

### **POSTER PRESENTATION**

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# The pattern of disorders of sex development in Vietnamese children

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#### **Background**

Disorders of sex development (DSD) are defined as congenital condition in which development of chromosomal, gonadal, or anatomical sex is atypical. The Chicago DSD classification includes three main diagnostic categories: sex chromosome DSD, 46,XY DSD and 46,XX DSD.

#### **Aims**

Define the pattern of disorders of sex development according to Chicago's classification 2006 at National Hospital of Pediatrics in Hanoi, Vietnam (NHP).

#### Method

Patients were examined, diagnosed and treated DSD or ambiguous sex at (NHP) from 31/07/2002 to 31/7/2012. Criteria that suggest DSD include

- 1. overt genital ambiguity (eg, cloacal exstrophy)
- 2. apparent female genitalia with an enlarged clitoris, posterior labial fusion, or an inguinal/labial mass
- 3. apparent male genitalia with bilateral undescended testes, micropenis, isolated perineal hypospadias, or mild hypospadias with undescended testis
  - 4. a family history of DSD such as CAIS, and
- 5. a discordance between genital appearance and a prenatal karyotype. Method of the study was descriptive observational.

#### **Results**

51.7% patients had 46,XX DSD, among them 98.6% had definitive diagnosis. Congenital adrenal hyperplasia (CAH) is the most common cause of 46,XX DSD (91.9%). Rate of 46,XY DSD was 25%, however 83.3%

had no definitive diagnosis. 23.3% of patients had chromosome DSD, among them 88.3% chromosome DSD was Turner syndrome.

#### **Conclusion**

CAH is the most common cause of DSD.

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