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A Case of Fibrous Hamartoma in Term Neonate

Elizabeth Perry

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Case Report

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Describe role of Submitting/Presenting Trainee in this project (limit 150 words):
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Background, Objectives/Goal, Methods/Design, Results, Conclusions limited to 500 words

Case report abstract:
Fibrous hamartoma of infancy (FHI) is a rare, benign lesion characterized as a tumor of myofibroblastic origin that has characteristic features of triphasic histology. FHI was first described in 1956 by Reye and formally named by Enzinger in 1965 (1, 2). The lesion is defined as a hamartoma due to the histologic presentation of disorganized mesenchymal, fibrous, and adipose tissue with absence of mitotic figures; this combination of derived tissue without evidence of anaplasia is diagnostic for FHI. These lesions typically arise as a single, solitary mass, are most commonly located on the extremities, trunk, sacrum, or scrotum and are typically 0.5 to 9.0 centimeters in size (3, 4). Only roughly 200 cases have been reported in the literature (3). The majority of cases occur in young children; 91% of cases arise within the first year of life (4). Males are more often affected in a ratio of 2.4:1 (4). Roughly 20% of cases have been documented as congenital (3). Treatment is surgical excision, which is often curative; local recurrence is rare and incidence decreased by obtaining negative margins (8). We present a case of congenital FHI identified at birth.

Conclusion
FHI is a benign, soft tissue lesion presenting in early infancy and even the neonatal period that carries diagnostic histopathology and supportive MR imaging and immunostaining that can differentiate this tumor from other pediatric soft tissue masses. However, due to its rarity, it is important to recognize its characteristic diagnostic criteria and ensure its place on the differential diagnosis because it is largely benign and does not warrant aggressive therapy.