

IHMM CDGP

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Question: 1

- 1) Hypergonadotrophic hypogonadism
 - 2) Hypogonadotrophic hypogonadism
-
- A. Normal variants of precocious puberty
 - B. Role of lh in male puberty
 - C. Categorisation of Precocious puberty
 - D. Categorisation of delayed puberty

Answer: D

Question: 2

Made in ovaries

IN girls:

- 1) Causes pubertal growth spurt
 - 2) Matures epiphyses (limiting longitudinal growth)
 - 3) Increases uterine growth (to get to a size where it could carry a pregnancy)
 - 4) Increases BMD
-
- A. Role of testosterone in boys during puberty
 - B. Role of oestrogen in girls during puberty
 - C. Role of FSH in female puberty
 - D. Role of testosterone in girls during puberty

Answer: B

Question: 3

Testicular volume of less than 4mls in a boy of 14 or more

- A. of Precocious puberty in girls
- B. of Precocious puberty in boys
- C. of Delayed puberty in girls
- D. of delayed puberty in boys

Answer: D

Question: 4

Low FSH and Low LH

- Poor messaging
- This means that the gonads are not receiving any signals/ enough signals = pubertal growth will not occur

- A. Hyperthyroidism
- B. Hypogonadotrophic hypogonadism
- C. Menopause
- D. Anabolic steroid use

Answer: B

Question: 5

Breast stage 2 in a girl under the age of 8

- Will have the development of breast bud, with elevation of papilla and enlargement of areolar diameter

- A. Role of Lh in female puberty
- B. of delayed puberty in boys
- C. of Precocious puberty in boys
- D. of Precocious puberty in girls

Answer: C

Question: 6

- Adrenarche
- Secondary CPP
- Congenital Adrenal hyperplasia
- GIPP (More common in boys)

- A. Role of oestrogen in girls during puberty
- B. of delayed puberty in boys
- C. Aetiology of precocious puberty in boys
- D. Sequence of pubertal events in boys

Answer: C

Question: 7

Long acting GnRH agonists (GnRH analogs - switch off gonadotrophins)

- Because initially will cause a surge in LH and FSH release
- However over time will downregulate their release

- A. Influence of timing of puberty with Bone mineral density
- B. Aetiology of precocious puberty in girls
- C. Other ways of assessing puberty (non-staging techniques)
- D. Treatment of Gonadotrophin dependent precocious puberty

Answer: D

Question: 8

- Can be a normal variation in puberty
- = Cause of Constitutional Delay in growth and puberty (CDGP = normal puberty but just late)

- A. Permanent hypogonadotropic hypogonadism
- B. Transient hypogonadotropic hypogonadism
- C. of Delayed puberty in girls
- D. Sequence of pubertal events in girls

Answer: B

Question: 9

Only around 2-3%

- So menarche is a good signal in women that growth has more or less finished

- A. After Menarche how much more linear growth will a female expect to undergo
- B. Treatment of Gonadotrophin dependent precocious puberty
- C. How can we get permanent hypogonadotropic hypogonadism to become transient?
- D. Therapeutic intervention for CDGP in boys and girls

Answer: A

Question: 10

- Oestrogen is a mediator of pubertal growth in both sexes
- Oestrogen comes from ovary in girls and is aromatised from testicular testosterone in boys
- Oestrogen has a direct effect on epiphyseal growth plate
- Oestrogen also has an indirect effect to increase GH secretion

Growth Spurt

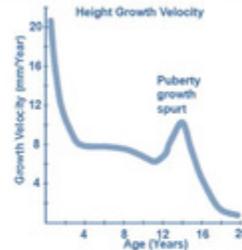
Complex interaction

- *Growth hormone*
- *Oestrogen (boys and girls)*

Earlier in girls - approx. 2 years

Biphasic effect of oestrogen on epiphyseal growth

- *Low levels → linear growth & bone maturation*
- *High levels → epiphyseal fusion*



- Role of oestrogen in girls during puberty
- Role of testosterone in boys during puberty
- Role of oestrogen in pubertal growth spurt
- Role of FSH in male puberty

Answer: C

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