Abstract

Acromegaly is a rare disease with a broad range of presentations commonly due to excess growth hormone (GH) secretion by a pituitary adenoma. The index patient is a 52-year-old male who initially presented with a pruritic papular rash involving his lower limbs. The rash was confirmed as lichen amyloidosis by the dermatology team but was referred to endocrinologist since the patient had features suggestive of acromegaly. His insulin like growth factor-1 was elevated at 980.3 ng/mL. This was followed by a glucose tolerance test which revealed non suppressed growth hormone levels. Rest of the pituitary hormones were found to be normal. His calcium levels were normal, and he didn't have any features to suggest multiple endocrine neoplasia 1. Imaging with magnetic resonance scan revealed a pituitary macroadenoma and was refereed for transphenoidal surgery.