

AB127. 208. Under-recognition of primary hyperparathyroidism in a tertiary referral centre

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Background: Surgery represents an excellent curative option for patients with primary hyperparathyroidism with very high success rates (>97%). However, detection rates for primary hyperparathyroidism appear to be low. In addition, awareness of primary hyperparathyroidism and its implications for patients amongst physicians is likely under recognized. Thus we wished to evaluate patients with hypercalcemia to establish if they received appropriate investigation and determine rates of surgical referral and subsequent treatment for hyperparathyroidism if indicated.

Methods: New presentations of hypercalcaemia (>2.65 mmol/L) from 01/07/2016–30/06/2017 were identified from the Laboratory Information System (LIS) at Department of Clinical Biochemistry, Cork

University Hospital. Patients were excluded if they had an identified episode of hypercalcaemia in the preceding 5 years. Demographic information such as age, sex etc. to be obtained from the electronic medical records. Patient records were reviewed to establish if subsequent endocrine (medical/surgical) referrals were made.

Results: One thousand two hundred and nine patients with a new hypercalcaemia diagnosis were identified within the defined study period. Of these patients, 153 (12.7%) had parathyroid hormone levels checked within 6 months. Sub-analysis of these patients identified 21 (1.7%) patients who went on to have either a medical or surgical endocrine review.

Conclusions: This study demonstrates that a low percentage of patients with hypercalcaemia are appropriately investigated for potential underlying primary hyperparathyroidism. Subsequent medical and surgical endocrine referral rates are also extremely low.

Keywords: Hyperparathyroidism; diagnosis; surgery; referral

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