

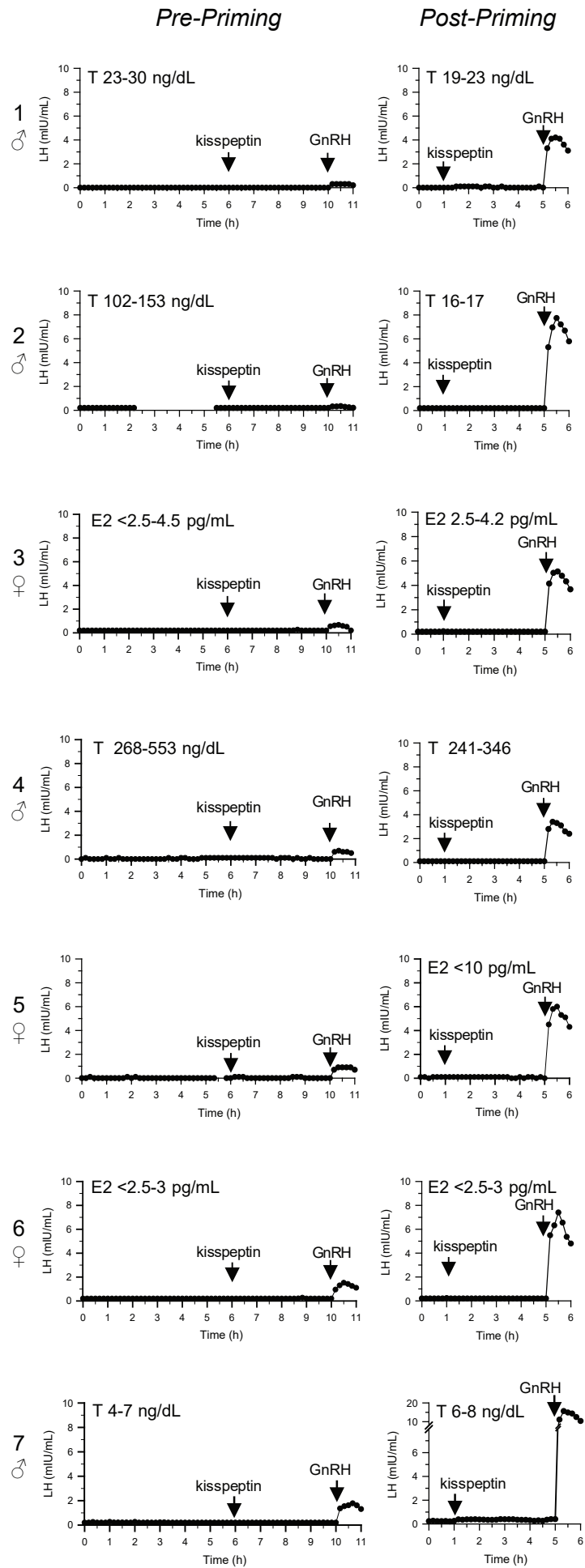
Figure S1. Neuroendocrine profiles of children presenting with delayed or stalled puberty.

Serum luteinizing hormone (LH) concentrations were measured at baseline (hours 0-6), after exogenous kisspeptin (hours 6-10), and after exogenous gonadotropin-releasing hormone (GnRH; hours 10-11). Subjects returned after priming with exogenous GnRH, and serum LH was measured at baseline (hours 0-1), after exogenous kisspeptin (hours 1-5), and after exogenous GnRH (hours 5-6). Baseline serum sex-steroid concentrations (estradiol, E2, and testosterone, T) were measured on one- to two-hour pools. Subjects 1-7 showed no response to kisspeptin, Subject 8 showed an intermediate response, and Subjects 9-15 showed robust responses to kisspeptin.

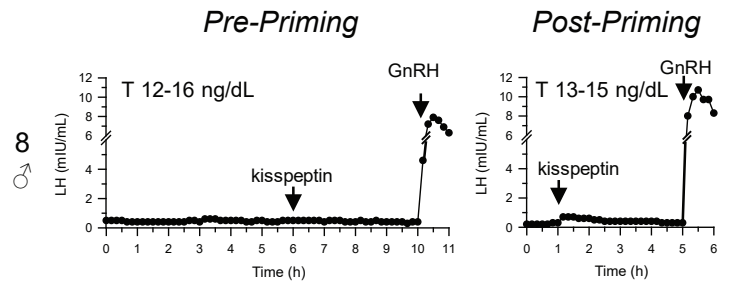
Figure S2: Time-to-peak for luteinizing hormone (LH) pulses induced by kisspeptin and by gonadotropin-releasing hormone (GnRH). Pre-priming data from six kisspeptin responders (Subjects 10-15) demonstrate that kisspeptin-induced LH pulses took significantly longer to reach their peaks than GnRH-induced LH pulses (paired t-test). Bars show means and standard deviations.

Figure S1

Non-Responders



Intermediate Responder



Responders

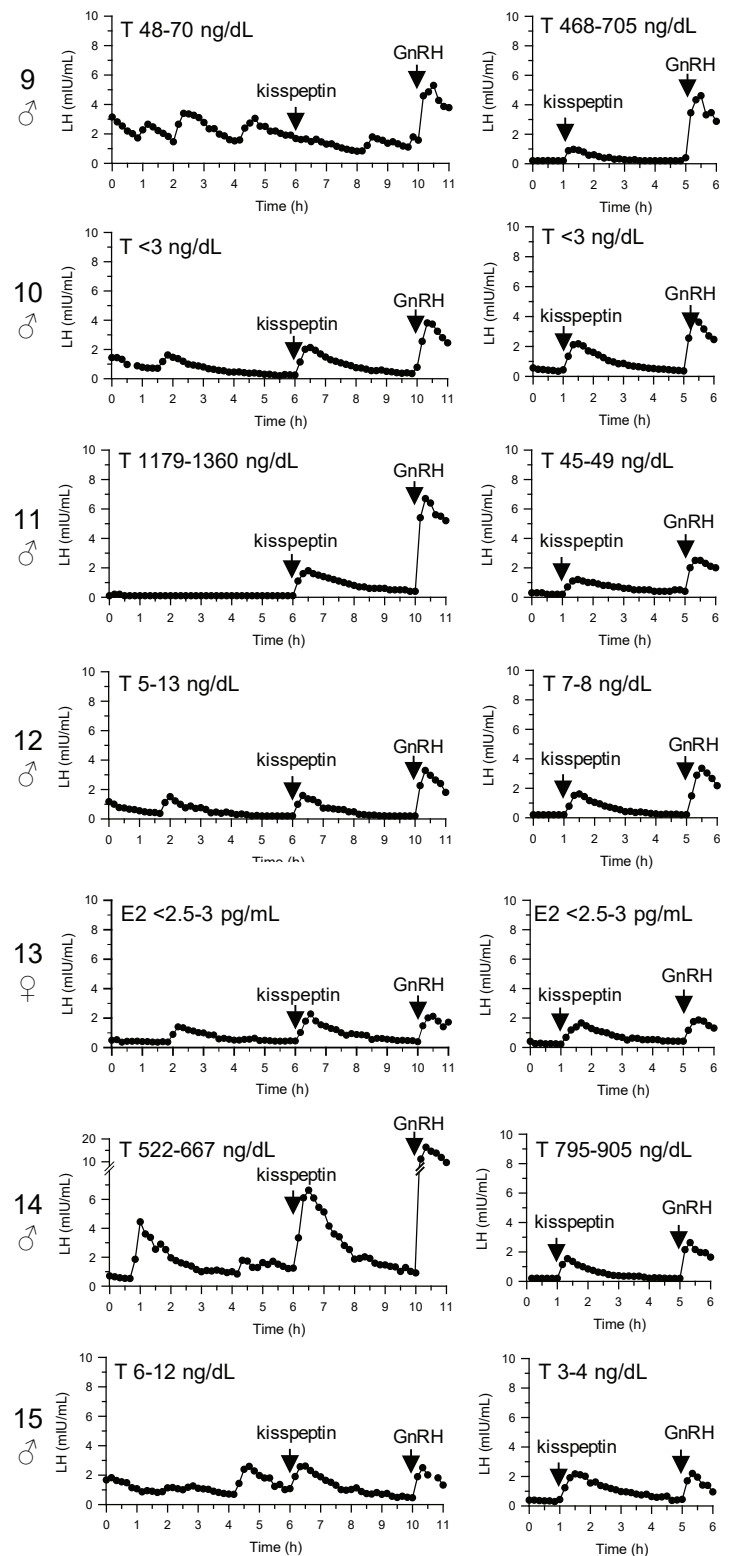


Figure S2

