

DAFTAR PUSTAKA

1. Pulungan AB, Siregar CD, Aditiawati, Soenggoro EP, Triningsih E, Suryawan IWB, et al. Korteks adrenal dan gangguannya. Dalam: Batubara JRL, Tridjaja B, Pulungan AB, penyunting. Buku ajar endokrinologi anak. Edisi ke-1. Jakarta: Badan Penerbit Ikatan Dokter Anak Indonesia; 2015: 251-95.
2. Untario C. Hiperplasia adrenal kongenital di Surabaya: analisis retrospektif praktek endokrin anak 1997-2011. *Sari Pediatri*. 2013; 14: 337-40.
3. Deaton MA, Glorioso JE, McLean DB. Congenital adrenal hyperplasia: not really a zebra. *Am Fam Physician*. 1999; 59(5):1190-6, 1172.
4. Widodo AD, Batubara JRL, Irfan EB, Akib AP, Pardede SO, Setyanto DB. Densitas tulang pada hiperplasia adrenal kongenital dengan terapi glukokortikoid. *Sari Pediatri*. 2011; 12(5):307-14.
5. Sari NIN, Tridjaja B, Kaswandan N, Sjarif DR, Putra ST, Gunardi H. Profil pubertas dan pertumbuhan linear pada HAK dalam pengobatan. *Sari Pediatri*. 2015; 16:356-64.
6. Technical Report WHO: Congenital adrenal hyperplasia. Section on endocrinology and committee on genetics Pediatrics. 2000; 106:1511-8.
7. Charmandari E, Weise M, Bornstein SR, Eisenhofer G, Keil MF, Chrousos GP. Children with classic congenital adrenal hyperplasia have elevated serum leptin concentrations and insulin resistance: potential clinical implications. *J Clin Endocrinol Metab*. 2015; 87:2114-20.
8. Dauber A, Kellogg M, Majzoub JA. Monitoring of therapy in congenital adrenal hyperplasia. *Clin Chemist*. 2010; 56:1245-51.
9. Sciannamblo M, Russo G, Cuccato D, Chiumello G, Mora S. Reduced bone mineral density and increased bone metabolism rate in young adult patients with 21-hydroxylase deficiency. *J Clin Endocrinol Metab*. 2016; 91:4453-8.
10. White PC, Speiser PW. Congenital adrenal hyperplasia due to 21-hydroxylase deficiency. *Endocr Rev*. 2018; 21:245-91.
11. Speiser PW, Azziz R, Baskin LS, Ghizzoni L, Hensle TW, Merke DP, Meyer-Bahlburg HF. A Summary of the Endocrine Society Clinical Practice Guidelines on Congenital Adrenal Hyperplasia due to Steroid 21-Hydroxylase Deficiency *Int J Pediatr Endocrinol*. 2017: 494173.
12. Mendes CT, Marini SH, Baptista MT, Guerra-Junior G, De-Mello MP, Paulino MF, Morcillo AM. Normalization of height and excess body fat in children with salt-wasting 21- hydroxylase deficiency. *J Pediatrics*. 2015; 87(3):263–268.
13. Frankenburg MD, William KJ, Dobbs JB. Manual Tes Denver II, edisi ke 2. *Pediatri Sosial/Tumbuh kembang bagian ilmu kesehatan anak Dr. Sardjito*. 2018.
14. Mueller S, Temple V, Oh E, VanRyzin C, Williams A, Cornwell B, et al. Early androgen exposure modulates spatial cognition in congenital adrenal hyperplasia (HAK). *Psychoneuroendocrinology* 2008; 33: 973e980.
15. Pedoman Pembinaan Krida Bina Perilaku Hidup Bersih dan Sehat. 2019. Kementerian Kesehatan RI. Direktorat Jenderal Kesehatan Masyarakat.
16. Johannsen TH, Ripa CPL, Reinisch JM, Schwartz M, Mortensen EL, Main KM. Impaired cognitive function in women with congenital adrenal hyperplasia. *J Clin Endocrinol Metab* 2006; 9: 1376e1381.
17. Kawawaki H, Kusuda S, Kurimasa H, Tomiwa K, Murata R. Seizures associated with fever in children of congenital adrenal hyperplasia. *No To Hattatsu*. 2001; 33(1):27-30.
18. Lee SH, Byeon JH, Kim GH, Eun BL, Eun SH. Epilepsy in children with a history of febrile seizures. *Korean J Pediatr*. 2016; 59(2):74-9.



19. Halper A, Hooke MC, Gonzalez-Bolanos MT, Vanderburg N, Tran TN, Torkelson J. Health-related quality of life in children with congenital adrenal hyperplasia. *Health Qual Life Outcomes*. 2017; 15:1–7.
20. Khairani AF, Sejahtera DP. Strategi pengobatan epilepsi : monoterapi dan politerapi. Universitas Gajah Mada. 2019; 18(3): 115–119.
21. Carroll L, Graff C, Wicks M, Jones T, Thomas AD. Health-related quality of life of children with congenital adrenal hyperplasia: A mixed methods study. *J Pediatr Nurs*. 2021;58:88–94.
22. Ratnaningsih T, Alimansur M. The analysis predictor of language development achievement in under five-year-old children. *International Journal of Nursing and Midwifery Science (IJNMS)*. 2019;3(8):80–8.
23. Mallappa A, Merke DP. Management challenges and therapeutic advances in congenital adrenal hyperplasia. *Nat Rev Endocrinol*. 2022;18(6):337–52.
24. Poudel P, Chitlangia M, Pokharel R. Predictors of poor seizure control in children managed at a tertiary care hospital of Eastern Nepal. *Iran J Child Neurol*. 2016;10(3):48–56.
25. Katabami T, Tsukiyama H, Tanabe M, Matsuba R, Murakami M, Nishine A, et al. Development of a simple prediction model for adrenal crisis diagnosis. *Sci Rep*. 2020;10(1):1–8.
26. Washington KN, Thomas-Stonell N, McLeod S, Warr-Leeper G. Outcomes and predictors in preschoolers with speech-language and/or developmental mobility impairments. *Child Lang Teach Ther*. 2015;31(2):141–57.
27. Cavallo F, Mohn A, Chiarelli F, Giannini C. Evaluation of Bone Age in Children: A Mini-Review. *Front Pediatr*. 2021;9(3):5–8.
28. Nass R, Baker S. Learning disabilities in children with congenital adrenal hyperplasia. *J Child Neurol* 1991; 6: 306e312.
29. Kaplan Z, Savaş Z, Şenol EG. Language development properties of an individual with congenital adrenal hyperplasia : a case study. *New Eng J Med*. 2018; 38:2018.
30. Plante E, Boliek C, Binkiewicz A, Erly WK. Elevated androgen, brain development and language/learning disabilities in children with congenital adrenal hyperplasia. *Dev Med Child Neurol*. 1996;38:423–37.
31. Al-Rayess H, Addo OY, Palzer E, Jaber M, Fleissner K, Hodges J, et al. Bone Age Maturation and Growth Outcomes in Young Children with HAK Treated with Hydrocortisone Suspension. *J Endocr Soc*. 2022;6:1–10.
32. Seth A. Optimizing Stature in Congenital Adrenal Hyperplasia: Challenges and Solutions. *Indian J Pediatr*. 2019;86:489–91.
33. Gidlof S, Hogling DE, Lonnberg H, Ritzen M, Lajic S, Nordenstrom A. Growth and Treatment in Congenital Adrenal Hyperplasia: An Observational Study from Diagnosis to Final Height. *Horm Res Paediatr*. 2023.
34. Weiss M, Dörr HG, Brandmaier R, Schwarz HP, Belohradsky BH. Vaccine tolerance in steroid substituted patients with congenital adrenal hyperplasia. *Eur J Med Res*. 1997 Jul 28;2(7):290-2.
35. Sarafoglou K, Forlenza GP, Addo OY, Kylo J, Lteif A, Hindmarsh PC, et al. Obesity in children with congenital adrenal hyperplasia in the Minnesota cohort: importance of adjusting body mass index for height-age. *Clin Endocrinol (Oxf)*. 2017 May ; 86(5): 708–716.
36. Halma E, De Louw AJA, Klinkenberg S, Aldenkamp AP, Ijff DM, Majoie M. Behavioral side-effects of levetiracetam in children with epilepsy: A systematic review. *Seizure*. 2014;23:685–91.



37. Finkelstein GP, Kim MS, Sinaii N, et al. Clinical characteristics of a cohort of 244 patients with congenital adrenal hyperplasia. *Journal of Clinical Endocrinology and Metabolism*. 2012; 97:4429–4438.
38. Moreira RP, Villares SM, Madureira G, et al. Obesity and familial predisposition are significant determining factors of an adverse metabolic profile in young patients with congenital adrenal hyperplasia. *Hormone Research in Paediatrics*. 2013; 80:111–118.
39. Seth A. Optimizing Stature in Congenital Adrenal Hyperplasia: Challenges and Solutions. *The Indian Journal of Pediatrics*. 2019; 86(6):489–491.
40. Ekblom K, Strandqvist A, Lajic S, Hirschberg AL, Falhammar H, Nordenström A. Assessment of medication adherence in children and adults with congenital adrenal hyperplasia and the impact of knowledge and self-management. *Clin Endocrinol*. 2021;94:753–64.
41. Bancos I, Hahner S, Tomlinson J, Arlt W. Diagnosis and management of adrenal insufficiency. *Lancet Diabetes Endocrinol*. 2015;3:216–26.
42. Nass R, Baker S. Learning disabilities in children with congenital adrenal hyperplasia. *J Child Neurol*. 1991; 6:306-12.
43. Bizzarri C, Capalbo D, Wasniewska MG, Baronio F, Grandone A, Cappa M. Adrenal crisis in infants and young children with adrenal insufficiency: Management and prevention. *Front Endocrinol*. 2023;14:1–7.