

SIMPLE INEXPENSIVE TREATMENT OF UMBILICAL GRANULOMA

V. VIKRAMKUMAR • K. RAMA DEVI

SUMMARY

A simple and inexpensive method of treating umbilical granuloma is described, 22 cases of umbilical granulomas and 25 cases of moist umbilicus are treated with common salt application for 5-10 days. Excellent response was obtained in all cases and no side effects and recurrences were noted.

The umbilical stump separates and falls down by 7 to 10 days after birth. Within the next few days the raw surface is covered by scar tissue and a thin layer of skin. Occasionally this healing is delayed and the raw area is invaded by pathogenic organisms, which results in proliferation of granulation tissue over the raw surface. This red or dull red vascular granulation tissue may enlarge in size and result in typical umbilical granuloma. If left untreated, this may become a source of infection.

Various methods of treatment are described in the literature. We have tried a simple and inexpensive method and found the results to be very encouraging. 22 babies with umbilical granulomas and another 25 babies with moist umbilicus even after 2 weeks of age, were included in the study. Out of the 22 babies with

umbilical granulomas, 14 babies had chemical cauterisation with silver nitrate/copper sulfate and one child even had surgical excision and cryosurgery. Other 8 babies and all the 25 babies with moist umbilicus is cleaned with spirit, dried and the common salt powder was applied to raw area over the umbilicus twice a day for 5-10 days. In all cases, the response was excellent. A change was noted on day 3rd and by day 7th, umbilicus became dry and healing was complete before 10 days in all the cases.

Discussion

There are a number of methods of treatment of umbilical granuloma. They are:

- (1) Chemical cauterisation with silver nitrate or copper sulfate; The application may not cover the entire area and recurrences are quite common.

- (2) Ligature treatment (Syngal 1982). Trying up of granuloma at the bottom with a ligature results in healing in 5-7 days. But this method has certain limitations. It requires a trained person and sometimes it becomes difficult to ligate the granuloma, when it is deep seated or broad based.
- (3) Surgical excision. Simple removal of the granuloma by surgical excision. This requires a qualified person and recurrences are described even after surgical excision.
- (4) Cryosurgery : Cryotherapy is described by Seth (1977, 1981.) But

this is expensive and not available every where.

The common salt application described by N. Kesaree et al (1983) is very simple, inexpensive and no trained personal is required. We have not observed any complications or recurrences in our cases.

References

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