

From Acute Abdomen to Hormonal Crisis: Case report on a Long-Delayed Sheehan's Syndrome Diagnosis

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Abstract : Introduction: Sheehan's syndrome (SS) is a rare cause of hypopituitarism resulting from postpartum hemorrhage and pituitary necrosis. It remains an underdiagnosed condition, especially in developing countries, due to poor obstetric care and home deliveries. This case report highlights the significance of recognizing atypical presentations of SS, such as pancytopenia, to aid in early diagnosis and management. Case Presentation: A 40-year-old female presented with acute abdomen symptoms and was initially diagnosed with acalculous cholecystitis. However, a detailed history revealed a history of postpartum hemorrhage 18 years prior, leading to a provisional diagnosis of SS. Further investigations confirmed panhypopituitarism, including hypothyroidism, hypocortisolism, and hypogonadism. Notably, the patient also exhibited pancytopenia, a rarely reported hematological manifestation of SS. Discussion: SS often presents with nonspecific symptoms, leading to delayed or missed diagnoses. In this case, the patient's initial presentation of acute abdomen symptoms was attributed to secondary adrenal insufficiency due to panhypopituitarism. The presence of pancytopenia, along with hyponatremia, further complicated the clinical picture. Hormone replacement therapy led to a remarkable improvement in the patient's condition, emphasizing the importance of early diagnosis and intervention. Conclusion: SS is a common cause of panhypopituitarism in developing countries, but its atypical presentations, such as pancytopenia, are rare and often overlooked. This case highlights the need for increased awareness among clinicians to consider SS in patients with unexplained hematological abnormalities, particularly in regions with high rates of postpartum hemorrhage. Early recognition and appropriate hormone replacement therapy can significantly improve patients' outcomes and prevent long-term complications associated with this underdiagnosed syndrome.

Keywords : Sheehan syndrome, panhypopituitarism, pancytopenia, delayed diagnosis

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