**Acromegaloid physical features in everyday clinical practice – case reports**

**Dubravka Jurišić-Eržen**

Department of Endocrinology and Diabetology, University Hospital Centre, Rijeka, Croatia; ivona.komosar1996@gmail.com

Department of Endocrinology, Faculty of Medicine, University of Rijeka, Rijeka, Croatia; dubravkaje@uniri.hr

Hormonal disorders which develop as a consequence of chronic growth hormone hypersecretion is well known as acromegaly and gigantism. The prefix pseudo- is used to describe a certain clinical condition without a clearly proven characteristic of pathophysiological mechanism and basic biochemical features; pseudoacromegaly or acromegaloidism match definition from above. We represent two cases of patients who have similar clinical acromegaloid features as the first sign of disease but completely different etiologic background of their acromegalic appearance. The first case of 57 -year-old male presented with a marked acral growth and coarse facial features, but the diagnosis of secondary amyloidosis caused by multiple myeloma was confirmed just after biopsy of tongue and buccal mucosa. The second case is the 63 -year-old male with an acromegaloid appearance caused by ectopic secretion of GH secreting lung carcinoma. The early diagnosis of ectopic acromegaly and pseudoacromegaly is still a challenging process. The key task is to confirm the GH axis abnormalities and establish the underlying disease, as a crucial step for faster treatment and need to avoid unnecessary therapeutic procedures to decreased mortality and improved quality of life.