

Spontaneous Umbilical Cord Hematoma: A Case Report

Nadji Boughaba*

Paediatric Surgery, Constantine, Algeria

***Corresponding Author:** Nadji Boughaba, Paediatric Surgery, Constantine, Algeria.

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Abstract

Spontaneous umbilical cord hematoma is an uncommon complication during delivery.

It is responsible for severe fetal distress or death.

We report a boy infant born at 37 weeks gestation with a birth weight of 2,9 kg, was transferred to our neonatal unit with particular spontaneous umbilical cord hematoma.

Keywords: *Newborn; Umbilical Cord; Hematoma*

Introduction and Case Report

A boy infant born at 37 weeks gestation with the Wight birth of 2,9 kg was transferred to our neonatal unit for umbilical swelling.

He was born by vaginal delivery following an uneventful pregnancy with normal ante natal radiology and serology.

There is no history of any invasive fetal procedure, fetal distress or trauma during pregnancy or family coagulopathy's history.

He was born in good condition with Apgar scores of 8 and 9 at 1 and 5 minutes respectively.

A 5 cm long and 2 cm wide reddish purple, no tender swelling was noted in the cord proximal to the level of skin (Figure 1) Like small Omphalocele. Physical examination of the baby is normal.



Figure 1

Ultrasound of the swelling was obtained that confirmed that swelling was hematoma; otherwise, there are no intra-abdominal malformations or bleeding.

Hematology consultation was done and advised coagulation profile (Count Blood Cell – Partial Thromboplastin Time - Prothrombin Time - Factor VII and IX) which are normal.

The patient was admitted in our neonatal unit with intravenous liquid and antibiotics. Umbilical hematoma was protected by sterile gauze.

The baby was doing well, tolerated oral breast milk, and passing stool normally.

The umbilical cord hematoma was spontaneously left fall off with the umbilical cord.

The baby was discharged home with follow up in outpatient.

Discussion

Spontaneous umbilical hematomas are a rare and particular knowledge complication of pregnancy.

The incidence is estimated between 1 case in 5500 and 11 000 deliveries. An approximated perinatal loss rate of 50% [1,2]. They are usually looking as a reddish purple swelling of variable size, sometimes confused with omphalocele at the fetal end of the cord.

The reason for the bleeding in spontaneous umbilical hematoma is uncertain.

The rupture of umbilical veins is probably the cause of spontaneous bleeding in the umbilical cord is from, which in most cases leads to extravasation of blood into the Wharton jelly [1].

We can describe some risk factors for spontaneous hematoma of the umbilical cord include shortness or cord traction, post-maturity or infection [3,4]. Why we prescribed antibiotics to our patient.

Utero instrumentations such as amniocentesis, fetal transfusion, and fetal diagnostic procedures can be also the cause umbilical cord hematoma [6-8]. Even some alteration and inflammation of the vessel wall has been suggested as a potential cause [5].

Hemodynamic consequences of umbilical cord hematoma on the newborn can be disastrous. Fetal hypoxia and anemia may occur due to the compression of the umbilical vessels leading to perinatal asphyxia and stillbirth. Abnormal fetal heart monitor tracing within utero umbilical hematomas has been described [2]. Umbilical cord hematoma can result in fetal demise in almost one-half the cases, reinforcing the importance of placental and cord examinations in cases of unexplained fetal hypoxia and stillbirth.

Doppler ultrasound scan can help to have an antenatal diagnostic and assessing the cord and the blood flow in the umbilical vessels. Our patient had antenatal Ultrasound it was without anomalies.

Neither specialized care after birth for Umbilical cord hematoma is needed and can be left to fall off with the umbilical cord with just local sterile dressing.

Conclusion

Spontaneous umbilical cord hematoma is an uncommon complication during delivery and can be taken for an Omphalocele. Physical examination and Ultrasound of cord able to make the distinction. Coagulation profile should be investigated.

Umbilical cord hematoma usually can be left to fall off with the umbilical cord with just sterile dressing and no need any specialized care after birth.

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