

GIANT ABDOMINAL CYSTIC LYMPHANGIOMA IN A 10-MONTH-OLD MALE INFANT WITH ACUTE ABDOMINAL PAIN: A CASE REPORT.

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Introduction: Lymphangiomas are infrequent benign masses of lymphatic descent diagnosed in the first years of life. They are rarely found in the abdominal region while the presentation and complications depend on their location and extend.

Purpose: To present a case of a giant abdominal cystic lymphangioma and the difficulties in surgical management

Method: A 10-month-old male with no previous medical history, admitted in our department due to acute diffuse abdominal pain and distention. Suspicion of cystic lymphangioma raised based on abdominal ultrasound that pointed out a multilocular, non-measurable mass with both cystic and solid components. MDCT was performed in order to obtain more information regarding the size and extend of the tumor. MRI was suggested as additional imaging for the adequate surgical resection of the tumor. Tumor marker of a-fetoprotein further supported the suspicion of neoplastic origin of the tumor.

Results: Explorative laparotomy was performed, so the mass was identified and completely excised. The histopathology examination confirmed the initial suspicion. The patient fully recovered and the follow-up did not display any pathologic findings.

Conclusions: Giant abdominal lymphangiomas on infants are extremely rare findings; giving close and thoughtful attention for signs of complications is vital. Surgical intervention and complete resection is the optimal management and should be performed as soon as possible. Follow-up is essential in such cases while the prognosis is very good.