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BENIGN SACROCOCCYGEAL TERATOMA:A FIFTEEN-YEAR RETROSPECTIVE STUDY

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Abstract:

In spite of being histologically benign, sacrococcygeal teratoma (SCT) may recur either as a benign or malignant tumor. A total of 26 patients with benign neonatal SCTs were treated in Taleghanee and Mofid medical centers from 1986 to 2000. Investigations included radiography, abdominal ultrasound and computed tomography (CT) scan and measurement of tumor marker (α -fetoprotein). Initial surgical removal of the SCT (including the coccyx) was carried out during the first two weeks of life. One patient died on the first day of life following tumor rupture due to hemorrhagic shock before undergoing surgical intervention. Eight children had recurrences. Two were benign and six malignant teratomas, the latter having been benign on histology of the primary tumor. Five patients with malignant lesions required abdominosacral excision, two had a preliminary colostomy and chemotherapy followed by excision of the residual tumor and colostomy closure at a later stage, but in last one tumor was excised at the sacrococcygeal area. The overall follow-up ranged from 3 months to 13 years. There have been no complaints of functional neurological deficits after the operation. We conclude that SCT, although histologically benign, has an alarming potential to recur either as a benign or malignant tumor during the first 3 years of life, therefore, a close follow up for at least 3 years (physical examination serum α -fetoprotein and diagnostic imaging) is recommended for all patients who have undergone excision of SCT.

Keywords:

Sacrococcygeal teratoma ; yolk sac ; α -fetoprotein

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