

A Case of Hypothyroidism with Cushing Syndrome

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There is a good interdependent relationship between the adrenal and hypothyroid glands. Hypothyroidism: excessive catabolism, low metabolism; initial rise of cortisol; later on, exhaustive decrease in cortisol due to overwork of the adrenal gland.

When cortisol levels increase in the blood, the feedback system of the thyroid gland, TSH, increases, and the peripheral conversion of T₄ to T₃ decreases, all the symptoms of complications of hypothyroidism can be seen.

Given photo, age 52, female of one lady. History of taking corticosteroids due to allergic reactions for an indefinite time.

Presented with generalized weakness, moon-like face, obesity, in the upper chest multiple nodules palpable, upper part of the suprascapular region infected carbuncle, pedal edema, stray in the abdomen.

The investigation revealed that cortisol is suppressed and TSH is rising. The patient was on thyroxin 75, which was increased to 100 micrograms before breakfast. Her investigation showed TSH 12 uLu/ml, cortisol \geq 600 mcg/dl, USG abdomen showed fatty liver grade 2, cholelithiasis, and mammography showed panniculitis nodules.



Figure a