

TOPIC HIGHLIGHT

Hymenal Tags of the Newborn

Angela Di Candia¹, Valeria Silecchia¹, Enrico Valerio², Giuseppe Furcolo³, Silvia Palatron⁴, Mario Cutrone⁵, Ramon Grimalt⁶

1 Department of Woman and Child Health, University of Padova, Medical School;

2 Pediatric Intensive Care Unit, Ospedale San Bortolo, Vicenza, Italy;

3 Pediatrics, A.O.R.N. San Giuseppe Moscati, Avellino, Italy;

4 Neonatal Intensive Care Unit, Ospedale Pietro Cosma, Camposampiero (Padova), Italy;

5 Pediatric Dermatology Unit, Ospedale Dell'Angelo, Mestre (Venezia), Italy;

6 Universitat Internacional de Catalunya. Dermatology, Sant Cugat del Vallès. Barcelona, Spain.

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Correspondence to: Enrico Valerio, Pediatric Intensive Care Unit, Ospedale San Bortolo, Vicenza, Italy.

Email: enrico.valerio.md@gmail.com

Telephone: +39 0444 75 2887

Fax: +39 0444 75 2796

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ABSTRACT

Evaluation of female newborn genitalia should always be carried out at pre-discharge visit in hospital nurseries in order to exclude gross malformations, potentially compatible with genetic and/or endocrine syndromes. Being aware of normal inter-individual anatomical variability of external genitalia in female newborns - as well as ethnic-related peculiarities - is important to avoid unnecessary

tests, perform a correct evaluation, and reassure parents. This paper provides a small gallery of the most typical possible presentations of hymenal tags in female newborns, as encountered in our pediatric dermatology practice in the last five years. The aim of the paper is to highlight the benignity of this condition, most often autoresolutive in the first year of life, in order to prevent neonatologists and general practitioners from prescribing unnecessary tests and allow parental reassurance.

Key words: Hymenal tags; Neonatology; Dermatology

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Abbreviations

HTs: hymenal tags; HPV: human papillomavirus

BRIEF REPORT

Evaluation of female newborn genitalia should always be carried out at pre-discharge visit in hospital nurseries in order to exclude gross malformations, potentially compatible with genetic and/or endocrine syndromes.

Being aware of normal inter-individual anatomical variability of external genitalia in female newborns - as well as ethnic-related peculiarities - is important to avoid unnecessary tests, perform a correct evaluation, and reassure parents^[1].

At birth, hymen may appear annular (with a central or ventrally displaced orifice), septated, or cribriform; other normal hymenal features of the newborn include clefts, intravaginal or external ridges, tags, and periurethral bands^[1].

Among such normal variants, hymenal tags (HTs) deserve a special mention. HTs may present as sessile or pedunculated elements, protruding from the vaginal ostium for a variable length (as long as some centimeters); they may be pyramidal in shape (ie, progressively tapering from root to tip) or present as thin tubular structures with a bulging extremity; their spatial relationship with small labia also

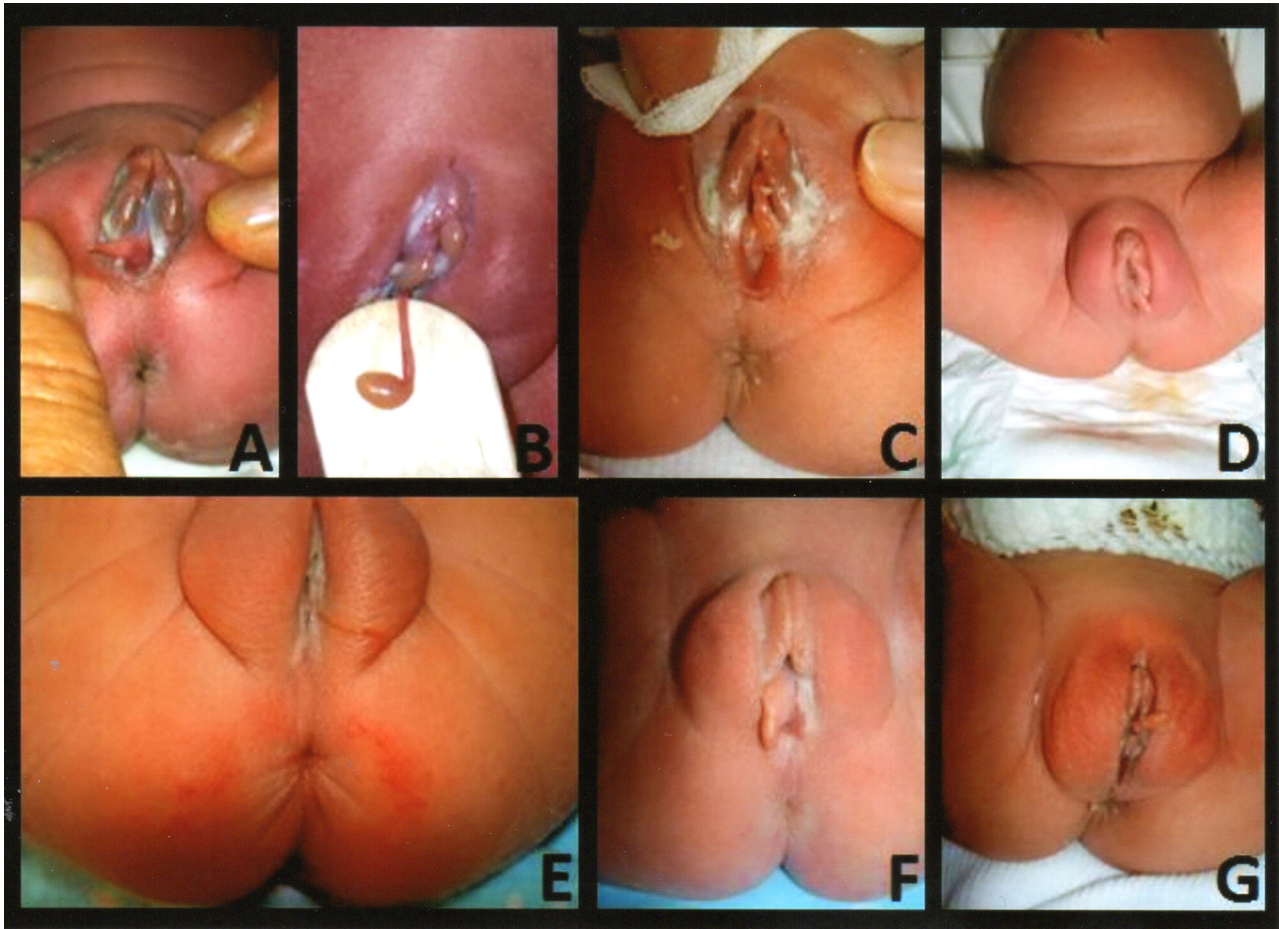


Figure 1, A-G. Some possible presentations of hymenal tags (HTs) at birth, as encountered in our pediatric dermatology practice in the last five years.

shows a certain grade of variability. Figure 1 resumes some of the aforementioned most typical presentations of HTs, as encountered in our pediatric dermatology practice in the last five years.

Differentials of HTs include human papillomavirus (HPV)-related mucosal proliferation^[2], malignancies, and abuse^[3].

HTs represent a normal feature of external genitalia in female newborns; in most cases, tags show spontaneous involution between birth and the first year of age, due to the physiological regression of hymenal tissue in this period^[4].

HTs require no specific treatment.

CONCLUSIONS AND FINAL REMARKS

HTs in all their variants represent a benign condition, most often autoresolutive in the first year of life. Neonatologists and general practitioners should be able to recognize it promptly and refrain from prescribing unnecessary tests, allowing parental reassurance.

Contributorship Statement

Angela Di Candia wrote the first draft of the manuscript; Valeria

Silecchia, Enrico Valerio, Giuseppe Furcolo, Silvia Palatron, Mario Cutrone, and Ramon Grimalt obtained the iconographic documentation and contributed to the critical revision of the manuscript.

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Figures

Figure 1, A-G. Some possible presentations of hymenal tags (HTs) at birth, as encountered in our pediatric dermatology practice in the last five years.

