

Clinical Image

Title: Sternal Cleft – A Rare Entity

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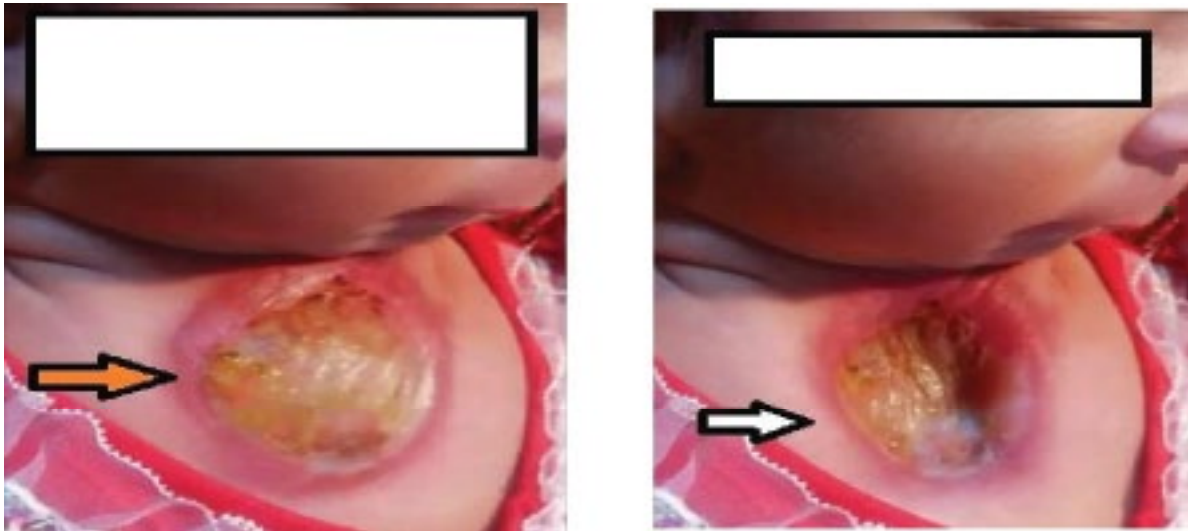


Figure 1: Bulging of cleft membrane when child crying.

Figure 2: Membrane sucked in while child inspiring.

Eight days old female child product of consanguineous marriage brought by parent with complain of an obvious deformity of the anterior chest wall with widely spaced rib ends anteriorly separated by thin translucent skin through which cardiac pulsations could be easily appreciated, this got prominent with cry of child (Figure 1), examination reveal sternal defect in upper part but mid and lower part was normal, this defect was covered with some parchment like membrane and cardiac pulsation can be seen through it (Figure 2). No other abnormalities were detected at physical examination, abdominal sonography, and cardiac sonography.

This case represents rare and least severe form of congenital sternal defects. Sternal defect tends occur more in female. Preferred and best treatment is the surgical closure of defect in the neonatal period after ruling out other common associated malformations, in particular cardiac defects. The result of surgical repair is satisfying functionally and cosmetically with low complication rates [1,2].

References

1. Klein T, Kellner M, Boemers TM, Mack-Dettefsen B (2015) Surgical Repair of a Superior Sternal Cleft in an Infant. *European J Pediatr Surg Rep* 3: 64-67.
2. Singh S, Lahoti BK, Garge S, Negi A, Jain V (2010) Sternal cleft repair: a report of two cases and review of literature. *Afr J Paediatr Surg* 7: 211-213.