

COMMENTARY

Congenital Adrenal Hyperplasia and Poverty

(see Armstrong *et al.* Living with Congenital Adrenal Hyperplasia in Vietnam:
A Survey of Parents, p. 1207)

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The report by Armstrong *et al.* entitled "Living with Congenital Adrenal Hyperplasia in Vietnam: A Survey of Parents"¹ is important. To educate pediatric endocrinologists as to the problems faced by families in poverty stricken countries provides a contrast to developed countries, which have at hand several diagnostic techniques and treatments for congenital adrenal hyperplasia (CAH). These families in Vietnam do not have hormonal assays or genetic tests for CAH - thus they cannot avail themselves of prenatal diagnosis and treatment to prevent genital ambiguity in female fetuses affected by CAH. It is remarkable that there are surgeons in Vietnam who can do genitoplasty with sufficient skill to satisfy the parents of girls with CAH. Clearly, the care of patients with CAH in Vietnam must be improved. But I am impressed with the compliance with treatment and education, as shown by the families that travel a long way to get care, as

there is only one center in Hanoi with sufficient expertise to deal with the problems of patients with CAH.

In reviewing this report, I began to search the literature for papers that deal with poverty and CAH in the USA. I did not find any! Are there patients in New York's poor neighborhoods, such as Bedford-Stuyvesant, who are not being diagnosed or treated? This report by Armstrong *et al.* has provoked me and will provoke other pediatric endocrinologists to address this issue of poverty and CAH. Bravo! to the group in Australia for this pioneer report.

REFERENCE

1. Armstrong KL, Henderson C, Hoan N, Wame GL. Living with congenital adrenal hyperplasia in Vietnam: a survey of parents. *J Pediatr Endocrinol Metab* 2006; 19: 1207-1223.

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