

MI Infantil

Delayed puberty

delayed when the testes remain less than 2.5 cm in diameter or less than 4 mL in volume by the age of 14. Delayed puberty is more common in males. Although - Delayed puberty is when a person lacks or has incomplete development of specific sexual characteristics past the usual age of onset of puberty. The person may have no physical or hormonal signs that puberty has begun. In the United States, girls are considered to have delayed puberty if they lack breast development by age 13 or have not started menstruating by age 15. Boys are considered to have delayed puberty if they lack enlargement of the testicles by age 14. Delayed puberty affects about 2% of adolescents.

Most commonly, puberty may be delayed for several years and still occur normally, in which case it is considered constitutional delay of growth and puberty, a common variation of healthy physical development. Delay of puberty may also occur due to various causes such as malnutrition, various systemic diseases, or defects of the reproductive system (hypogonadism) or the body's responsiveness to sex hormones.

Initial workup for delayed puberty not due to a chronic condition involves measuring serum FSH, LH, testosterone/estradiol, as well as bone age radiography. If it becomes clear that there is a permanent defect of the reproductive system, treatment usually involves replacement of the appropriate hormones (testosterone/dihydrotestosterone for boys, estradiol and progesterone for girls).

Average human height by country

22 January 2011. "Informe Final, V Encuesta Nacional de Salud Materno Infantil, 2008–2009" (PDF). National Institute of Statistics (Guatemala) (in Spanish) - Below are two tables which report the average adult human height by country or geographical region. With regard to the first table, original studies and sources should be consulted for details on methodology and the exact populations measured, surveyed, or considered. With regard to the second table, these estimated figures for adult human height for said countries and territories in 2019 and the declared sources may conflict with the findings of the first table.

Puberty

secondary sexual characteristics and height]. Boletín Médico del Hospital Infantil de México (in Spanish). 49 (1): 12–17. PMID 1304761. Gordon CM, Laufer - Puberty is the process of physical changes through which a child's body matures into an adult body capable of sexual reproduction. It is initiated by hormonal signals from the brain to the gonads: the ovaries in a female, the testicles in a male. In response to the signals, the gonads produce hormones that stimulate libido and the growth, function, and transformation of the brain, bones, muscle, blood, skin, hair, breasts, and sex organs. Physical growth—height and weight—accelerates in the first half of puberty and is completed when an adult body has been developed. Before puberty, the external sex organs, known as primary sexual characteristics, are sex characteristics that distinguish males and females. Puberty leads to sexual dimorphism through the development of the secondary sex characteristics, which further distinguish the sexes.

On average, females begin puberty at age 10½ and complete puberty at ages 15–17; males begin at ages 11½–12 and complete puberty at ages 16–17. The major landmark of puberty for females is menarche, the onset of menstruation, which occurs on average around age 12½. For males, first ejaculation, spermatarche, occurs on average at age 13. In the 21st century, the average age at which children, especially females, reach specific markers of puberty is lower compared to the 19th century, when it was 15 for females and 17 for males (with

age at first periods for females and voice-breaks for males being used as examples). This can be due to any number of factors, including improved nutrition resulting in rapid body growth, increased weight and fat deposition, or exposure to endocrine disruptors such as xenoestrogens, which can at times be due to food consumption or other environmental factors. However, more modern archeological research suggests that the rate of puberty as it occurs now is comparable to other time periods. Growth spurts began at around 10-12, but markers of later stages of puberty such as menarche had delays that correlated with severe environmental conditions such as poverty, poor nutrition, and air pollution. Puberty that starts earlier than usual is known as precocious puberty, and puberty which starts later than usual is known as delayed puberty.

Notable among the morphologic changes in size, shape, composition, and functioning of the pubertal body, is the development of secondary sex characteristics, the "filling in" of the child's body; from girl to woman, from boy to man. Derived from the Latin *puberatum* (age of maturity), the word puberty describes the physical changes to sexual maturation, not the psychosocial and cultural maturation denoted by the term adolescent development in Western culture, wherein adolescence is the period of mental transition from childhood to adulthood, which overlaps much of the body's period of puberty.

Turner syndrome

patients). Failure to develop secondary sex characteristics (sexual infantilism) is typical.[citation needed] Individuals with Turner syndrome have normal - Turner syndrome (TS), commonly known as 45,X, or 45,X0, is a chromosomal disorder in which cells of females have only one X chromosome instead of two, or are partially missing an X chromosome (sex chromosome monosomy) leading to the complete or partial deletion of the pseudoautosomal regions (PAR1, PAR2) in the affected X chromosome. Humans typically have two sex chromosomes, XX for females or XY for males. The chromosomal abnormality is often present in just some cells, in which case it is known as Turner syndrome with mosaicism. 45,X0 with monosomy can occur in males or females, but Turner syndrome without mosaicism only occurs in females. Signs and symptoms vary among those affected but often include additional skin folds on the neck, arched palate, low-set ears, low hairline at the nape of the neck, short stature, and lymphedema of the hands and feet. Those affected do not normally develop menstrual periods or mammary glands without hormone treatment and are unable to reproduce without assistive reproductive technology. Small chin (micrognathia), loose folds of skin on the neck, slanted eyelids and prominent ears are found in Turner syndrome, though not all will show it. Heart defects, Type II diabetes, and hypothyroidism occur in the disorder more frequently than average. Most people with Turner syndrome have normal intelligence; however, many have problems with spatial visualization that can hinder learning mathematics. Ptosis (droopy eyelids) and conductive hearing loss also occur more often than average.

Turner syndrome is caused by one X chromosome (45,X), a ring X chromosome, 45,X/46,XX mosaicism, or a small piece of the Y chromosome in what should be an X chromosome. They may have a total of 45 chromosomes or will not develop menstrual periods due to loss of ovarian function genes. Their karyotype often lacks Barr bodies due to lack of a second X or may have Xp deletions. It occurs during formation of the reproductive cells in a parent or in early cell division during development. No environmental risks are known, and the mother's age does not play a role. While most people have 46 chromosomes, people with Turner syndrome usually have 45 in some or all cells. In cases of mosaicism, the symptoms are usually fewer, and possibly none occur at all. Diagnosis is based on physical signs and genetic testing.

No cure for Turner syndrome is known. Treatment may help with symptoms. Human growth hormone injections during childhood may increase adult height. Estrogen replacement therapy can promote development of the breasts and hips. Medical care is often required to manage other health problems with which Turner syndrome is associated.

Turner syndrome occurs in between one in 2,000 and one in 5,000 females at birth. All regions of the world and cultures are affected about equally. Generally people with Turner syndrome have a shorter life expectancy, mostly due to heart problems and diabetes. American endocrinologist Henry Turner first described the condition in 1938. In 1964, it was determined to be due to a chromosomal abnormality.

List of paraphilias

7/2017: 124–136. doi:10.5281/ZENODO.7854870. Terry LL, Suschinsky KD, Lalumiere ML, Vasey PL (2012). "Feederism: An exaggeration of a normative mate selection - Paraphilias are sexual interests in objects, situations, or individuals that are atypical. The American Psychiatric Association, in its Diagnostic and Statistical Manual, Fifth Edition (DSM), draws a distinction between paraphilias (which it describes as atypical sexual interests) and paraphilic disorders (which additionally require the experience of distress, impairment in functioning, and/or the desire to act on them with a nonconsenting person). Some paraphilias have more than one term to describe them, and some terms overlap with others. Paraphilias without DSM codes listed come under DSM 302.9, "Paraphilia NOS (Not Otherwise Specified)".

In his 2008 book on sexual pathologies, Anil Aggrawal compiled a list of 547 terms describing paraphilic sexual interests. He cautioned, however, that "not all these paraphilias have necessarily been seen in clinical setups. This may not be because they do not exist, but because they are so innocuous they are never brought to the notice of clinicians or dismissed by them. Like allergies, sexual arousal may occur from anything under the sun, including the sun."

Most of the following names for paraphilias, constructed in the nineteenth and especially twentieth centuries from Greek and Latin roots (see List of medical roots, suffixes and prefixes), are used in medical contexts only.

Coeliac disease

in 1908 on children with coeliac disease, which he called "intestinal infantilism". He noted their growth was retarded and that fat was better tolerated - Coeliac disease (British English) or celiac disease (American English) is a long-term autoimmune disorder, primarily affecting the small intestine. Patients develop intolerance to gluten, which is present in foods such as wheat, rye, spelt and barley. Classic symptoms include gastrointestinal problems such as chronic diarrhoea, abdominal distention, malabsorption, loss of appetite, and among children failure to grow normally.

Non-classic symptoms are more common, especially in people older than two years. There may be mild or absent gastrointestinal symptoms, a wide number of symptoms involving any part of the body, or no obvious symptoms. Due to the frequency of these symptoms, coeliac disease is often considered a systemic disease, rather than a gastrointestinal condition. Coeliac disease was first described as a disease which initially presents during childhood; however, it may develop at any age. It is associated with other autoimmune diseases, such as Type 1 diabetes mellitus and Hashimoto's thyroiditis, among others.

Coeliac disease is caused by a reaction to gluten, a group of various proteins found in wheat and in other grains such as barley and rye. Moderate quantities of oats, free of contamination with other gluten-containing grains, are usually tolerated. The occurrence of problems may depend on the variety of oat. It occurs more often in people who are genetically predisposed. Upon exposure to gluten, an abnormal immune response may lead to the production of several different autoantibodies that can affect a number of different organs. In the small bowel, this causes an inflammatory reaction and may produce shortening of the villi lining the small intestine (villous atrophy). This affects the absorption of nutrients, frequently leading to anaemia.

Diagnosis is typically made by a combination of blood antibody tests and intestinal biopsies, helped by specific genetic testing. Making the diagnosis is not always straightforward. About 10% of the time, the autoantibodies in the blood are negative, and many people have only minor intestinal changes with normal villi. People may have severe symptoms and they may be investigated for years before a diagnosis is achieved. As a result of screening, the diagnosis is increasingly being made in people who have no symptoms. Evidence regarding the effects of screening, however, is currently insufficient to determine its usefulness. While the disease is caused by a permanent intolerance to gluten proteins, it is distinct from wheat allergy, which is much more rare.

The only known effective treatment is a strict lifelong gluten-free diet, which leads to recovery of the intestinal lining (mucous membrane), improves symptoms, and reduces the risk of developing complications in most people. If untreated, it may result in cancers such as intestinal lymphoma, and a slightly increased risk of early death. Rates vary between different regions of the world, from as few as 1 in 300 to as many as 1 in 40, with an average of between 1 in 100 and 1 in 170 people. It is estimated that 80% of cases remain undiagnosed, usually because of minimal or absent gastrointestinal complaints and lack of knowledge of symptoms and diagnostic criteria. Coeliac disease is slightly more common in women than in men.

2023 in literature

autor de Fray Perico y su borrico, el gran best seller de la literatura infantil española (in Spanish) ???????
???????? (in Persian) Anise Koltz - This article contains information about the literary events and publications of 2023.

Deaths in May 2021

Legendary Batman, X-Men, and Static Artist, Dies at 49 Edy Lima, escritora infantil e roteirista de Como Salvar Meu Casamento, a novela que não teve fim, morre

Diethylstilbestrol

(October 1947). "The syndrome of congenitally aplastic ovaries with sexual infantilism, high urinary gonadotropins, short stature and other congenital abnormalities; - Diethylstilbestrol (DES), also known as stilbestrol or stilboestrol, is a nonsteroidal estrogen medication, which is presently rarely used. In the past, it was widely used for a variety of indications, including pregnancy support for those with a history of recurrent miscarriage, hormone therapy for menopausal symptoms and estrogen deficiency, treatment of prostate cancer and breast cancer, and other uses. By 2007, it was only used in the treatment of prostate cancer and breast cancer. In 2011, Hoover and colleagues reported adverse reproductive health outcomes linked to DES including infertility, miscarriage, ectopic pregnancy, preeclampsia, preterm birth, stillbirth, infant death, menopause prior to age 45, breast cancer, cervical cancer, and vaginal cancer. While most commonly taken by mouth, DES was available for use by other routes as well, for instance, vaginal, topical, and by injection.

DES is an estrogen, or an agonist of the estrogen receptors, the biological target of estrogens like estradiol. It is a synthetic and nonsteroidal estrogen of the stilbestrol group, and differs from the natural estrogen estradiol. Compared to estradiol, DES has greatly improved bioavailability when taken by mouth, is more resistant to metabolism, and shows relatively increased effects in certain parts of the body like the liver and uterus. These differences result in DES having an increased risk of blood clots, cardiovascular issues, and certain other adverse effects.

DES was discovered in 1938 and introduced for medical use in 1939. From about 1940 to 1971, the medication was given to pregnant women in the incorrect belief that it would reduce the risk of pregnancy complications and losses. In 1971, DES was shown to cause clear-cell carcinoma, a rare vaginal tumor, in

those who had been exposed to this medication in utero. The United States Food and Drug Administration subsequently withdrew approval of DES as a treatment for pregnant women. Follow-up studies have indicated that DES also has the potential to cause a variety of significant adverse medical complications during the lifetimes of those exposed including infertility.

The United States National Cancer Institute recommends children born to mothers who took DES to undergo special medical exams on a regular basis to screen for complications as a result of the medication. Individuals who were exposed to DES during their mothers' pregnancies are commonly referred to as "DES daughters" and "DES sons". Since the discovery of the toxic effects of DES, it has largely been discontinued and is now mostly no longer marketed for human treatment.

Portuguese people

Retrieved 16 May 2023. "Taxa bruta de mortalidade e taxa de mortalidade infantil". www.pordata.pt. Retrieved 16 May 2023. "Women in the EU are having their - The Portuguese people (Portuguese: Portugueses – masculine – or Portuguesas) are a Romance-speaking ethnic group and nation indigenous to Portugal, a country that occupies the west side of the Iberian Peninsula in south-west Europe, who share culture, ancestry and language.

The Portuguese state began with the founding of the County of Portugal in 868. Following the Battle of São Mamede (1128), Portugal gained international recognition as a kingdom through the Treaty of Zamora and the papal bull Manifestis Probatum. This Portuguese state paved the way for the Portuguese people to unite as a nation.

The Portuguese explored distant lands previously unknown to Europeans—in the Americas, Africa, Asia and Oceania (southwest Pacific Ocean). In 1415, with the conquest of Ceuta, the Portuguese took a significant role in the Age of Discovery, which culminated in a colonial empire. It was one of the first global empires and one of the world's major economic, political and military powers in the 15th and 16th centuries, with territories that became part of numerous countries. Portugal helped to launch the spread of Western civilization to other geographies.

During and after the period of the Portuguese Empire, the Portuguese diaspora spread across the world.

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