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Omphalocele: complications an their effects on childhood morbidity

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ABSTRACT: *Background*: Omphalocele is one of the most common abdominal wall defects, characterized as a midline defect not covered by skin, fascia and abdominal muscles. Unlike gastroschisis, its main differential diagnosis, omphalocele is lined with a membranous sac and is more commonly associated with congenital malformations. Because of this, post-birth care is essential to ensure a better prognosis for the child, making a study on omphalocele and its associated conditions essential for a standardization of treatments and care for children with this condition, in order to reduce the associated morbidity and mortality. *Materials and methods*: Retrospective study of 20 years of care and treatment of newborns with omphalocele at a referral center. *Results*: 73 medical records were studied. In 53.42% of cases there were complications during childbirth. Of the 73 children, 53 had preoperative complications. 52 were operated, and 21 were not operated due to death (71.43%) or expectant management (28.57%). Among the operated children, 71.15% had postoperative complications and 28.84% required surgical re-approach. Of the total number of medical records analyzed, the death rate was 24.65%, with 72.22% of the deaths occurring before surgical correction. *Conclusions*: Patients with omphalocele with low birth weight and lower gestational age at birth had a higher frequency of unfavorable outcomes such as surgical complications, postoperative complications, reoperation and death. In this context is important to relate that unifying and directing conducts in the care of omphalocele reduce the morbidity and mortality of children.

Keywords: Omphalocele; Birth weight; Gestational age; Associated malformations; Deaths.