

# Facial Teratoma

*Patient Information Series – What you should know, what you should ask.*

## **What is a facial teratoma?**

A facial teratoma is a rare tumour that is formed in your baby's face. It is a benign malformation that can be diagnosed in the prenatal life by an ultrasound study. Most teratomas that develop can usually be found in other parts of the body of the babies, so the location of the teratoma in the face is very rare, occurring in only about 1.6% of all teratomas in babies.

## **How does a Facial Teratoma happen?**

It is not clear why a facial teratoma occurs but in most cases. Most theories believe they occur due to a disorganised growth of the cells during the embryonic life.

## **What are the things to watch for during the pregnancy?**

Babies with facial teratomas are at risk of some problems especially around the delivery time. Very small facial teratomas can be present without causing significant problems for the baby.

If the tumour is substantial in size it may cause problems with feeding or with breathing in the newborn. The ultrasound will help identify whether the tumour is compromising other structures in the babies' head or mouth and can assist your doctor in establishing an appropriated delivery plan.

Many women will also accumulate extra amniotic fluid around the baby due to impairment of fetal swallowing. This condition is called polyhydramnios. It can stretch the uterus too much and cause early labour well before the due date.

## **Could my baby have another associated malformation?**

This is unlikely. The associated malformations in the babies that have a teratoma are rare.

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## **If I have another baby, is it going to have a facial teratoma too?**

No. The probability of having another baby with this tumour is very low. There is no evidence that shows this tumor has genetic predisposition.

## **What does it mean for my baby after it is born?**

Sometimes, the babies that have a diagnosis of facial teratoma may need a special delivery plan. A specific procedure, called an EXIT procedure may be required to protect the baby's airway if the mass is thought to be compromising the correct breathing of the baby. A Maternal Fetal Medicine specialist can provide a thorough examination of your baby with ultrasound, follow the progress of the mass and assess the need for this special procedure at delivery.

After birth, the baby will often require a surgical procedure to remove the facial tumour. Based on its size and the involvement of surrounding structures, this intervention may require a very complex care in a specialised hospital for weeks after birth.

## **Will it happen again?**

If the surgical procedure is successful, and the tumour has benign elements without extension into surrounding structures it usually will not grow back again on the face of your baby.

### **What other questions should I ask?**

- Where should I deliver?
- How is the procedure to secure the breathing of my baby performed during delivery?
- Where will the baby receive the best care after it is born?
- Can I meet the team of doctors that will be assisting my baby when it is born in advance?

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