

Table 2. Differential diagnosis between premature adrenarche, late onset congenital adrenal hyperplasia, and adrenocortical tumor

	Idiopathic premature adrenarche	Late onset congenital adrenal hyperplasia	Adrenocortical tumor
Intrauterine growth retardation	Frequent	No	No
Age	<8 years by definition	Prepubertal	<4 years is highly suspect
Clitoromegaly	Absent	Absent	Frequent and marked
Evolution	Slow progression	Slow progression	Explosive (in weeks)
Hypertension	Rare	Rare	Frequent
Other endocrine symptoms	NO	NO	Cushingoid syndrome frequent
Bone age	Conform or moderately advanced	Conform or moderately advanced	Markedly advanced
Plasma androgens level	In normal range or slightly elevated	Increased basal or post synacthen 17OHP level	Markedly elevated of all androgens precursors Frequent hypercortisolism and hyperaldosteronism
Abdominal ultrasonography	Normal	Normal	Adrenal mass