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A case of polyglandular autoimmune syndrome type I with unusual presentation.

Qureshi AU, Abbas R, Ahmad TM.

Source

Department of Paediatric Medicine, The Children's Hospital and Institute of Child Health, Lahore.
qureshiahmad@yahoo.com

Abstract

Eight years old girl presented with mucocutaneous candidiasis, nail dystrophy, twitching left half of face, progressively increasing generalized skin hyperpigmentation and hypopigmented patches over both shins. Her investigations revealed low intact PTH level, low serum cortisol, high ACTH, impaired glucose tolerance test and candidal onychomycosis. She was diagnosed as Polyglandular Autoimmune Syndrome (PGA) type I. She also developed idiopathic generalized epileptiform seizures and *Alcaligenes faecalis* septicemia not previously reported with PGA type I. The patient responded well to alphacalcidol, hydrocortisone, valproate sodium, topical antifungal and systemic antibiotics.

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