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Review Article

Spontaneous depressed skull fracture during vaginal delivery: A report of two cases and literature review

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ABSTRACT

Objective: Spontaneous (without instrumentation) depressed skull fracture cases are rare in newborns and, in most cases, are caused by trauma during delivery. The diagnosis of a skull fracture can sometimes be difficult and the correct management of these fractures in newborns is still uncertain.

Case presentation: Two cases of spontaneous (without instrumentation) depressed skull fracture in newborns are reported and were related to birth trauma. Each case were managed differently according to its clinical presentation.

Conclusion: Spontaneous depressed skull fracture of the newborn presents as a challenge in neurosurgical management. Although widely accepted that conservative management is a treatment of choice, but few cases with intractable seizures are also indication for surgical intervention. Our case series is a good educational lesson that can also be used by pediatrician and obstetrician for better management and handling of birth head trauma.

1. Introduction

Delivery process will eventually apply pressure to the neonate’s head in utero or during birth event that may lead in a depression of parietal or frontal bone of the skull. Pressure of the fetal skull by the 5th lumbar vertebrae, sacral promontory, pubic symphysis, ischia spines or by an asymmetrical and contracted pelvis have been implicated in these depressions that occurred in the absence of forceps or traumatic delivery. 1, 2, 3

The etiology of these depressions is not fully revealed, while most cases in Western countries are caused by forceps application or as a result of pressure by the obstetricians hands; in African population most cases are results from extreme molding of the fetal skull in its passage through birth canal. 3 Even though, depressed skull fractures are rare in newborns, in most cases, they are caused by trauma during delivery. 4

Therefore, we wish to report two cases of newborn depressed skull fracture during normal spontaneous vaginal