The most important clinical findings are a short stature, an abnormally thick facial skin which shows excessive wrinkling (Fig. 1), which was also discernible in the fingers (Fig. 3). The pantomograph (Fig. 2) shows underlying periodontal disease and radiological features of apical infection on the 16. The lateral skull radiograph (Fig. 4) shows a normal sella turcica. A provisional diagnosis of pituitary dwarfism was made.

Pituitary dwarfism is a condition in which the growth of the individual is very slow or delayed, resulting in less than normal adult stature. There is decreased bodily growth due primarily to a deficiency of growth hormone (GH). The end result is a normally proportioned but little person, because the height and the growth of all other structures of the individual are decreased. It is estimated that between one in 14,000 and one in 27,000 babies born each year have some form of dwarfism.

In 2004, more than 20,000 children in the United States were receiving supplemental GH therapy. It is estimated that about one quarter had organic causes of GH deficiencies. There appears to be no racial or ethnic component to pituitary dwarfism, but males seem to be affected more often than females. Dwarfism with growth retardation becomes evident during the first two years of life. The voice may be shrill and piping. Mental retardation is normally not present. The basic defect is unknown but it is related to a deficiency of growth hormone. This condition is autosomal recessive and the life spans of the affected individuals probably does not deviate significantly from normal. Premature and excessive facial wrinkling plus shrill voice are cardinal features of this condition.

**Reference**