LETTER TO THE EDITOR

Early treatment with GH alone in Turner syndrome may actually allow a prepubertal catch-up growth

M Wasniewska, F De Luca, R Bergamaschi¹, MP Guarneri², L Mazzanti¹, P Matarazzo³, A Petri⁴, G Crisafulli, G Salzano and F Lombardo

Department of Pediatrics, University of Messina, Messina, Italy ¹Department of Pediatrics, University of Bologna, Bologna, Italy ²Department of Pediatrics, University of Milan, Milan, Italy ³Regina Margherita Hospital of Turin, Turin, Italy ⁴Department of Pediatrics, University of Novara, Novara, Italy

(Correspondence should be addressed to F De Luca; Email: wasniewska@yahoo.it)

The aim of our study on early treatment with growth hormone (GH) alone in Turner syndrome (1) was to verify whether early GH therapy allows full catch-up growth before starting the induction of puberty or its spontaneous onset.

The attainment of this goal was evaluated on the basis of both height deficiency reduction under therapy and the decreased prevalence of patients with short stature at the end of therapy.

On the contrary, data concerning the prediction of adult stature were not kept into any consideration in order to demonstrate the efficacy of early GH therapy, since predicting final height in any individual is far from an exact science.

Abbott *et al.* (2) have objected to the fact that predicted adult height in our study was calculated at yearly intervals. According to their comments, in fact, our girls under GH therapy were growing very differently to the untreated girls from which the Lyon equation is derived.

From a methodological point of view this criticism is correct, but it is to be underlined that this methodological remark cannot minimally invalidate the conclusions of our study, which were not based on the evolution of predicted height under GH treatment.

Moreover, as clearly written in the legend to Table 2, significance levels for predicted adult height in our study were not calculated at yearly intervals, but were calculated between baseline values and the ones recorded at a time when GH treatment had been withdrawn.

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References

- 1 Wasniewska M, De Luca F, Bergamaschi R, Guarneri MP, Mazzanti L, Matarazzo P, Petri A, Crisafulli G, Salzano G & Lombardo F. Early treatment with GH alone in Turner syndrome: prepubertal catch-up growth and waking effect. *European Journal of Endocrinology* 2004 **151** 567–572.
- 2 Abbott RA, Atkin L-M & Davies PSW. Predicting adult height in Turner syndrome. *European Journal of Endocrinology* 2005 **152** 917.

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