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Congenital and infantile tumors: pathology and outcome in Europe and Asia – A 15 year review

Guirish A. Solanki[1], Sandip Chaterjee[2]

[1] *Department of Paediatric Neurosurgery, Birmingham Children's Hospital, United Kingdom*

[2] *Park Clinic, Kolkata, India*

Introduction: Brain tumours in infancy are rare and treatment options limited, with role of surgery, radiotherapy, chemotherapy unclear. Outcome is uncertain Congenital Tumors represent **1.3 %** of pediatric CNS tumors but account for the majority of the mortality.

Method: A Retrospective review from 1998 – current of the Paediatric Brain Tumour Registry. At Birmingham Children's Hospital and the Paediatric neurosurgery database in Kolkata were performed. 72 children (34-BCH / 38-Kol) with a mean age of 5 (0-11) months were reviewed.

Results: No significant gender difference noted. Delay in recognition with paucity of clinical signs was a hallmark feature. 8 children had congenital tumours (symptoms within the first 2 months). Commonest presentation included raised ICP, irritability, failure to thrive. Tumours were large at detection (4-10 cms) and overwhelmingly suprasellar (89%). Teratomas (6/72) were more common in India(15% vs 0%). At 5 years the overall mortality was 58.8%. The overall 1 year survival was 47%. Stratification showed a significant difference with congenital tumour survival just 16.6% and in older infants 63.6%

Conclusion: Factors associated with mortality included malignant histology and large size of tumours. Teratomas seem more common in India. The outcome remains poor but this study highlights the need to differentiate between congenital and infant tumours where survival is comparatively better (16.6 vs 63.6%). More aggressive therapy in malignant tumours including surgical resection and adjuvant therapy may provide better survival.