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RESEARCH ARTICLE

SACROCOCCYGEAL TERATOMA

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Manuscript History

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Abstract

Introduction: Sacrococcygeal teratomas are the most common of all the Germ cell tumors in pediatric age group have their origin from the totipotent cells from Hansen's node or primitive germ cells.(1) Incidence is approximately 1 in 40,000 live births with a male to female ratio of 1:3–1:4.

Case Report: A 5 day old male baby delivered via LSCS at 36 Weeks was admitted to NICU due to large sacrococcygeal teratoma (20X15cms). Total weight of neonate was 2.7kgs of which tumor was approximately 700gm. Ct Abdomen and pelvis Revealed Type 2 Mature sacrococcygeal teratoma with intrapelvic and large extrapelvic component with Spina bifida occulta and surgical removal of tumour was performed

Discussion: Sacrococcygeal tumors can be diagnosed antinatally, the cases with previous diagnosis are at a high risk of perinatal complications and fetal death from high output cardiac failure. Early surgical Management in above case and Good postoperative care, minimal blood loss during procedure resulted in Good outcome (2)

Conclusion: Complete surgical resection is main stay of treatment

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Introduction:-

Sacrococcygeal teratomas are the most common of all the Germ cell Tumors in pediatric age group that have their origin from the totipotent cells from Hansen's node or primitive germ cells.

Incidence is approximately 1 in 40,000 live births with a male to female ratio of 1:3–1:4;

Huge and highly vascular SCTs, may result in massive hemorrhagic complications.

It can rarely present as Hydrops fetalis

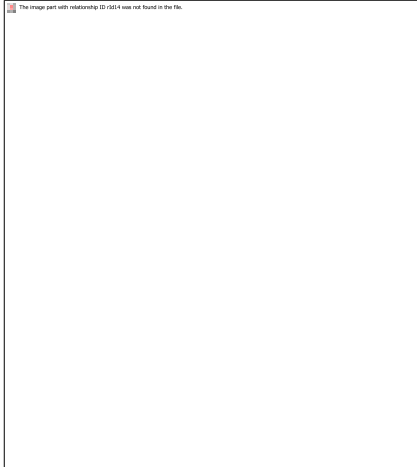
Case Report

A 5 day old male baby delivered via LSCS at 36 WOG was admitted to NICU due to large sacrococcygeal teratoma (20X15cms).

The neonate had no other congenital abnormality. Total weight of neonate was 2.7kgs of which tumor was approximately 700gm.

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Ct Abdomen and pelvis Revealed Type 2 Mature sacrococcygeal teratoma with intrapelvic and large extrapelvic component with Spina bifida occulta . Complete surgical resectipn of tumour was performed

Discussion:-

Sacrococcygeal tumors can be diagnosed antinatally,the cases diagnosed before birth are at a high risk of perinatal complications and fetal death from high output cardiac failure. Early surgical Management in above case and Good postoperative care, minimal blood loss during procedure resulted in Good outcome (2)

Conclusion:-

Mature sacrococcygeal teratoma appear to be benign in nature with no secondaries/Malignant changes. Complete surgical resection is main stay of treatment

References:-

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