AMENORRHEA (PBL)

Learning Objectives
1. Define primary amenorrhea, secondary amenorrhea and oligomenorrhea.
2. Describe the causes of amenorrhea and the approach to diagnosis.
3. Describe the signs and symptoms of androgen excess.
4. Describe the relationship between oligomenorrhea, hirsutism and obesity?

Case 1:
16 year old presents no menses for last 7 months.
• Gyn hx: menarche at 12.5 yrs, “pretty regular.”
• PMH: none
• Meds: none
• PSH: none
• SH: high school junior, president of class, on travel team field hockey. Actively being recruited at collegiate level.

PE:
• Height 5’7”
• Weight 115 #
• BMI =18
• Normal pelvic exam

Labs:
• hCG negative
• FSH 5.1, LH 3, e2=19
• TSH, Prolactin WNL
• MRI: no cranial lesion

Questions:
1. What is on your differential?
2. What laboratory tests/imaging/additional history/physical or other interventions will help make a diagnosis for this patient?

Case 2
35 year old presents with hot flashes, amenorrhea for 2 years.
• Gyn Hx: menarche at 11, regular menses until age 15, some skipped months.
• Seen by OB/Gyn and told FSH level high. Given pill to allow ovary to rest/recover. Told to gain weight.
• PMH: none
• Meds: none
• PSH: none
• SH: community college freshman. No T/E/D.
Physical Exam
• 5’6” 135#, BMI 24.8
• NL pelvic exam

Labs:
• Old records FSH=51
• Repeat FSH = 72

Referred for evaluation and management

Questions:
1. What is on your differential?
2. What laboratory tests/imaging/additional history/physical or other interventions will help make a diagnosis for this patient?
3. What are you management options?