

# Endocrinology and Bloom Syndrome

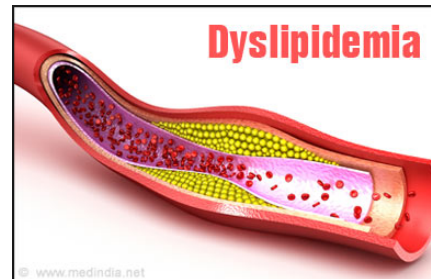
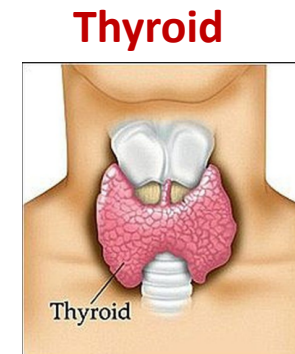
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# Endocrinology



# What does endocrine entail?



**Osteoporosis/  
Fractures**



## Growth in Bloom's Syndrome

Small birth weight

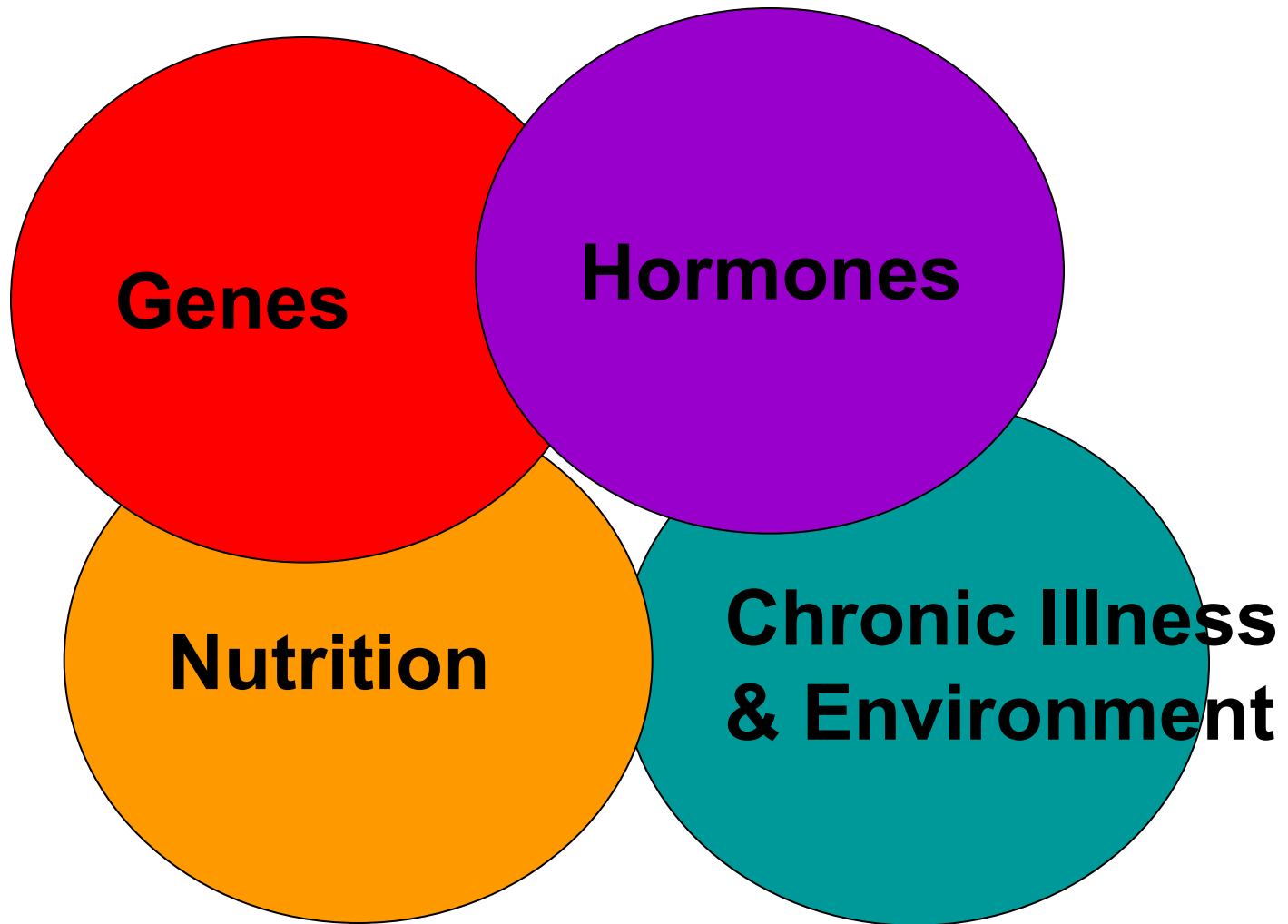
- About 1-1.5 kg(2.2 – 3.3lbs) smaller than general population

Stay small for age throughout childhood

Short adult height

- Men  
Height: 148.5cm (58.4")- Weight: 41.3kg (91 lbs)
- Woman  
Height: 141.5cm (55.7")- Weight: 36.6kg (80lbs)

## Major Factors Involved in Growth



## What can cause short stature in Bloom's Syndrome?

Genes: Bloom's Syndrome itself  
Low birth weight is a frequent cause of short stature

Nutrition: slow weight gain

Hormonals: growth hormone  
thyroid hormone

Chronic illness

## What about nutrition?

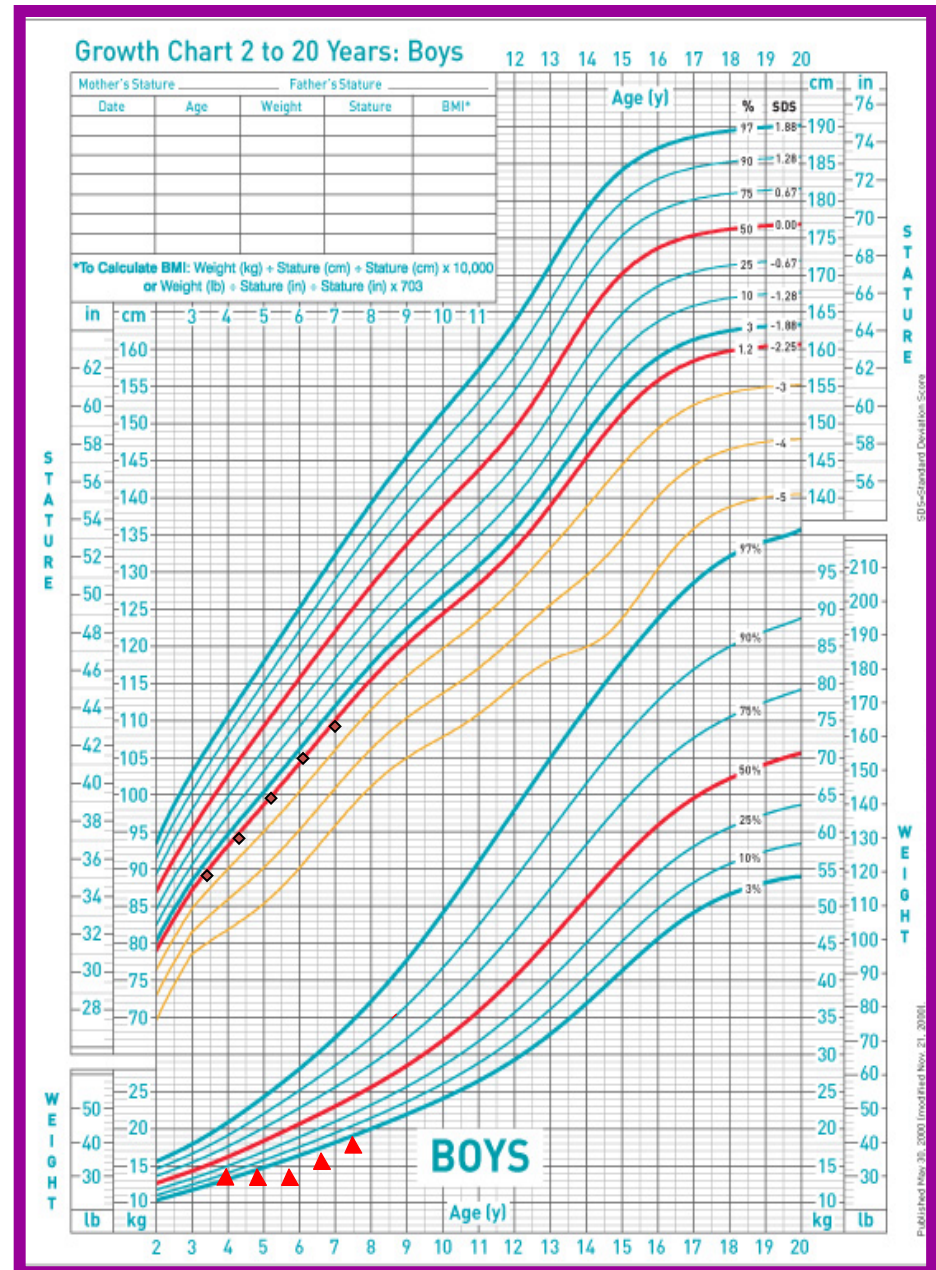
- Feeding difficulties in early life.
- Frequent vomiting and GE reflux.
- No evidence of malabsorption

Normal weight for height as adults.



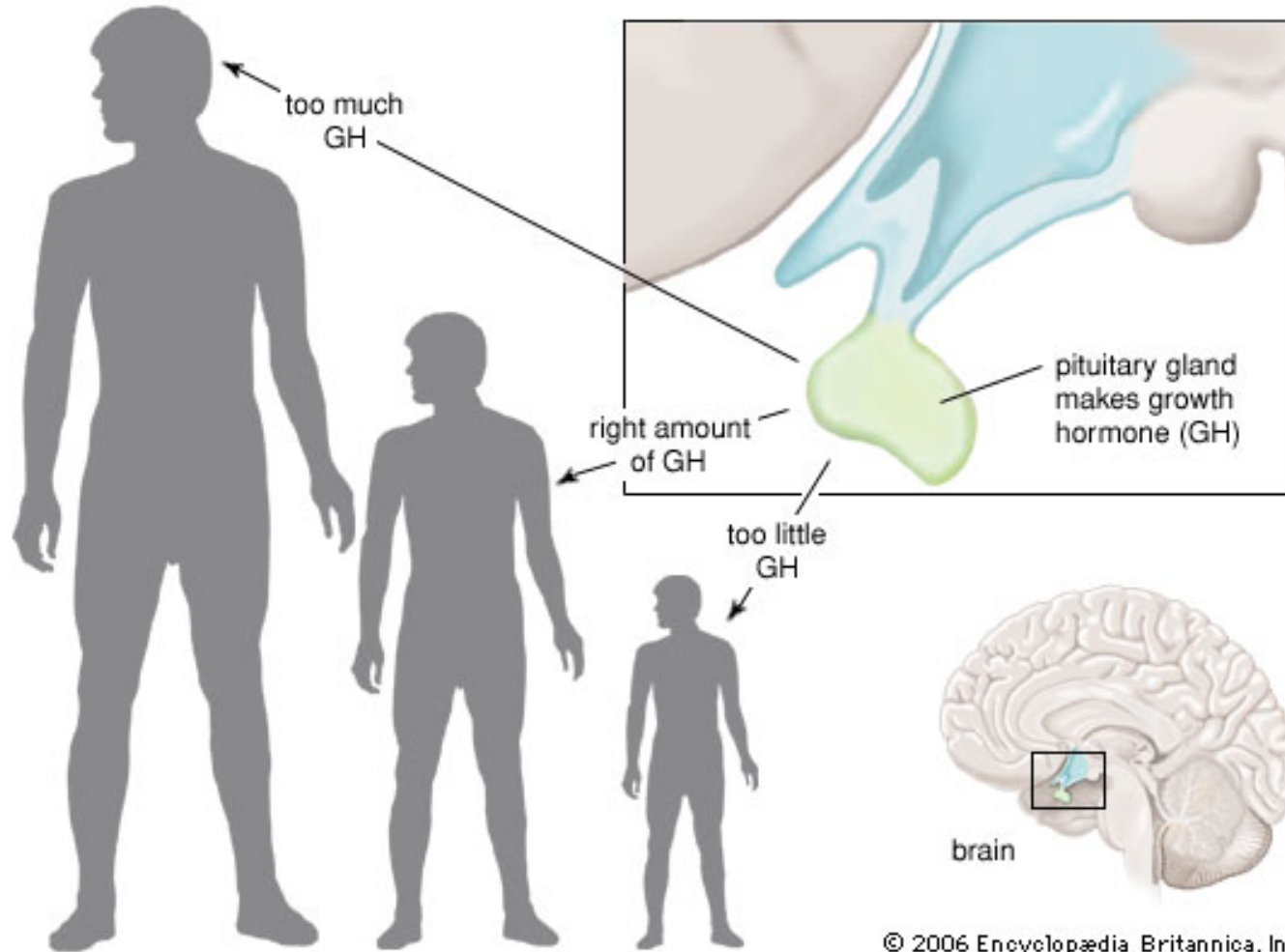
# What can a parent do?

- Monitor growth
- Optimize calories
- Keep weight appropriate for body size





# Growth hormone : stimulates linear growth



## **Growth hormone in Bloom Syndrome**

Children with Bloom do NOT have growth hormone deficiency

### Questions

- Can be growth hormone still be considered?
- Are there any specific risks?

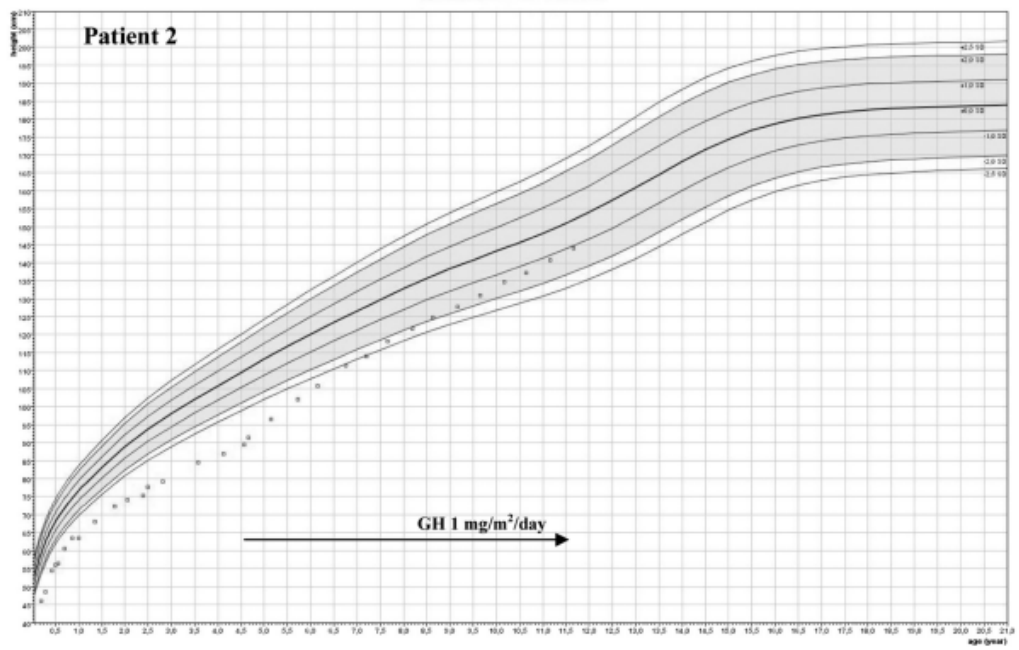
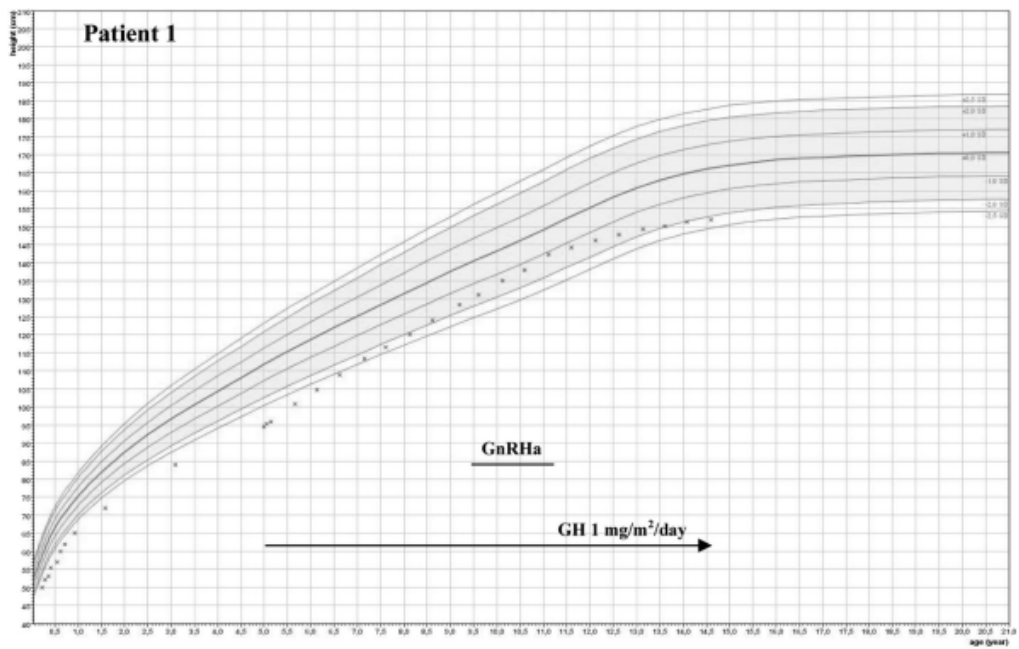
## Are Children with Bloom's Syndrome candidates for growth hormone therapy?



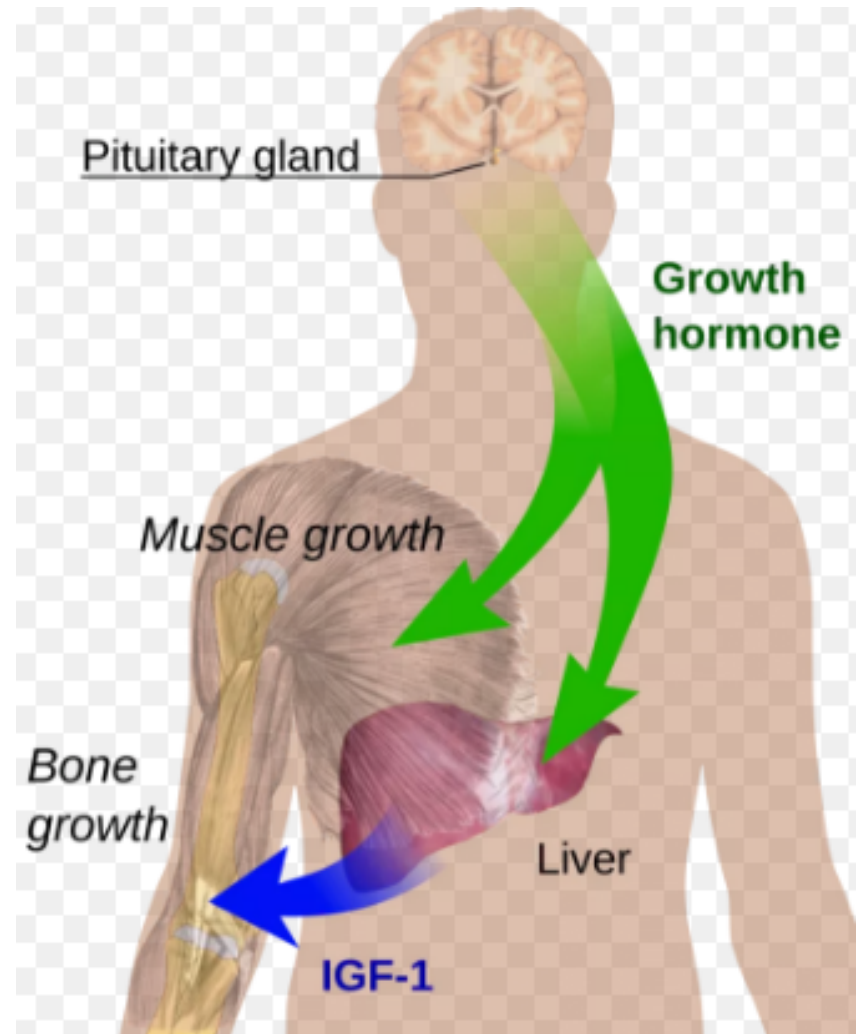
Growth hormone improves final height in children born small and who grow poorly.

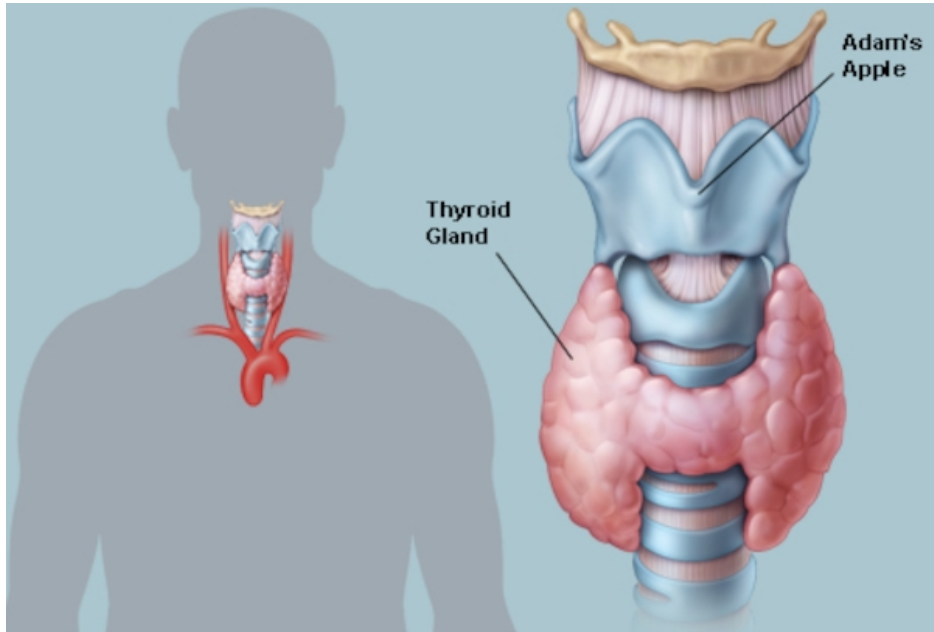
Limited experience in Bloom Syndrome

Growth hormone may increase an individual's risk for cancer: a topic of some debate.



Monitoring of IGF1 and IGFBP3 levels during growth hormone therapy is suggested.



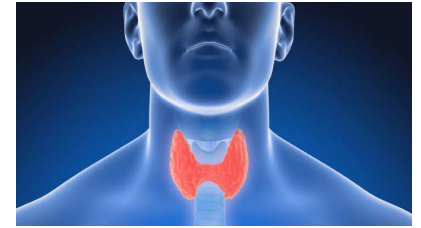


## Thyroid abnormalities in Bloom's syndrome



## **HYPOTHYroidism**

Children: Poor growth  
Developmental delays



Children & Adults: Fatigue

Feeling cold

Overweight

Dry skin, hair loss

Constipation

Brain fog, Depression

Symptoms can be non-specific.

Annual thyroid testing is suggested after age 10 yrs.

Diabetes

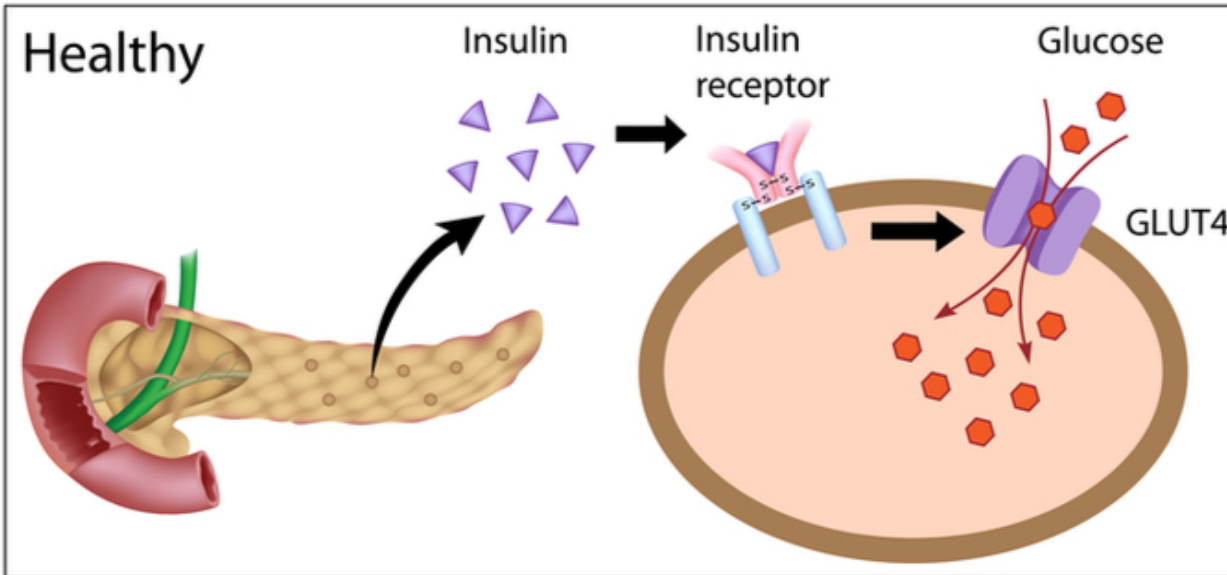
The image features the word "Diabetes" in a playful, multi-colored font. Each letter is a thick, 3D block letter. The colors are: 'D' is blue, 'i' is purple, 'a' is red, 'b' is green, 'e' is yellow, 't' is pink, 'e' is light blue, and 's' is orange. Below each letter, a hand of a different skin tone is visible, holding the letter from underneath. The hands are positioned as if they are presenting the word. The background is plain white.

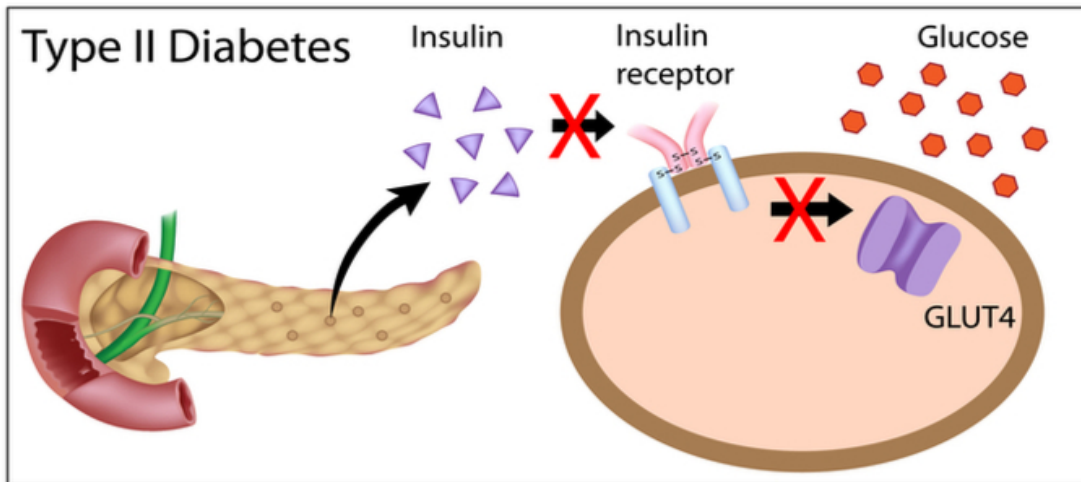
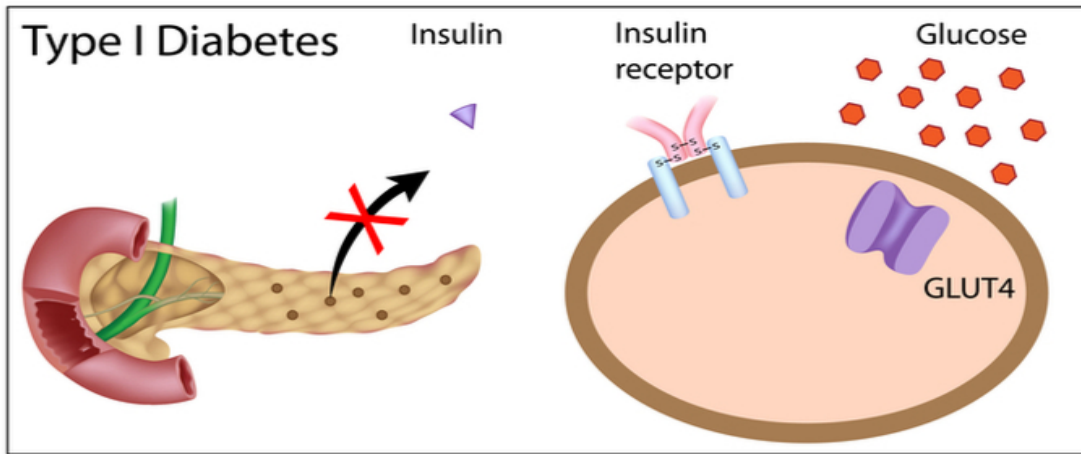


## High rates of prediabetes and diabetes with Bloom Syndrome

- Prediabetes starts early in childhood.
- Risk of prediabetes and diabetes increase with age.
- People with prediabetes or diabetes may have no symptoms.

**Bloom registry:** 18% of people report diabetes - median age 26 years





Individuals with Bloom's syndrome have type II Diabetes and insulin resistance

# Common Signs of Diabetes



Abnormal thirst



Frequent urination



Extreme tiredness



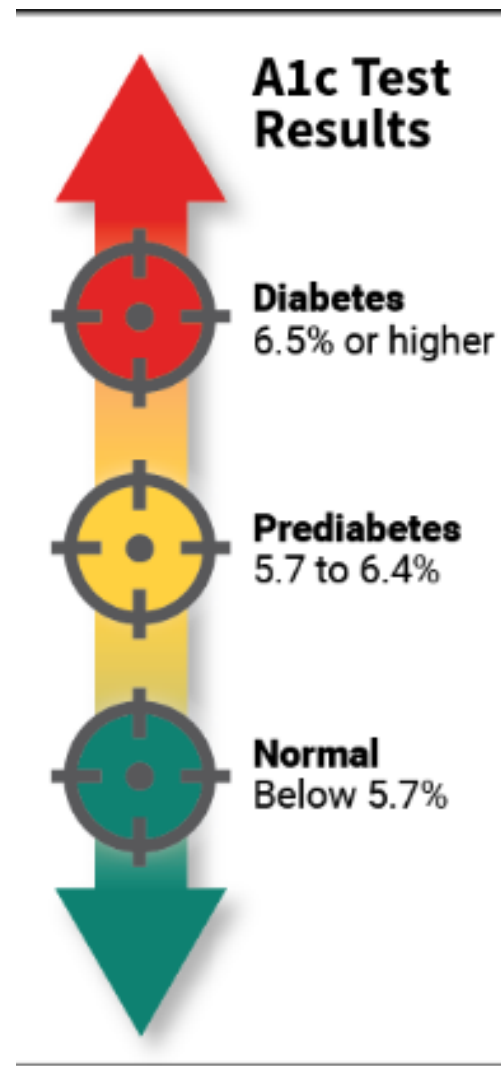
Sudden weight loss

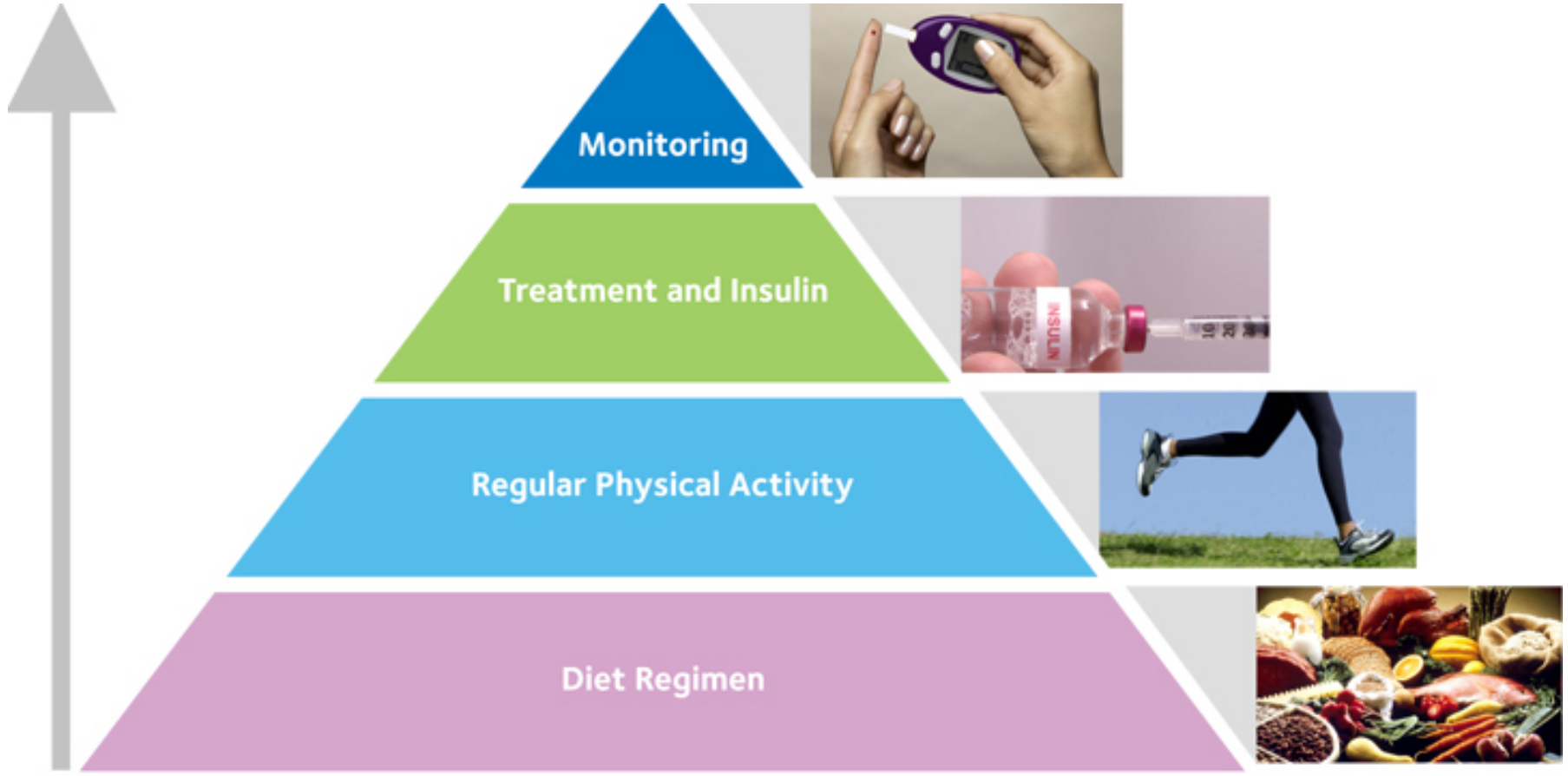


Constant hunger



Blurred vision





PUBERTY

A hand holding a black marker is shown underlining the word 'PUBERTY' which is written in large, black, hand-drawn capital letters on a white background. The hand is positioned at the bottom right of the word, with the marker tip touching the underline.

AND FERTILITY

Puberty may be delayed but progresses normally.

Concern of primary ovarian or testicular problem in Bloom.

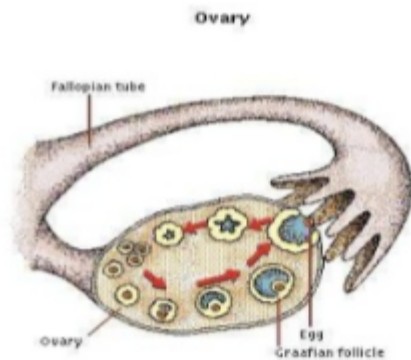
- Women may have normal pregnancies and babies but may experience early menopause.
- Men usually have normal testosterone levels but may have sperm abnormalities.



## Pregnancy and Bloom Syndrome

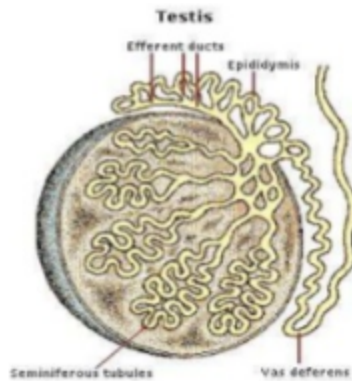


- Preconception and pregnancy screening for diabetes.
- Delivery difficulties because of small pelvis.
- Pregnancy outcome is usually good.



## Research/ Future Directions

Women:  
oocyte preservation



Men:  
Semen analysis- cryopreservation  
Testicular sperm extraction (TESE)

## Conclusions

### Children:

Monitor growth and weight gain.

Consult a feeding specialist; use of high calorie diet.

Use of Growth Hormone is controversial and needs to be closely monitored.

*Cunniff C. Health Supervision for People with Bloom Syndrome. Journal: American Journal of Medical Genetics, 2018*

## Conclusions

Annual screening for diabetes as early as age 10 yrs.

Annual screening for lipid abnormalities as early as 10 years.

Screening for hypothyroidism.

Individuals with Bloom's syndrome should be aware of symptoms and signs of diabetes and hypothyroidism.

*Cunniff C. Health Supervision for People with Bloom Syndrome. Journal: American Journal of Medical Genetics, 2018*

## Conclusions

Women with Bloom syndrome may have normal babies but experience early menopause.

Men with Bloom syndrome who wish to have children may need to have a semen analysis and consult a fertility specialist.

*Cunniff C. Health Supervision for People with Bloom Syndrome. Journal: American Journal of Medical Genetics, 2018*

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**ORIGINAL ARTICLE**

# Health supervision for people with Bloom syndrome

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