Table	2
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Genetic Causes of CS	Factures	
MEN1	Features • Associated with pancreatic tumors producing gastrin, insulin and/or ACTH that may metastasize to the liver • Multi-gland hyperparathyroidism • Pituitary tumors • Lipomas and angiofibromas	11p13 (MIM 130650)
McCune-Albright synd.	Mosaic constitutively activating postzygotic $G_s \alpha$ mutation that can lead to polyostotic fibrous dysplasia, pigmented skin lesions GnRH-independent precocious puberty, hyperthyroidism, renal phosphate wasting and other endocrine and non- endocrine manifestations.	20q13.2 (MIM 174800)
Beckwith-Wiedemann synd*	Macroglossia, visceromegaly, hyperinsulinema, omphalocele, and risk of adrenal carcinoma, nephroblastoma, hepatoblastoma, rhabdomyosarcoma, and thoracic neuroblastoma requiring biannual sonograms	11p13 (MIM 130650)
Hemihypertrophy*	Adrenal tumors in association unilateral tissue overgrowth on ipsilateral or contralateral side. Compare upper and lower limbs and look for facial asymmetry	(MIM 235000) Hoyme, H. E.; Seaver, L. H.; Jones, K. L.; Procopio, F.; Crooks, W.; Feingold, M. : Isolated hemihyperplasia (hemihypertrophy): report of a prospective multicenter study of the incidence of neoplasia and review. Am. J. Med. Genet. 79: 274-278, 1998. PubMed ID : 9781907
Li-Fraumeni Syndrome *	Adrenal Neoplasm – personal or family history of multiple tumors including lung breast, nasopharynx, CNS, melanoma, pancreas, gonads and prostate.	17p13.1 - p53 gene 22q12.1 (MIM 191170; 151623)
Carney Complex	Primary pigmented nodular adrenal disease (PPNAD), lentigines, myxomas of heart, skin and breast, melanotic schwannoma, , GH and PRL secreting pituitary adenomas Sertoli cell tumors of the testis, multiple small hypoechoic thyroid lesions, thyroid carcinoma.	2p16 and 17q22-24 (MIM 605244; 160980)

* risk of adrenal malignancy