal Hyperplasia was suspected, and the baby started treatment with glucocorticoids and mineralocorticoids.

Due to the persistence of poor weight gain, his parents decide to ask for a second opinion at Garraham Children Hospital in Argentina.The child was hospitalized, and treatment was discontinued in order to reevaluate the diagnosis. Biochemical evaluation showed normal levels of 17 OH Progesterone (0.54 and 0.75 ng/ml), undetectable cortisol and elevated ACTH (340 - 178 pg/ml). Congenital Adrenal Hyperplasia was ruled out.