



[Home](#) → [Medical Encyclopedia](#) → Frontal bossing

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Frontal bossing

Frontal bossing is an unusually prominent forehead. It is sometimes associated with a heavier than normal brow ridge.

Considerations

Frontal bossing is seen only in a few rare syndromes, including acromegaly, a long-term (chronic) disorder caused by too much growth hormone, which leads to enlargement of the bones of the face, jaw, hands, feet, and skull.

Causes

Causes include:

- Acromegaly
- Basal cell nevus syndrome
- Congenital syphilis
- Cleidocranial dysostosis
- Crouzon syndrome
- Hurler syndrome
- Pfeiffer syndrome
- Rubinstein-Taybi syndrome
- Silver-Russell syndrome
- Use of the antiseizure drug trimethadione during pregnancy

Home Care

There is no home care needed for frontal bossing. Home care for disorders associated with frontal bossing varies with the specific disorder.

When to Contact a Medical Professional

If you notice that your child's forehead looks overly prominent, talk to your health care provider.

What to Expect at Your Office Visit

An infant or child with frontal bossing generally has other symptoms and signs. Taken together, these define a specific syndrome or condition. The diagnosis is based on a family history, medical history, and thorough physical evaluation.

Medical history questions documenting frontal bossing in detail may include:

- When did you first notice the problem?
- What other symptoms are present?
- Have you noticed any other unusual physical characteristics?
- Has a disorder been identified as the cause of the frontal bossing?
- If so, what was the diagnosis?

Lab studies may be ordered to confirm the presence of a suspected disorder.

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