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Abdominal wall defects in newborns: A pediatric surgeon's view point on post-partum care

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Abdominal wall defects in newborns have an incidence of approximately 1:2000 live births and are considered to be the result out of a failure in the embryonic development sequence when the physiological umbilical cord herniation of the viscera fails to return back into the abdominal cavity before the 11th week of gestational age. The most common types are "gastroschisis" and "omphalocele". In Germany, these babies are usually delivered in a Level I Perinatal Centre and treated right from the beginning by an interdisciplinary team of obstetricians, neonatologist, NICU nurses, pediatric anesthetists and pediatric surgeons. Soon after stabilization

of the newborn, usually surgical closure of the defect follows. For this closure several different techniques do exist in our neonatal surgical textbooks. In this communication an overview about these surgical techniques is given based on a lecture series held in our institution for all staff members involved. In a short appendix a novel technique with its advantages und disadvantages is discussed and shared with the audience.

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