

Sacroccocygeal Teratoma

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Patient Review

- 30 Year Old G2P1 patient presents to a MFM office following an abnormal outside ultrasound
 - History of one live birth via C-section
- Comprehensive detailed ultrasonography assessment shows large cystic and solid (mixed) mass arising of the sacroccocygeal region of a 21 week 0 day fetus
 - There was also a ventricular septal defect of the fetal heart noted
 - Fetal IUGR later diagnosed
- MRI examination showed that the teratoma did not communicate with the spinal cord and no open neural tube defects were noted
- Patient carried the female fetus to 37 weeks gestation and delivered early via C-section
- Surgical resection of tumor was performed and neonate went home following a 5 week stay in the neonatal intensive care unit

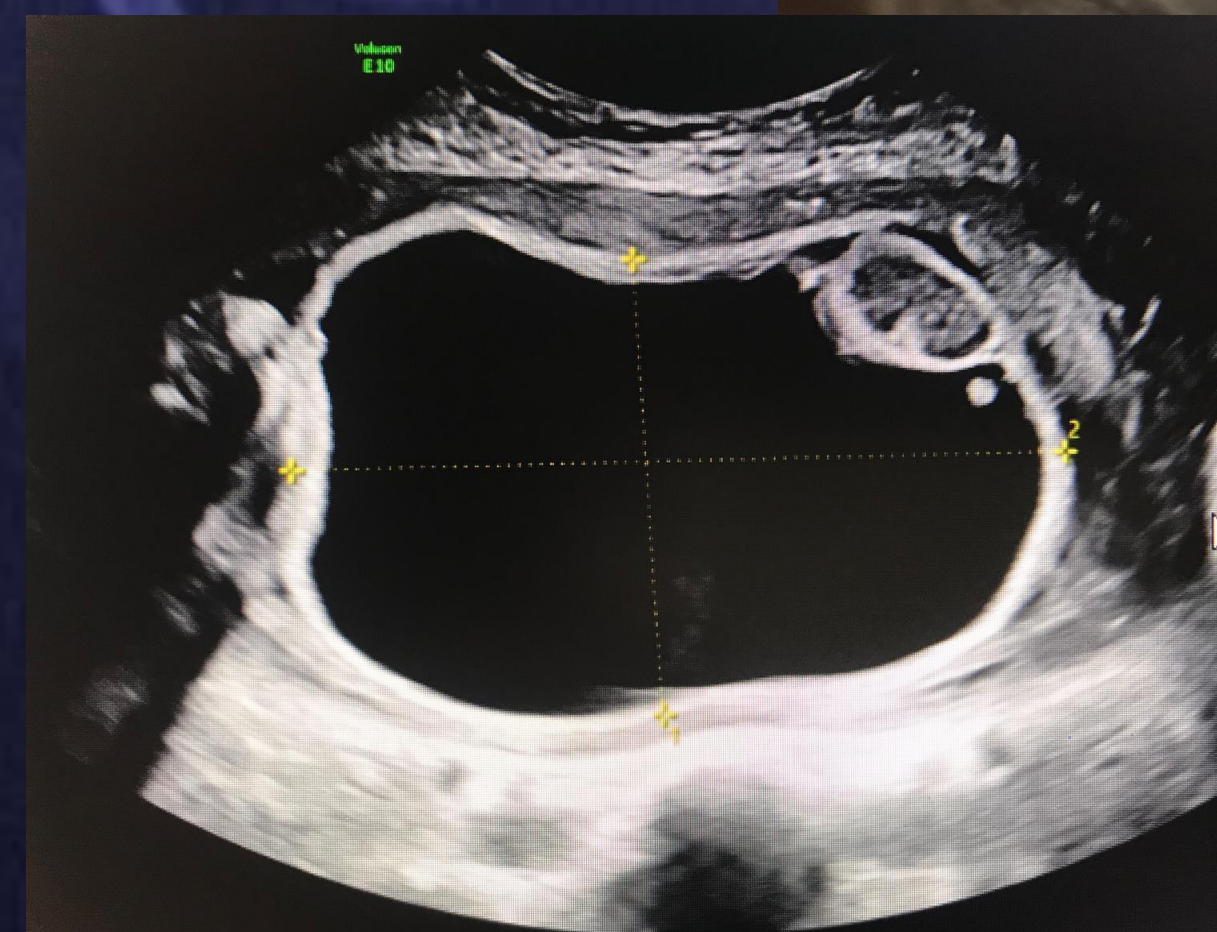
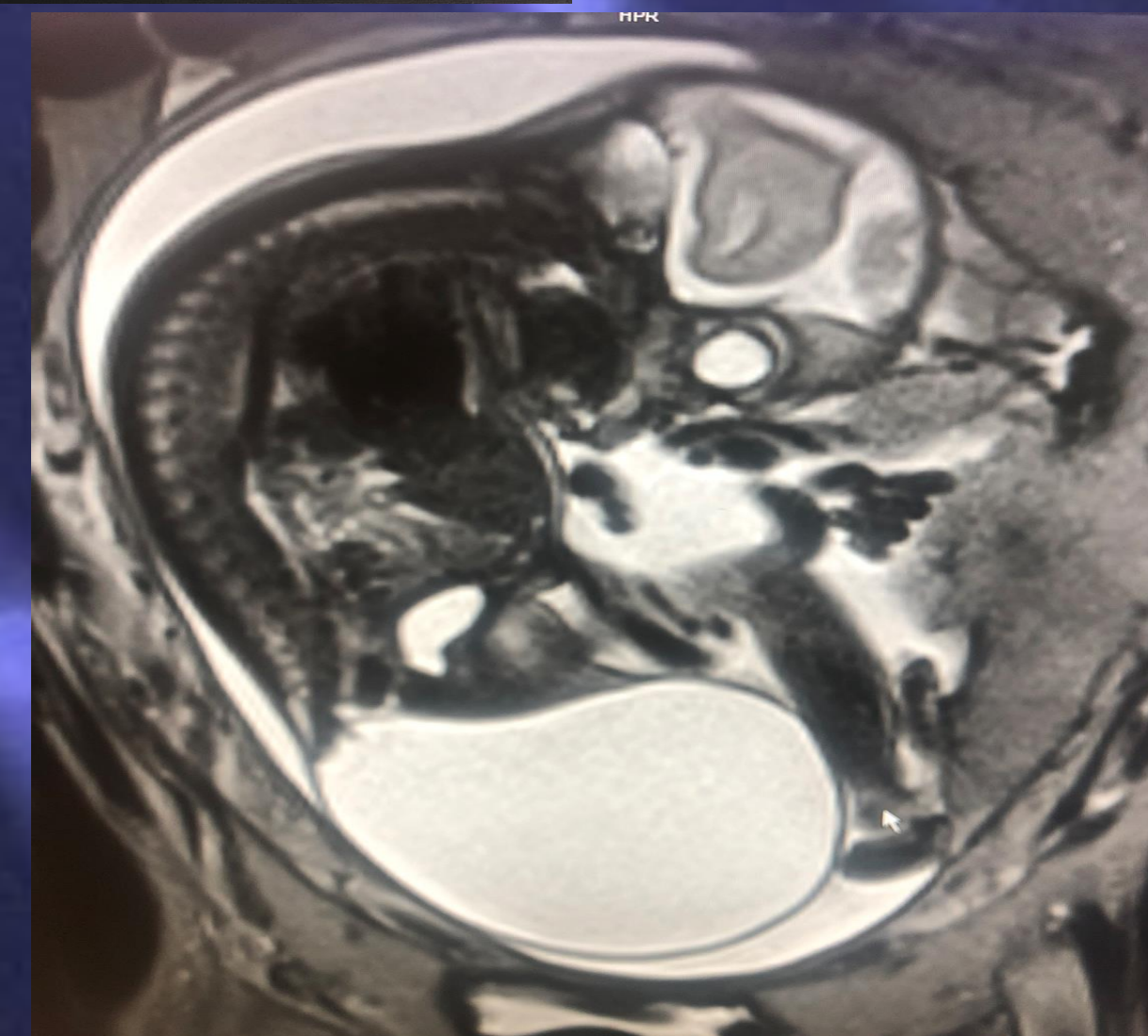
Diagnostic Procedures

- Ultrasound
 - Allows for frequent monitoring of fetal well-being and observation of tumor size and content
 - Can be done at any time in pregnancy
- MRI
 - Gives better insight into tumor make-up, vasculature, and connections
- Multimodality imaging is vital in creating a care plan for both mother and fetus



- Mass at 21 weeks

- Mass as seen on MRI



- Mass at 36 weeks

- Mass immediately following delivery



Pathogenesis and Effects

- Most common congenital anomaly in fetuses
 - 1 in 35,000
- Arise from multiple germ cell layers
 - Endoderm, mesoderm, ectoderm
 - Can contain teeth, hair, and bone
- Causation unknown
 - May be caused by abnormal migration of germ cells in the early embryonic period
- Large blood supply of tumor may take necessary nutrition and oxygen away from fetus causing heart issues, placental issues, irreversible neurological effects, or failure to thrive post birth
- Known to cause IUGR due to large nature of tumor
- Small malignant potential

Treatment options

- C-section indicated once Sacroccocygeal tumor reaches 5 cm in diameter
- Surgical intervention is the only therapy needed for benign tumors
 - It is recommended that surgery be done a few days after birth so the the neonate has more strength
- Chemotherapy and more radical surgeries indicated if malignant

References

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