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Anorectal Anomaly (Low) with Imperforate Hymen in a Newborn

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Simple imperforate hymen and other such anomalies present usually around menarche(1). Imperforate hymen present-

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ing in neonatal period is quite unusual, moreover its association with imperforate anus is quite rare(2-5).

Case Report

A one-day-female baby presented with inability to pass meconium and a balloon shaped mass in vulval area (*Fig.*). The child was born after a full term normal delivery. General physical and systemic examination was within normal limits. Local examination showed absence of anal orifice at normal site and a spherical pale pink mass 6 cm in diameter protruding out from the vestibule, which was compressible. However, no meconium could be seen coming out of the lower end of vestibule inspite of presence of anovestibular fistula.

The spherical mass protruding out of the vestibule was nothing but ballooned out imperforate hymen which was incised in a cruciate manner when about 20 ml of opalescent fluid came out.

Simultaneously, anal cut back operation was done for anovestibular fistula.



Fig. Clinical photograph of the patient showing ballooning out of imperforate hymen through vestibule and absence of normal anal orifice.

Now the patient is waiting for anal transposition.

Discussion

Vaginal obstruction due to imperforate hymen with resultant hematocolpos is mentioned in writings of Hippocrates and Celsus but hydrometrocolpos, a comparable condition was not reported prior to 1956(6).

Imperforate hymen presenting as spherical mass protruding out of introitus in neonatal period is quite unusual. Association of hydrometrocolpos with anorectal malformation is also quite unusual(2-5).

Prenatal effects of maternal hormones causing excessive secretion of uterine and cervical glands is an additional necessary factor for development of hydrometrocolpos(3,7). The hydrometrocolpos may be associated sometimes with anorectal malformation(2-5) as in our case.

Clinically the lesion presents with either (i) Anterior pressure with urethral obstruction or (ii) Posterior pressure with rectal obstruction or (iii) upward pressure and intestinal displacement and sometimes respiratory embarrassment(8,9).

Our case was unique as it presented with failure to pass meconium possibly due to pressure effects. However, there were no back pressure effects on urinary tract due to outward and downward ballooning of imperforate hymen, which has not yet been reported.

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Adrenoleukodystrophy

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Adrenoleukodystrophy is a sex linked autosomal recessive disorder in which progressive CNS degeneration as accompa-

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