Patent Urachus in a Neonate: a Rarity

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Abstract Here, we present a pictorial description of a rare case of patent urachus in a neonate and its management.

Keywords Patent urachus • Neonate

A 1-day-old female child presented with 2×2 cm smooth, fluid-filled, translucent-walled, nondischarging mass arising from the umbilicus (Fig. 1). When the patient cried, straw-colored fluid leaked intermittently from an orifice in the lesion. Abdominal wall and external genitalia were normal. No other congenital anomaly was noted.

On investigation, the mass was found to extend into the pelvis. Upon opening the wall and excising the sac, an

Fig. 1 Covered patent urachus

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Fig. 2 The patent urachus

orifice with surrounding mucosa was detected. This opening was found to be connected by a wide and short-length tubular structure contiguous with the urinary bladder (Fig. 2). Surgical exploration confirmed that the tract was a developmental abnormality known as patent urachus

Fig. 3 The operative view of patent urachus

(Fig. 3). No other anomaly was seen in the abdomen on exploration.

The tubular structure was excised close to it entering the bladder, and bladder was closed in two layers, as mentioned in literature [1]. Rectus sheath was closed and neo-umbilicus formation was done.

The patient was discharged on day 7 and is doing well at present on 6 months follow-up. She continues

to be screened for the development of vesicoureteral reflux.

References

1. Tsai MS, Yeh ML (2011) Images in clinical medicine. Patent urachus. *N Engl J Med* 365(14):1328