The prevalence of Growth Hormone Deficiency in Autoimmune Thyroid Disease.

No registrations found.

Ethical review Positive opinion **Status** Recruiting

Health condition type -

Study type Interventional

Summary

ID

NL-OMON22746

Source

NTR

Brief title

N/A

Health condition

Autoimmune hypothyroidism treated with thyroxine

Sponsors and support

Primary sponsor: Academic Medical Center, Department of Endocrinology and Metabolism

Intervention

Outcome measures

Primary outcome

Prevalence of growth hormone deficiency in patients with autoimmune hypothyroidism

Secondary outcome

Quality of Life in patients with autoimmune hypothyroidism with or without growth hormone deficiency

Study description

Background summary

An uncommon cause of growth hormone deficiency is autoimmune (lymphocytic) hypophysitis. Autoimmune hypophysitis is frequently associated with other endocrine or non-endocrine autoimmune diseases.

Data on isolated growth hormone deficiency caused by autoimmune hypophysitis are scarce and inconclusive.

Isolated growth hormone deficiency, as a result of autoimmune hypophysitis, may not be that uncommon, especially in patients with autoimmune thyroid disease.

Autoimmune hypothyroidism is common. Some hypothyroid patients who have been rendered euthyroid by adequate doses of thyroxin, suffer from a reduced quality of life. It is possible that these patients suffer from growth hormone deficiency and that growth hormone replacement would increase their wellbeing. In this study, we want to investigate what the prevalence is of GHD in patients with autoimmune hypothyroidism.

Study objective

The prevalence of Growth Hormone Deficiency in Autoimmune Thyroid Disease is higher than in the general population

Intervention

N/A

Contacts

Public

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Scientific

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Eligibility criteria

Inclusion criteria

Autoimmune hypothyroidism Adequate thyroxine treatment

Exclusion criteria

- 1. History of hypothalamic or pituitary disease or known growth hormone deficiency
- 2. Pregnancy
- 3. Hypothyroidism after treatment for Graves' disease or surgery or I131
- 4. Major concurrent diseases
- 5. Use of medications known to interfere with the growth hormone-IGF-1 axis
- 6. No informed consent
- 7. Alcohol or drug abuse

Study design

Design

Study type: Interventional

Intervention model: Other

3 - The prevalence of Growth Hormone Deficiency in Autoimmune Thyroid Disease. 12-05-2025

Control: N/A, unknown

Recruitment

NL

Recruitment status: Recruiting
Start date (anticipated): 01-08-2006

Enrollment: 600

Type: Anticipated

Ethics review

Positive opinion

Date: 28-08-2006

Application type: First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID
NTR-new NL745

NTR-old NTR755

Other : N/A

ISRCTN ISRCTN57632130

Study results

Summary results

N/A