



# Acromegaly: Acral and Facial changes

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## Clinical image description

A 35-year-old man presented with a 10 years history of headache, excessive sweating and growth of extremities. He doesn't have snoring, any visual complains or any weakness. Examination revealed typical facial dysmorphism with coarse features, large lips, frontal ridges, separated teeth and prognathism (Figure 1, 2 & 3), fingers and toes appeared large and broad (Figure 4), visual and systemic examination was normal. Acromegaly was confirmed by non-suppressible GH levels (nadir = 110 ng/

ml) and elevated IGF-1 (854 ng/ml). All of his pituitary hormonal tests were normal except for his prolactin which was slightly high (38 ng/ml). Magnetic resonance imaging showed a large mass arising from the sella and extending into the right cavernous sinus, consistent with pituitary macroadenoma. Serum laboratory tests showed normalization of his IGF-1, GH and prolactin levels performed 12 month after transsphenoidal partial surgical removal of his pituitary tumor and lanreotide therapy. Acral and facial changes are unchanged.



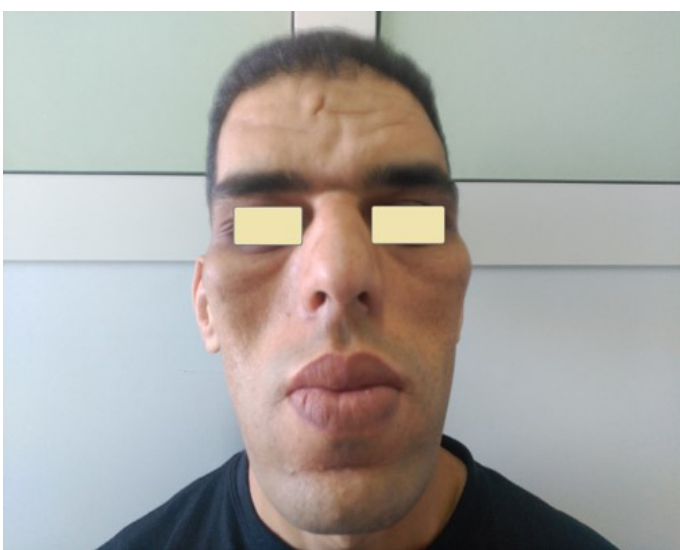


Figure 1



Figure 2



Figure 3



Figure 4