OMPHALOCELE WITH ASSOCIATED TERATOMA IN A NEONATE

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A 6-hour-old full-term male, 2750 g at birth, was admitted with chief complaints of abdominal tumors, exomphalos and defect of the abdominal wall (Fig. 1). A slightly low temperature was present and acid-base balance (pH 7.388, PCO₂ 40.2 mmHg, HCO₃ 23.6 mEq/L, B.E. -0.5 mEq/L) was within normal range. General condition was relatively good.

The diagnosis on admission was omphalocele with associated tumors on the abdominal wall. An operation was performed on 9 hours after birth. Its findings were as follows. At first we removed the pedunculated tumor. And through a skin incision around the rim of the omphalocele, performed Gross's one staged operation with excision of a radix of the hepatic lobe which was the content of the hernia hanging down with a cord from median portion of the left and right hepatic lobes. The excised specimens are presented in Fig. 2. and cut surface of the pedunculated tumor in Fig. 3. These pedunculated tumor

Fig. 1 A 6-hour-old full-term male.
Two tumors in the central region on the abdomen. One of them in the umbilical region is small omphalocele. Abdominal organ is visible under the peritoneum and amnion. Another is a solid tumor.

There were two large tumors on the abdomen, through one of which the organ in the peritoneal cavity was seen. Another tumor was as large as an egg, pedunculated, and elastic soft.
was diagnosed to be teratoma on histological finding. The baby improved satisfactorily after the operation and was discharged in good condition 18 days after he was admitted.

Recently Scobie, W. G. et al. has presented one case report of umbilical hernia with associated hamartoma in a neonate. But a search of the literature has revealed no similar case. Thus we reported this case as rare one.

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REFERENCES