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**COMMUNICATIONS:****6. UNILATERAL BREAST ENLARGEMENT IN A 7 YEARS GIRL  
: CASE REPORT****Dr. M.A. Taher**

Recently we found a girl of 7 years who came with her parents for ultrasonography (USG) of the enlarged left breast. No other problem was found in hepatobiliary, urogenital and adrenal regions. Mammary echotexture was fairly uniform, highly reflective pattern typically seen in the young breast tissue. Only a small layer of subcutaneous fat and no significant retromammary fat was identified. The pectoral muscles stood out clearly in contrast to the strongly reflective breast tissue plate.

Long term follow up was advised. We like to report it as a rare case of isolated thelarche (IT). Cases of isolated thelarche are usually self-limiting, although 10% may progress to central precocious puberty (CPP).<sup>1</sup> In IT, breast development may be unilateral or bilateral and is not associated with development of the areola.<sup>2</sup> It usually occurs before 2 years of age. Before the gonadotropin-estradiol negative feedback mechanism becomes sensitive. No other sign of pubertal progression e.g. height velocity, bone age acceleration and progressive development or appearance of other secondary sex characteristics, are observed. In girls with IT, uterine and ovarian volumes are similar to those of prepubertal girls.<sup>3-6</sup> Ovarian macrocysts (follicles measuring 10-20 mm in diameter) may be found in patients with IT.<sup>6-8</sup> Breast development may regress after several months, as happened in our case.

Unlike CPP, isolated thelarche is not associated with maturation of the hypothalamic-pituitary-gonadal axis.<sup>9</sup>

Timmerman believes that the best way forward in gynecologic sonography is to produce a list of recommended terms, procedures and definitions of end-points.<sup>10</sup>

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