Facial Mass Impeding the Visual Axis: A Case Report about a Congenital Frontonasal Meningoencephalocele
Théra JP1*, Dakouo P1, Konipo A1, Tiamu JML1, Tinley C2

1Institute of African Tropical Ophthalmology, Bamako Mali
2Pediatric Ophthalmologist, Consultant CCBRT Hospital, Dar Es Salam Tanzania

Abstract
Meningocele is a hernial protrusion of part of meninges and neural elements in a sac. It is a rare medical condition particularly the facial form. A full-term female baby was brought to our office for congenital facial mass. The mass was diagnosed as a frontonasal meningoencephalocele.

Keywords: Facial mass, visual axis, meningoencephalocele.

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INTRODUCTION
Congenital midline facial masses are rare malformations, occurring with an incidence of one case in 20 to 40,000 births [1]. We report a case of frontonasal meningoencephalocele in a three-day-old infant.

CASE REPORT
It was a newborn female weighing 3,200 g, in whom we found a soft frontonasal mass measuring 60 mm long slightly compressing the left eye (fig 1). The child proceeded from a normal delivery where two prenatal consultations were done. The 27-year-old primiparous mother with no specific history did not undergo ultrasound exam during her pregnancy. The ophthalmic examination found a slight obstruction of the left palpebral slant. He was cyanotic and was resuscitated at birth. Orbito-cerebral computed tomography (CT) confirmed a frontal meningoencephalocele (fig 2).

DISCUSSION
The meningoencephaloceles are congenital anomalies characterized by a hernia of the meninges and the cerebral parenchyma out of the cranial box through a bone defect [1, 2].

Njamnshi et al. [3] reported in Cameroon, an incidence of 2 cases per 1000 births against 0.95 per 1000 births found by Ugwu RO et al. [4] in Nigeria. They are occipital in 75% of the cases and involve the midline in 90% of the cases [1].

Etiologically, the real cause of these anomalies is not known with certainty. Environmental teratogens, hyperthermia during pregnancy, low economic status, and nutritional status are suspected [5, 6].
In 60% [7] there is an association of chromosomal abnormalities or craniofacial malformations. Mbassi et al. reported an association with hydrocephalus [8]. In our case no other malformation was associated.

CONCLUSION
Rare congenital pathologies, meningoencephaloceles should be suspected in any case of congenital nasal mass of the midline. Brain imaging is critical to confirming the diagnosis.

REFERENCES