

# Fetal sacrococcygeal teratoma: A case series

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## ABSTRACT

**Introduction:** Sacrococcygeal teratoma (SCT) is the commonest congenital neonatal tumour, arising from embryologically multipotent cells within Hensen node, from the coccyx. SCT can be benign or malignant. The incident is rare, approximately 1:35,000-40,000 live births, and predominantly affects female. The dangers of SCT are tumour rupture and haemorrhage. **Case Description:** We report two cases of fetal SCT which were managed in our centre from antenatal till postpartum. Both cases were diagnosed during the third trimester in which both have similar sonographic finding of tumour and polyhydramnion. One case had fetal renal pyelectasis and one case had maternal gestational diabetes mellitus. Both SCTs were Type I surgical classification, cystic-solid tumour. No fetal hydrops was noted during antenatal review. Both patients developed spontaneous preterm labour at 28 weeks and 32 weeks and an attempt at tocolysis failed, leading to emergency caesarean sections. The two female babies succumbed within 6 hours of life due to severe exsanguination from tumour bleed. **Conclusion:** It is not uncommon for SCT to be diagnosed in late trimester due to variations in tumour size and no identifiable maternal risk factor. It remains a challenge in managing the intermediate risk of SCT as there is need to deal with prematurity and potential tumour complication. Morphology of SCT is an important prognostic factor. Multidisciplinary management of SCT and planned delivery is important to improve perinatal outcome.

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# The effect of deferring maternal companion in HSNZ labour room as input for policy making during the COVID-19 pandemic

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## ABSTRACT

**Introduction:** Maternal companion in labour has demonstrated the beneficial effect towards delivery outcome. In this study, we would like to determine the impact of deferring maternal companion during the Covid-19 pandemic towards the delivery outcome. **Objective:** To compare the labour outcomes in women with maternal companion and without maternal companion in the labour room HSNZ. **Methods:** In a retrospective cross-sectional study, data were collected from the delivery records in HSNZ labour room from January 2019 till May 2019, including during the Covid-19 pandemic. Data were assessed by SPSS analysis. The main outcomes of this study including the length of labour, mode of delivery, dose and duration of pitocin, mode of analgesia/anaesthesia, perineal laceration, Apgar scores as well as the admission to SCN/NICU. **Results:** A total of 1,222 women in labour was included in this study, of which, 712 women with maternal companion and 510 women without maternal companion. Significantly lesser baby were admitted to SCN/NICU and lesser perineal tear. However, the differences did not reach statistical significance in length of labour, mode of delivery, pitocin usage, mode of analgesia/anaesthesia as well as the Apgar score. **Conclusion:** The significance of delivery outcome is not influenced by maternal companionship. However, this could be due to the failure of practicing maternal companionship in labour as less exposure to couple during antenatal.

**Keywords:** maternal companionship, maternal outcomes, delivery outcome