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Hypothyroidism in kids – Unveiling the uncertainty

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Primary Hypothyroidism in children can be congenital/Acquired. The prevalence of hypothyroidism in children ranges from 2.5 – 4 %. Hypothyroidism in children could be due to dysgenesis (75%), dyshormonogenesis (20%), and thyroiditis(5%). In India, autoimmune thyroiditis is the most common cause of acquired hypothyroidism. Thyroid hormone deficiency can affect the growth and development of a child. Cognitive impairment occurs if hypothyroidism occurs in the first 2 years of life. After 2 years of age its mainly the somatic growth and pubertal timing that are affected. Primary Hypothyroidism can cause precocious puberty, and ovarian enlargement with delayed bone age called as VAN WYCK GRUMBACH SYNDROME. Previous case reports have demonstrated bilateral ovarian enlargement which was resolved with levothyroxine replacement. However, we describe a case of 10-year-old girl with a delayed diagnosis of primary hypothyroidism which resulted in ovarian torsion with infarction and loss of ovary. Our case report throws light on the pathophysiology of ovarian hyperstimulation.

Conclusion: Undetected primary hypothyroidism can lead to acute ovarian torsion in children. In any child with ovarian enlargement in addition to growth failure or delayed bone age, primary hypothyroidism should be suspected. Hypothyroidism can be an acute surgical emergency, surveillance prevents this calamitous presentation of a common childhood condition.

Biography

Kavya Jonnalagadda completed her educations like M.B.B.S from PESIMSR, kuppam, Andhra Pradesh and M.D from katuri medical college, Guntur D.M. from amrita institute of medical sciences, kochi she is a endocrine specialist in hospital called sree charith hospital.