Second to Fourth Digit Ratio in Patients with Hirsutism and Its Correlation with Hormonal Assay

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Abstract

Hirsutism will be a basic clinical state seen on female patients of constantly on ages. It influences around 5-10% of the ladies. The cause may be mostly hyperandrogenism, which might be ovarian or adrenal. It might be and only an uncommon metabolic syndrome, medication induced, alternately barely idiopathic infection. The point about this fill in may be with assess those seconds should fourth digit length proportion over patients with hirsutism and its correspondence with hormonal profile. This examine included 50 female patients torment from hirsutism as stated by altered Ferriman Furthermore Gallwey score, done addition, 30 Obviously solid people from claiming matched age. The results of the present study showed that patients had statistically significant higher levels than controls in Prolactin [P=0.000] and DHEA-S [P=0.005] with no statistically significant difference in other hormones and there was no significant correlation between second to fourth digit ratio and all the laboratory investigations in both hands. the study concluded that the assessment of hirsutism is a multifactorial and that 2D:4D ratio is very promising tool in the diagnosis of hirsutism and the assessment of its severity.

Keywords: Hirsutism, 2D, 4D, Hormonal, Cross-Sectional.

I. Introduction

Hirsutism will be a basic clinical state seen On female patients of constantly on ages. It influences around 5-10% of the ladies What's more will be An basic protestation in the dermatological outpatient Branch for cosmea motivations. The cause may be mostly hyperandrogenism, which might be ovarian or adrenal. It might be and only an uncommon metabolic syndrome, medication induced, alternately barely idiopathic infection [1].

The symptomatic assessment for hirsutism by includes two steps. In those vicinity for hirsutism must make affirmed Eventually Tom's perusing immediate examination of the patients, Concerning illustration huge numbers people with unwanted hair don't really bring terminal hair development done a male-like design What's more this will make identifier with Ferriman Also Gallwey scoring system; second, copartnered alternately etiological abnormalities Also issue must make excluded through investigations, those essential examination altogether ladies for hirsutism about whatever seriousness may be An plasma downnight testosterone and the

r will be will avoid states which might result in hirsutism Similarly as measuring dehydroepiandrosterone sulfide [DHEA-sulfate] which will be Exceptionally raised to androecium secreting tumors. Furthermore measuring 17 hydroxyprogesterone to screening patients to non-classic intrinsic adrenal hyperplasia [2] Furthermore measuring serum prolactin should avoid hyperprolactinemia [3].

The reason for hirsutism might be separated into, non-androgenic factors, androecium abundance Furthermore idiopathic infection hirsutism [4]. Non-androgenic reason for hirsutism would moderately rare, androgenetic reasons would beyond question the the vast majority basic reason for hirsutism, representing more or less 75-85% for such patients. Androecium issue include; PCOS, which influences around 70-80% about hirsute women, hyperandrogenic insulin-resistant acanthus nigricans syndrome, influencing regarding 3%, 21-OH-deficient non-classic adrenal hyperplasia On 2-8% of patients and, rarely, ovarian or adrenal androgen-secreting neoplasms [5].

Digit proportion is the proportion from claiming length of separate digits alternately fingers commonly measured from those mid-point of lowest part fold the place the fingers join the hands of the tip of the fingers. However, the greater part commonly, digit proportions demonstrate best 2D [index finger]:4D [ring finger] proportions [6]. Those proportion of the second digit [index finger =2D] of the fourth digit [ring digit = 4D] length need been guessed will reflect prenatal androecium introduction and the individual's affectability to androgens [7]. In females those 2D is as a rule more drawn out over 4D. This sexual orientation distinction in digit period proportions need been connected for the in-utero parity from claiming androecium will estrogen. It need been suggested that the 2D:4D proportion may be associated negatively with prenatal testosterone levels [8].

Confirmation over help about this see hails from those vicinity about mascot alternately easier digit proportions for Youngsters with intrinsic adrenal hyperplasia [CAH] who have higher androecium presentation Furthermore females suffice from CAH and also blacks [9]. Likewise, over Klinefelter’s syndrome, higher or ladylike digit ratios, attributable should a low testosterone introduction have been accounted for [6]. Couple investigations need accounted for that maternal smoking auto Throughout pregnancy elevates those prenatal testosterone What's more thus is connected with low or mascot 2D:4D proportions in the know youngsters [10].

Will help this hypothesis, regulate associations have been indicated the middle of fetal testosterone What's more 2D:4D Toward dissecting those amniotic hole [11]. A significant number of investigations need assessed the putative effect of prenatal androgens ahead physical, mental Also restorative aspects by utilizing those 2D:4D proportion [12]. However, the relationship between
hirsutism and the 2D:4D ratio has not yet been investigated.

This study was conducted as a case control study that involved 50 female patients with hirsutism and 30 healthy, age and sex matched controls between the age of 18 and 65 years recruited from Dermatology outpatient clinic, Benha University Hospital. All details of the study were discussed with the patients and informed consent was obtained from each patient before enrolment in the study. The protocol was revised and approved by the Ethics Committee of Human Research., Faculty of Medicine, Benha University.

Patients with any of the following conditions were excluded from the study: autoimmune.

2. Material and methods

This study was conducted as a case control study that involved 50 female patients suffering from hirsutism according to modified Ferriman and Gallwey score, in addition, 30 apparently healthy individuals of matched age and sex was chosen as a control group.

Patients who were excluded from the study:
1. Patients below the age of 18 years or above the age of 45 years.
2. Patients on corticosteroids and oral contraceptives during the last six months before enrolment in the study.
3. Patients with musculoskeletal deformities in the hand.
4. Pregnant and lactating females.
5. Patients with known thyroid illness or peripheral ischemia which may affect hair distribution.

2.1 History taking

Patients and controls were subjected to full history taking: Including personal history, family history, as well as history of other skin diseases or drug intake.

2.2 Clinical examination

Clinical examination was mainly done through modified Ferriman and Gallwey scale for hirsutism as a score of 1 to 4 is given for nine areas of the body [Ferriman and gallwey, 1961]. Score for normal is from 0 to less than 8, scores from 8 to 15 is considered mild hirsutism, score more than 15 is considered moderate or severe hirsutism.

2.3 Laboratory investigation

5ml of venous blood was taken by venipuncture from the subjects into dry plain tube and left at room temperature for about 20 min to be clotted then centrifuged at 1300 rpm. The serum was separated and divided in 2 aliquots and stored in freezer at -20 °C till analyzed. Determination of:
- Follicle Stimulating Hormone [FSH]
- Luteinizing Hormone [LH]
- Serum Testosterone
- Dehydroepiandrosterone-sulfate [DHEA-sulfate]
- Serum Prolactin
- 17 Hydroxy Progesterone.

2.4 Statistical Analysis

Data were collected, revised, coded and entered to the Statistical Package for Social Science [IBM SPSS] version 23. The quantitative data were presented as mean, standard deviations and ranges when their distribution found parametric and median with inter-quartile range [IQR] when their distribution found non-parametric. Also, qualitative variables were presented as number and percentages.

3. Results and discussion

3.1 Clinical results

The current study was carried out on 50 female patients with hirsutism their ages ranged from 20 to 40 years with a mean age of 30.35 ± 6.02 years. The control group included 30 healthy, age-matched women. Their ages ranged from 20 to 42 years with a mean age of 28.93 ± 6.20 years. No statistically significant differences were found between patients and controls regarding age Table (1). In all telogen effluvium patients, the hair pull test was positive all over the scalp [including frontal, 2 temporal and occipital regions].

Clinical Data of patients with hirsutism: Twenty-two [44%] patients reported to have positive family history of hirsutism while most of the patients had no history of PCOS Table (2).

Table (1) Comparison between patients and controls regarding age

<table>
<thead>
<tr>
<th>Age</th>
<th>Patients group</th>
<th>Control group</th>
<th>Test value*</th>
<th>P-value</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean±SD</td>
<td>30.35 ± 6.02</td>
<td>28.93 ± 6.20</td>
<td>1.007</td>
<td>0.317</td>
<td>NS</td>
</tr>
<tr>
<td>Range</td>
<td>20 – 40</td>
<td>20 – 42</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*: Independent t-test

Table (2) Prevalence of PCOS and Family history in patients’ group

<table>
<thead>
<tr>
<th></th>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCOS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Negative</td>
<td>38</td>
<td>76.0%</td>
</tr>
<tr>
<td>Positive</td>
<td>12</td>
<td>24.0%</td>
</tr>
<tr>
<td>Family History of Hirsutism</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Negative</td>
<td>28</td>
<td>56.0%</td>
</tr>
<tr>
<td>Positive</td>
<td>22</td>
<td>44.0%</td>
</tr>
</tbody>
</table>
As regard modified Ferriman & Gallwey [mFG] score, statistically significant increase was found in patients than in controls \([P = \text{less than } 0.001]\) Table (3).

**Table (3)** Comparison between patients and controls regarding mFG score

<table>
<thead>
<tr>
<th>F&amp;G score</th>
<th>Patients group</th>
<th>Control group</th>
<th>Test value*</th>
<th>P-value</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean±SD</td>
<td>15.88 ± 4.45</td>
<td>6.17 ± 0.79</td>
<td>11.821</td>
<td>&lt;0.001</td>
<td>S</td>
</tr>
<tr>
<td>Range</td>
<td>9 – 28</td>
<td>5 – 7</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

According to the severity of hirsutism, twenty-six [52\%] of the hirsutism patients had mild hirsutism and twenty-four [48\%] had moderate to severe hirsutism Table (4).

**Table (4)** Severity distribution among the studied cases

<table>
<thead>
<tr>
<th>Severity</th>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild</td>
<td>26</td>
<td>52.0%</td>
</tr>
<tr>
<td>Moderate to severe</td>
<td>24</td>
<td>48.0%</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

When Comparing between patients and the controls regarding 2D, 4D and their ratio in the both hands, 2D to 4D ratio was significantly increased in right hand \([P= 0.000]\) and also in the left hand \([P= 0.000]\) in hirsutism patients than controls Table (5).

**Table (5)** Comparison between patients and controls regarding 2D, 4D and their ratio in both hands

<table>
<thead>
<tr>
<th>Right</th>
<th>Patients group</th>
<th>Control group</th>
<th>Test value*</th>
<th>P-value</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No. = 50</td>
<td>No. = 30</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2D</td>
<td>Mean±SD</td>
<td>6.71 ± 0.43</td>
<td>-1.429</td>
<td>0.157</td>
<td>NS</td>
</tr>
<tr>
<td></td>
<td>Range</td>
<td>5.7 – 7.6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4D</td>
<td>Mean±SD</td>
<td>6.73 ± 0.43</td>
<td>0.656</td>
<td>0.514</td>
<td>NS</td>
</tr>
<tr>
<td></td>
<td>Range</td>
<td>5.8 – 7.6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second to Fourth</td>
<td>Mean±SD</td>
<td>1.00 ± 0.03</td>
<td>-4.987</td>
<td>0.000</td>
<td>S</td>
</tr>
<tr>
<td>Digit Ratio</td>
<td>Range</td>
<td>1.03 ± 0.02</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*: Independent t-test

Relation between 2D to 4D Ratio and Clinical Data

No statistically significant relation was found between 2D:4D ratio and PCOS in both right hand \([P=0.544]\) and left hand \([P=0.689]\) Table (6).

**Table (6)** Correlation between second to fourth digit ratio of both hands with PCOS

<table>
<thead>
<tr>
<th>Second to Fourth Digit Ratio</th>
<th>Negative PCOS</th>
<th>Positive PCOS</th>
<th>Test value</th>
<th>P-value</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>[right] Mean±SD</td>
<td>1.00 ± 0.03</td>
<td>0.99 ± 0.03</td>
<td>0.611</td>
<td>0.544</td>
<td>NS</td>
</tr>
<tr>
<td>[right] Range</td>
<td>0.95 – 1.06</td>
<td>0.97 – 1.05</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>[left] Mean±SD</td>
<td>1.00 ± 0.02</td>
<td>1.00 ± 0.03</td>
<td>0.403</td>
<td>0.689</td>
<td>NS</td>
</tr>
<tr>
<td>[left] Range</td>
<td>0.97 – 1.06</td>
<td>0.97 – 1.07</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*: Independent t-test

3.3 Discussion

Hair follicles in the human embryo principal happen during more or less 9 weeks about gestation, for practically creating Eventually Tom's perusing week 16, harmonizing nearly for the top of prenatal androgens and the determination about digit proportions [13]. Those point for this consider might have been on evaluate those second on fourth digit period proportion
[2D:4D] Previously, patients with hirsutism also its correspondence for hormonal profile. This might have been done through assessment about 50 patients suffice starting with hirsutism as stated by changed Ferriman Furthermore Gallwey [mFG] score What's more 30 clinically allowed members served Likewise a control one assembly. Following taking point by point history Also looking at both patients and controls Furthermore settling on the necessary lab investigations for the analysis of the reason for hirsutism, it might have been watched that hirsutism patients required statistically huge higher levels over controls done Prolactin [P=0.000] and DHEA-S [P=0.005]. At there might have been no noteworthyness to whatever remains of the investigations which were downright testosterone [TT], follicle fortifying hormone [FSH], luteinizing hormone [LH] and 17 hydroxyprogesterone. This might have been in understanding J. Lakhani Som [14] who expressed that, expanded prolactin might have been display On 21.05% from claiming patients for hirsutism and the DHEAS levels were raised On 11.36% from claiming patients for hirsutism, and S.T. Tabari [15] who affirmed the vitality of hyperprolactinemia Concerning illustration a standout amongst the reason for hirsutism, Likewise hyperprolactinemia might have been Exceptionally predominant Around hirsutism patients. V. Krishnendra [16] also accounted that testosterone level might have been raised Previously, 43.3% Furthermore might have been typical On 56.7% about patients. LH/FSH proportion might have been raised to 46.7% same time ordinary clinched alongside 53.3% from claiming patients. As opposed with this study, A.K. Khalaf [17] found no huge distinction for serum levels from claiming prolactin recognized between hirsutism patients and control gatherings What's more [16] reasoned that hormonal lopsidedness will be seen over patients displaying for hirsutism Also hormones similar to testosterone might have been raised clinched alongside 43.3% about patients, LH: FSH might have been brought up Previously, 46.7% from claiming patients. Those distinctive outcomes might underscore that the pathogenesis of hirsutism will be multifactorial Furthermore vague Likewise hirsutism comes about starting with an interactional the middle of androecium levels Furthermore hair follicle affectability with androecium [18]. This might be clarified Likewise [19] finished up that almost every one hirsute ladies need an expanded in androgens, generally testosterone, yet the build might not be addition on raise those serum aggregate testosterone focus over those ordinary reach a direct result those transporter protein to testosterone, sex hormone-binding globulin, may be stifled At androecium preparation will be expanded. In the remaining women, those hirsutism might be expected on expanded change from claiming testosterone on dihydrotestosterone Toward those catalyst 5α-reductase clinched alongside fringe tissue, including hair follicles, this metabolite may be more intense over testosterone Thus, raised 5α-reductase movement need have been exhibited in the hair follicles for ladies with idiopathic infection hirsutism, What's more overabundance hair Growth will be prone will be expected should an overstated reaction of the hair follicle should ordinary androecium levels. Previously, our study, twenty-two [44%] of the patients required a sure family history in the first-degree relatives As far as torment for hirsutism and twenty-eight [56%] of the patients required negative family history. In distinctive studies, distinctive percent have been accounted for As far as certain gang record Around individuals with hirsutism. A certain gang record from claiming hirsutism might have been discovered Previously, 42.5% of patients On contemplate by [20], 24.1% of patients in study by [21], 50% in study by [22], 40.7% in study by [23] and 29% of patients in study by [24]. In the present study, throughout historical backdrop taking, 24% from claiming hirsutism patients offered historical backdrop for PCOS. Different investigations bring accounted distinctive percent As far as sure history of PCOS [14] accounted for that 46% from claiming hirsutism patients satisfied the criteria to PCOS, [25] evaluated those PCOS persuasiveness to a chance to be 13% Previously, hirsutism patients Furthermore [26] found 47% from claiming hirsutism patients were diagnosed for PCOS. The Contrast Might be clarified as, in our investigation PCOS might have been known through the history of the patients Also that might have been not sufficient for those symptomatic criteria of the PCOS and its full investigations Similarly as ultrasonography will be imperative in the analysis of PCOS. In the current study, the proportion the middle of the second and the fourth digit length [2D:4D ratio] might have been altogether easier clinched alongside hirsutism patients over in controls On both control [P= 0.000]. In spite of the fact that those association the middle of hirsutism Also 2D:4D proportions might have been not investigated before, 2D:4D required been examined clinched alongside huge numbers illnesses that are influenced Eventually Tom's persuing androecium overabundance or expanded androecium receptors affectability. This originated in understanding later on when [27] stated that low, that's only the tip of the iceberg male type, 2D:4D proportions were connected with deferred self-reported menarche Furthermore [28] underpinned that those 2D: 4D proportion may be a predictor for skin break out development, duration, What's more seriousness grade, no less than On female patients. Also, Ö. Bilig [29] discovered that an easier 2D:4D proportion in the right hand is connected with aga Previously, guys for a gentle to direct impact measure and this might have been after the fact suitably for [30] who inferred that those left hand digit proportion 2D:4D is easier in aga patients, and therefore, left hand digit proportion 2D:4D could be utilized Concerning illustration a estimation device around for aga improvement.
D. Bola [31] inferred that there may be a association between PCOS and hirsutism patients without PCOS for both right hand [P=0. 544] and left hand [P=0. 689], this might have been in understanding with [41] who expressed that ladies with PCOS don't exhibit finger period examples that would steady for expanded prenatal androecium introduction. That these discoveries don't preclude An part to prenatal androgens in the improvement from claiming PCOS.

As opposed on this study, [42] closed that ladies with PCOS might have masculinized finger length examples with low 2D:4D steady for expanded prenatal androecium exposure. Also, [32] stated that there might have been statistically critical distinction between 2D:4D about PCOS instances and controls also others 2D:4D could be utilized Likewise an instrument to right on time prediction about polycystic ovarian syndrome [PCOS].

Comparative brings about distinctive states were news person Eventually Tom's perusing [28] who stated that skin break out seriousness might have been emphatically corresponded with those imply 2D: 4D ratio, and [43] inferred that 2D:4D proportion might have been were differentially identified with the seriousness about premenstrual side effects On solid youthful ladies. Low straight 2D:4D Also helter skelter exited 2D:4D were positively connected with secondary seriousness manifestation scores.

4. Conclusion
Those objective for surveying hirsutism is should endeavor to determine those particular etiology and this must a chance to be carried out through kept tabs history.

5. References
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