

Comment

Jastrzębska discusses in the section “Recommendations” the guidelines developed in 2016 by the European Group on Graves’ Orbitopathy (EUGOGO), taking into consideration both the diagnostics and the treatment of thyroid-associated orbitopathy. It is worth emphasising the fact of introducing to the recommendations on treating mild/severe lesions, apart from the standard one, also an increased dose of methylprednisolone. Conditions of the risk of loss of sight are accompanied, apart from the optic nerve neuropathy and cornea ulceration, also by eyeball subluxation constituting an indication for immediate surgical decompression of the orbital cavities.

Godziejewska-Zawada and Szyfner tried to define in their paper “Rapid-onset type 1 diabetes mellitus in middle-aged and older persons”, whether in the case of patients over 40 with a recently diagnosed diabetes mellitus, there are factors which may forecast the occurrence of a rapidly showing type 1 diabetes. Such factors, which should draw the doctor’s attention, are: very high glycaemia at the beginning of the inpatient stay at disproportionately low concentration of glycated haemoglobin and rapid dependence on insulin, making it impossible to apply oral medication under hospital conditions.

Kruszyńska et al. show in their paper “High prevalence of autoimmune thyroiditis in Polish PCOS women and its association with insulin resistance” that in the case of women with polycystic ovary syndrome, Hashimoto’s thyroiditis is present in nearly 35%, while hypothyreosis in 23%. Moreover, women with concomitant polycystic ovary syndrome and autoimmune thyroiditis have an increased concentration of insulin and higher HOMA index. The authors conclude for patients with polycystic ovary syndrome to exclude Hashimoto’s thyroiditis and hypothyroidism.

The article by Nowak et al. concerning the usefulness of OGTT in finding carbohydrates metabolism disorders in patients chronically treated with glucocorticosteroids shows the results of preliminary tests concerning this issue. A fact was indicated that the binding guidelines based only on monitoring glucose concentration fasting are impractical and useless. It is recommended to perform an oral glucose tolerance test in all the patients treated chronically with glucocorticosteroids regardless of other risk factors of diabetes, since it is the most effective screening test.

Bornikowska et al. presented an interesting case of a late diagnosed Kallmann syndrome, one of the most frequent causes of congenital hypergonadotropic hypogonadism with concomitant smell disorders. The paper emphasises the fact of how difficult it is to diagnose the syndrome, especially in the early period of life in girls due to few symptoms in the course, and in youth due to the difficulty in differentiation with a constitutionally retarded growing and maturation.

Juszczyszyn et al. present in their paper a description of a case of a woman with adrenal incidentaloma. Tumour phenotype in imaging corresponded to a benign lesion. However, in the course of diagnostics it turned out that a large lipid content in the tumour excluded the presence of chromaffin texture. There are mixed tumours, “chimeric”, which apart from a significant lipid content, typical of adenomata, also contain chromaffin texture. They constitute a rare, yet significant diagnostic problem, an example of which is the presented case study.

Kozakowski in his paper “Eating disorder difficult to diagnose after bariatric surgery – a case report” presented a patient’s history, who as a result of surgery carried out due to morbid obesity reached normal body weight and the remission of diabetes mellitus, hypertension and sleep apnoea syndrome, yet it was accompanied by frequent nausea and vomiting after each meal, making it impossible in practice to normally eat and function. The study shows multiple problems present in such cases, being a problem for the patient and a challenge for the doctor consulting the patient following the procedure.

The article by Baranowska-Bik and Stelmachowska-Banaś “X-linked acrogigantism syndrome” presents the recently discovered genetic syndrome with an early present gigantism in the course. Clinical course was described as well as the irregularities in genetic, hormone and image testing as well as histopathological examination, which constitute the clinical image of the new disease entity. Moreover, reference was made to therapeutic methods along with the discussion of the most effective procedure.

The paper entitled “Laboratory diagnostics of primary aldosteronism” by Glinicki and Jeske discusses various aspects of biochemical diagnostics. From among many factors, which may have a significant impact on the results of biochemical tests, one should take into consideration the used medications (non-steroid anti-inflammatory drugs, diuretics, steroids, beta-blockers, ACE inhibitors, oral contraceptives), body position, part of the day and the manner of blood sampling, temperature and time of samples transportation to the laboratory and the applied laboratory methods.

Infertility is a more and more common problem of couples trying to have a baby. The paper by Jankowska and Kochman presents comprehensively the most common endocrine reasons for infertility in women and men.

The paper by Kozakowski “Obesity and the musculoskeletal system” indicates relations observed between

excessive body weight and development and the course of many musculoskeletal system diseases, starting from degenerative disease, through metabolic diseases, connective tissue systemic diseases up to rare diseases and rarely diagnosed ones. Great prevalence of both obesity and the motor system diseases requires the doctor to know the relation between them.

The article by Krawczyńska and Słowińska-Srzednicka discusses the application of Anti-Müllerian hormone marking in the diagnostics of endocrine diseases in women and men. In boys and men, marking the AMH level may be applied in the case of assessing androgens excretion disorders as a peculiar marker of the presence of testicle tissue in the diagnostics of hypergonadotropic hypogonadism and the marker of toxic damage to testicles following chemotherapy. In girls and women it may be used to: assess the ovarian reserve, diagnose hypergonadotropic hypogonadism, diagnose and treat polycystic ovary syndrome, premature ovarian failure and be the marker of toxic ovary damage following chemotherapy.

The article by Łebek-Szatańska and Papierska “Hormonal testing for primary aldosteronism – new guidelines, old problems” presents the most important practical aspects concerning hormone diagnostics of primary hyperaldosteronism as a frequent and undervalued reason for secondary arterial hypertension. With reference to the guidelines of Endocrine Society published this year, there were the main reasons and challenges presented that we face, despite the updated recommendations, at early stages of diagnosing the disease. The paper also touches upon the issue of new research directions which raise hope to advance the diagnostic algorithm.

Ratajczak and Gietka-Czernel attempted in their article “The influence of selenium to human health” to sum up the state-of-the-art in terms of the results of selenium shortage in the diet and its impact on many diseases, including neoplasms, thyroid diseases and cardiovascular system diseases.

The article written by Szczepańska et al. entitled “Management of hyperthyroidism using radioactive iodine – current principles” contains some information on modern recommendations concerning the therapy ¹³¹I and hyperthyroidism based on latest recommendation.

I hope that reading the next issue of “Progress in Medicine” devoted to the advancement in endocrinology proves useful.

Professor Wojciech Zgliczyński, MD, PhD