In this issue of Pediatric Annals, we present three thought-provoking articles describing unusual presentations of endocrine disorders, including hypoglycemia, hyperglycemia, and Graves’ disease. Each of these articles offers a slight “twist” on endocrine conditions that may be encountered in the hospital or general pediatrician’s office and reviews concepts that are important for pediatric practitioners to understand.

Michelle Blanco, MD, and coauthors describe a case of a neonate with recurrent hypoglycemia who ultimately is thought to have hyperinsulinism despite undetectable insulin levels at the time of hypoglycemia. She discusses key concepts regarding the differential diagnosis, evaluation, and treatment of infants with hypoglycemia, including the importance of the “critical sample” in diagnosis, and what additional work-up is helpful when the diagnosis remains unclear.

In the second article, Shalome D’Souza, MD, and her coauthors present a 9-year-old previously healthy patient who presents with Henoch-Schönlein purpura (HSP) and hyperglycemia. She provides a review of the diagnosis and postulated etiologies of HSP, as well as type 1 and type 2 diabetes, including discussion of autoimmunity and genetic components. She then provides an intriguing discussion as to how HSP and diabetes may be associated.

In the last article, Dr. D’Souza and her coauthors present a case of an adolescent with Graves’ disease who is also found to have a mediastinal mass on initial presentation. This case reviews the presenting signs of Graves’ disease, the differential diagnosis of a mediastinal mass in children, and the association between thymic hyperplasia and Graves' disease in children. Dr. D’Souza discusses how being aware of this association can prevent unnecessary invasive procedures in these patients.

I want to thank all of the authors who have dedicated their time and expertise to this project. Each of these articles includes input from members of our pediatric endocrinology team. Siri Atma W. Greeley, MD, PhD, is a pediatric endocrinologist with expertise in neonatal and monogenic forms of diabetes, and Elizabeth Littlejohn, MD, is a pediatric endocrinologist with a special interest and expertise in type 1 and type 2 diabetes. Joseph R. Hageman, MD, also provided valuable input into each article. He is a retired neonatal/pediatric critical care physician who is currently a senior clinician educator who plays an integral role working with our pediatric residents and fellows in their academic pursuits.

My ultimate hope is that you find these case presentations interesting and informative and gain valuable insights from these discussions.

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About the Guest Editor

Dianne Deplewski, MD, is an Associate Professor of Pediatrics and Medicine in the Section of Adult and Pediatric Endocrinology, Diabetes and Metabolism, at the University of Chicago. She is the Director of the Pediatric Endocrinology Fellowship program which trains fellows in both pediatric and combined medicine/pediatric endocrinology. She received her MD from the University of Illinois, and completed a residency in Pediatrics at the University of Wisconsin Hospital and Clinics. She then completed a fellowship in Pediatric Endocrinology at the University of Chicago.