

2013/14 Batch
Tutorial on Endocrine System
Prof. N. Ratnatunga & Dr. S. Jayasinghe
06.06.2018 2.30 pm – 3.30 pm

Dr. S. Jayasinghe's component

52 year-old man presented with longstanding joint pains mainly in the knees. On cross-questioning he admitted of change in facial appearance, tightness of ring, voice changes and increased shoe size. On examination he had greasy skin, prognathism and bi-temporal hemianopia. BP was 150/110 mmHg.

On dipstick urine test glycosuria was detected. Based on these findings he was suspected of having Acromegaly.

Investigations revealed following results

Test	Result	Reference interval
Glucose	9 mmol/L	3.5-5.5
LH	0.1 U/L	1.5-9.3
FSH	<0.1 U/L	0.35-5.5
GH	18.5 U/L	<10
Prolactin	1100 mU/L	60-120

1. What is the mechanism for low gonadotrophins (FSH/LH)?
2. What additional tests might be useful in assessing the extent of pituitary hormone deficiencies?
3. Name possible reasons for the high prolactin level
4. What additional tests can be performed to confirm or exclude acromegaly?