

Randall Children's Hospital

Co-Management and Referral Guidelines

Precocious Puberty

Randall Children's Diabetes and Endocrine Center

Phone: 503-413-1600

Fax: 503-413-1915

Introduction

Puberty is defined by:

- Appearance of breast buds in girls
- Testicular enlargement in boys

Adrenarche is defined by:

- Appearance of pubic or axillary hair, body odor, accelerated growth spurt, acne, oily skin, hair loss

Precocious puberty and premature adrenarche are defined as appearance of these signs before the age of **8 years in girls** and **9 years in boys**.

The level of concern and extent of evaluation increases with younger age at presentation.

Evaluation and Management

Whom to screen

- Children who develop secondary sexual characteristics before the age of 8 for girls and before the age of 9 for boys

How to screen

- History and physical exam to include assessment of:
 - Secondary sexual characteristics
 - Age at which these findings were first noted
 - Pace of pubertal progression
- Other conditions that can cause or be associated with premature adrenarche should be considered, including tumors, Cushing's syndrome, exogenous androgen, etc.
- Family history of timing of adrenarche, polycystic ovary syndrome and type 2 diabetes should also be solicited.
- Bone age should be performed at baseline for children with premature adrenarche or puberty.
- Girls between the ages of 7 and 8 and boys between the ages of 8 and 9 can be followed clinically and with repeat bone age every six months. Blood work is not required at baseline. These can be obtained by the endocrinologist, if seen by them.

When to refer

- Refer to endocrinology if the child has:
 - Advanced bone age
 - Secondary sexual development and is a girl less than 7 years of age or a boy less than 8 years of age
 - Signs of increased intracranial pressure OR rapid pubertal progression
- Based on symptoms and signs, also consider imaging, neurology or oncology referral.

Urgent referral

- Very young age at presentation
 - The younger the age, the higher the concern (if unsure, contact the on-call pediatric endocrinologist)
- Signs of increased intracranial pressure
- Vaginal bleeding in girls less than 9 years of age (also consider sexual abuse, trauma, foreign body, etc.)

(continued)



Routine referral

- Advanced bone age
 - Please push image to PACS or have parents bring the bone age to the visit.
 - Please provide growth charts.
- Rapid pubertal progression during the observation period

Referral process

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For urgent referrals, call Legacy One Call Consult & Transfer: 1-800-500-9111 to speak with the on-call pediatric endocrinologist.

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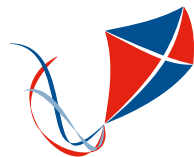
Additional Resources

Definition, etiology and evaluation of precocious puberty:

<http://www.uptodate.com/contents/definition-etiology-and-evaluation-of-precocious-puberty>

Updated February 2017

Find this and other co-management/referral guidelines online at: www.legacyhealth.org/randallguidelines



**RANDALL CHILDREN'S
HOSPITAL**

LEGACY EMANUEL