

## VAGINAL CYST IN THE NEWBORN

### (A Case Report)

by

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If the newborns are not properly evaluated, congenital malformations in them frequently remain unnoticed. At times, these are of minor nature. In some of the cases the malformations do not produce symptoms during the neonatal period and hence they are missed and detected at a later age. Because of the effect of maternal hormones, the external genitals of a female newborn may have oedema and mucoïd, or at times blood-stained discharge. If a thorough examination is not made the abnormality, especially the asymptomatic one, is likely to be missed. Vaginal cyst is one such example.

Vaginal cyst is a cyst arising from the remnants of the Wolffian (Gartner's) duct. It is one of the rarer congenital abnormalities observed in neonates.

#### Case Report

Baby S. was born in this hospital on 28-8-70. It was the first full term normal delivery. The baby weighed 2.5 Kgm. at birth, was mature and had normal neonatal reflexes. She had a cystic swelling 1 cm. x 1 cm. arising from the left vaginal wall. (Fig. 1). The baby had no urinary or any other complications. A diagnosis of vaginal cyst was made.

Excision of the cyst with histopathological study was not possible as the parents were unwilling for any surgery. The child

was followed regularly in the out patients department for the next 3 months. During this period the child was asymptomatic and there was no change in the size and appearance of the cyst.

#### Discussion

The Wolffian (Gartner's) duct descends on each side from the broad ligament of the uterus into the vaginal wall. A cyst may arise from the remnants of this duct. This is usually found in the lateral wall of the vagina. The cyst which may be present at birth, projects in the vaginal cavity and may simulate hydrocolpos or a hymenal polyp (Richam & Johnston, 1969).

Histologically the cyst is composed of a thin fibrous wall, lined by columnar epithelium but occasionally by stratified squamous epithelium (Stowends, 1966).

Because of the influence of maternal oestrogen, the hymen at birth and for the first few days of life is thick and oedematous and protrudes from the vulva. At times the posterior position forms a spherical or elongated polyp. Borglin and Selander (1962) found hymenal polyps in 6% of 1000 female babies. The polyp may simulate a cyst, but careful examination and subsequent disappearance without any treatment confirms the diagnosis of a hymenal polyp. In our case the cystic swelling was unchanged even on a follow up for 3 months.

Hydrocolpos is another condition to be

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considered in the differential diagnosis as in 50% cases of hydrocolpos in the newborn, a cystic mass is seen at the vulva. This can be confirmed by palpating a mass in the lower abdomen and by a rectal examination. Roentgen studies of urinary bladder also help in diagnosing hydrocolpos (Dooley, 1962).

In the present case, the cyst was small and did not cause any obstruction to the flow of urine to necessitate any immediate excision which is indicated when the cyst causes compression of the urethra.

#### *Summary*

A case of vaginal cyst is presented together with a brief review of literature.

#### *Acknowledgement*

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*See Fig. on Art Paper VI*