## Retroperitoneal teratomas in infancy and childhood

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摘要

## **Abstract**

Retroperitoneal teratoma poses a significant problem in the differential diagnosis of Wilms' tumor, neuroblastoma, and other intraabdominal tumors. In an attempt to establish the best diagnostic and treatment modality, we reviewed our experience with retroperitoneal teratomas at a single institution in a 5-year period. Between January 1998 and December 2002, retroperitoneal teratomas were identified in 10 patients, seven females and three males, ranging from age 4 days to 12 years, with seven patients under the age of 1 year. The presence of calcifications or bony structure within the tumor was revealed on abdominal ultrasound study or computed tomography in nine of the 10 lesions. Total excision was performed in nine patients; another patient with grade III immature teratoma received postoperative chemotherapy besides excision. One patient with grade III immature teratoma who did not receive postoperative chemotherapy had a local recurrence 6 months later and was treated by repeated surgical excision and postoperative chemotherapy. All of these patients were free of disease at 8 months to 5 years of follow-up. Retroperitoneal teratomas were usually noted in patients under the age of 1 year. Though large, they are mostly benign lesions with no apparent connection to the retroperitoneal organs and are amenable to curative excision, but histologic evidence of grade III immature teratoma or malignancy demands aggressive postoperative chemotherapy to prevent local recurrence.