

Abstract COMUNICAZIONI LIBERE**□ Infantile myofibromatosis of the skull base: two cases report**G. TRESSERRAS GINÉ^{*◇}, G. MIRONE*, U. FERRARA*, G. CINALLI*^{*} *Pediatric Neurosurgery, “Santobono-Pausilipon” Children’s Hospital, Naples, Italy*[◇] *Pediatric Neurosurgery, Hospital General de Catalunya, Sant Cugat (Barcelona,) Spain*

INTRODUCTION. Infantile myofibromatosis is the most common fibrous tumor of infancy and early childhood, showing aggressive behaviour in some cases. There are two types of presentation: solitary or multicentric lesions involving skin, subcutaneous tissue, muscle, bone and viscera.

DISCUSSION. We present two cases of infantile myofibromatosis of the skull base. One of them is located at anterior fossa extending along the ethmoid bone; the second one was located in posterior fossa, extending up to supratentorial compartment. Surgical therapy is recommended in cases of mass effect or progressive increasing size. Partial removal of the occipital mass was achieved, whereas the

remaining lesion gradually reduced in size at follow-up. On the other side, complete tumor removal was obtained in ethmoidal mass, with no recurrences.

CONCLUSION. Infantile myofibromatosis is a fibrous mesenchymal tumor. Intracranial involvement is rare and only have been published four cases of skull base. The prognosis is generally good if the tumor does not involve visceral organs and complete spontaneous regression could be seen. First choice of management is biopsy and close observation. When the tumor grows and shows signs of mass effect the resection should be considered. No consistent results of chemotherapy have been published

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