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Gastric and esophageal perforation in preterm infants: Report of three cases

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Introduction: Gastric or esophageal perforation in the preterm newborn is a rare affection. The search for a cause is still involved before concluding the spontaneous or idiopathic nature.

Observations: We report 3 premature infants with respective gestational ages of 28, 30 and 31 weeks of amenorrhea, each derived from a twin pregnancy. They presented at birth neonatal respiratory distress treated with nasal continuous positive airway pressure. Between the second and the fourth days of life, they developed abdominal bloating. Thoraco-abdominal radiography showed pneumoperitoneum. In the first case, surgical exploration confirmed the presence of pus and perforation of the abdominal esophagus and stomach related to prenatal septic enterocolitis origin. In the second case, the surgical exploration confirmed gastric perforation in the antrum and the greater curvature. No cause was found and it was concluded as a spontaneous perforation. In the third case, 2 gastric perforations were found intraoperatively, with bilious effusion. Bacteriological samples and blood cultures were positive for Streptococcus B. Ventilatory and hemodynamic supports as well as appropriate antibiotic therapy after surgery were needed to save this child. The evolution was fatal for the first two newborns.

Conclusion: The prognosis of gastrointestinal perforation in neonates and particularly preterm infants is severe. Conventional risk factors are still not found. A support of multidisciplinary medical-surgical is essential.

Biography

Barbaria Wiem has completed her medical studies from faculty of Medicine of Tunis. She chose Pediatrics as specialty. She accomplished many trainings in different pediatric departments and neonatal center. She participated in national and international conferences as speaker. She has published papers in reputed journals.

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