Study ID 202311_AG

Principal Investigator:
Aneta Gawlik

Contact details:
Department of Paediatrics and Paediatric Endocrinology - University of Silesia, Katowice, Poland; agawlik@mp.pl

Coinvestigators:
Caroline Brain, London; Malcolm Donaldson, Glasgow; Berit Kriström, Umeå; Deborah Matthews, Newcastle; Theo Sas, Rotterdam; Janielle van der Velden, Nijmegen; Siska Verlinde, Brussels; Malgorzata Wasniewska, Messina.

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Name of study:
Comparison of transdermal and oral induction of puberty in girls with TS

Summary
This project aims to improve the care of girls with Turner syndrome (TS), the majority of whom require pubertal induction in the form of oestrogen treatment, and to help with their pubertal development. We will encourage clinicians from all over the world to get permission from girls with TS and their families to enter data onto the I-TS platform. We will collect data on outcomes including growth, pubertal development, cardiovascular health and patient adherence/satisfaction during induction using either oral (tablets) or transdermal (skin patches/gel) treatment. By collecting this information, we will learn more about the best, most acceptable strategies for pubertal induction in girls with TS.

Inclusion criteria
Any girl with genetically proven Turner syndrome who has previously required pubertal induction from 2010 onwards or will require pubertal induction from the launch of the study.

Data to be collected for all participating cases:
Before induction:
Essential: karyotype, date of birth, date of induction, growth measurements and blood pressure, puberty, thyroid function.
Desirable: LH and FSH levels, liver function tests, IGF-1 Pelvic ultrasound scan, aortic root diameter, DXA scan.
At end of each year of induction:
Essential: Growth measurements, blood pressure, puberty, therapy, thyroid function
Desirable: At end of 3rd year of induction, repeat cardiac, pelvic ultrasound and DXA scan

Expected outputs
Although the project will continue till 2030, it is likely sufficient prospective data will be available in 3 years for an interim publication. However, data from work in progress will be presented at least annually at scientific meetings.

Publication Plan for authorship in outputs (refer to guidance)
The sdmregistries recommendations on publications shall be adhered to. All reporting centres that participate will be included as co-authors as long as they contribute to the writing of the manuscripts. For further information, please contact PI.