

## Giant maxillofacial teratoma in a newborn

Giant teratoma

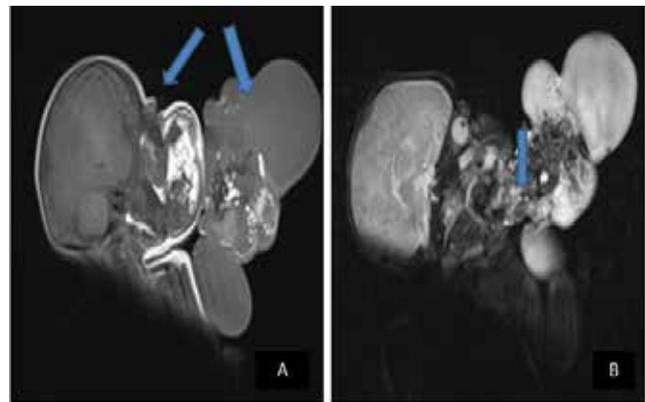
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A male patient who was born at term from a mother aged thirty-three years was admitted to the neonatal intensive care unit due to maxillofacial mass. On the physical examination of the patient, there was a mass with cystic and solid components that originated from the left maxillary region and extended out of the oral cavity, containing mucosal areas of approximately 15x10 cm size, and different tissues such as teeth, hair, and lips (Figure 1). The patient was consulted with the ear, nose and throat department. They suggested contrasted facial magnetic resonance imaging and it was interpreted as a facial teratoma in which calcified areas were observed, with a 14x6x6.5 cm sized soft and hard palate-related oral cavity and left nasal cavity (Figure 2). The patient was operated on the 4th day of hospitalization. Histopathologic analysis was interpreted, irregular, multinodular, multicystic tissue pieces measuring 18x12x5.5 centimeter and microscopic analysis was interpreted as mature teratomas with adrenal glandular structures, neuroglial elements, choroid plexus occurrences, fat and musculature tissues, as well as cystic structures with multilayered flat epithelium containing keratin. The patient did not have any complication and orogastric feeding was started on the second day after the operation; the patient was discharged on the twentieth day of the hospitalization to be followed by the pediatric oncology department.

Teratomas consist of different tissues originating from ectoderm, mesoderm and endoderm and these tissues are matured at various grades. Teratomas occur in approximately 1 in 4000 live births [1]. Ten percent of teratomas are found in the head and neck area [2]. Oropharyngeal masses can cause respiratory and nutritional problems in newborns. In this case, a rare giant maxillofacial surgical teratoma was presented and a rapid surgical approach has affected the prognosis positively.



Figure 1. Physical examination of the patient



A: Facial teratoma with a 14x6x6.5 cm sized soft and hard palate-related oral cavity and left nasal cavity  
B: Fat-suppressed plan and calcification areas in mass lesion

Figure 2. Facial magnetic resonance imaging

### References

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