Giant Coccygeal Teratoma in the Newborn

Case Report

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The occurrence of presacral tumors is infrequent. Particular techniques in surgical treatment and postoperative results have been reported. We are reporting a coccygeal teratoma of enormous size successfully removed from a newborn infant.

Case Report

A baby girl was admitted to the neurosurgical unit of Miulli Civic Hospital of Acquaviva, Bari, on July 16, 1968, only a few hours after birth.

Examination. A huge mass was found in the coccygeal and perineal region measuring about 37 cm in diameter and covered by a very vascular skin (Fig. 1 left). Rectal examination and barium studies revealed displacement of the ampulla rectalis by the mass. Myelography showed a normal vertebral canal that apparently had no relationship with the malformation (Fig. 1 right).

Operation. On July 18, the patient was operated on under general anesthesia in a supine position with the legs flexed over the trunk so that the anal sphincters were under direct vision. An elliptical transverse incision was made with the anterior skin flap larger than the posterior. While the tumor was being dissected from the coccygeal attachment of the gluteal muscles, the pudendal nerves were carefully preserved. The tumor was removed en block after resection of its peduncle from the coccyx; it weighed 1050 gm. The specimen was examined at the Institute of Pathologic Anatomy and Histology of the University of Bari, and the diagnosis was that of teratoma.

Fig. 1. Left: Newborn girl with coccygeal teratoma. Right: The myelogram shows no relationship with tumor.
was seen in follow-up; the neurological and physical examinations were satisfactory (Fig. 2).

**Discussion**

Myelography excluded any neural involvement and indicated the surgical approach. Early surgical treatment was deemed advisable to prevent bowel obstruction. There is a general feeling that teratomas, epidermoids, dermoids, and neurenteric cysts are slow-growing tumors related to maldevelopment of the cells of the posterior neuropore. However, in our case, the teratoma had reached an enormous size at birth.

**Summary**

We have reported the successful removal of a coccygeal teratoma weighing 1050 gm from a newborn infant.

**References**
