

# Mc Cune Albright Syndrome: a diagnosis to be kept in mind

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## Introduction

**Precocious puberty** often leads to anxiety in patients and their families but also in clinicians searching for the final diagnosis.

After adequate investigation, the majority of the cases in girls turn out to be idiopathic.

We present a case of McCune Albright syndrome in order to call attention to a rare cause of sexual precocity and the value of ultrasound in the evaluation of these situations

## Case report

✓ **3 years old:** vaginal bleeding with no other signs of pubertal development

✓ **Laboratory evaluation:**

✓ LH 0.9 mIU/ml; FSH 3 mIU/ml

✓ E2 27,6 pg/ml

✓ **Ultrasound:**

✓ Endometrium 6 mm

✓ Normal ovarian volume

✓ **Computed tomography and bone scintigraphy**

✓ Fibrous dysplastic occipitus

- ✓ Reversed pubertal sequence
  - ✓ Adrenarche: 5
  - ✓ Thelarche: 8
- ✓ Irregular cycles until 10 years old



Figure 1. Uterus



Figure 2. Corpus luteum in the right ovary, left ovary with microfollicles

## Conclusion

Due to autonomous production of estrogen by the ovaries, ultrasound image of the female reproductive tract is inconsistent with chronologic age. Pelvic ultrasound demonstrates uterus similar to adult women of reproductive age with a well defined endometrium and cervix and clearly identified ovaries with several follicles.

Ultrasonography of the pelvis has also an important role excluding other causes of GnRH-independent precocious puberty conditions like ovarian cysts or tumors.