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Background - Arachnoid cysts are lined by arachnoid membranes and filled with cerebrospinal fluid. They are thought to occur as a result of maldevelopment of the arachnoid membrane or secondary to trauma or infection.



Method - We report an 11 days old baby who presented with excessive crying, grunting and refusal of feeds over two days. He is first born child to healthy non-consanguineous parents following an uneventful pregnancy and birth with birth Occipital-frontal circumference(OFC) of 36cm. Parents have also noticed that his head was enlarging since birth.

Examination revealed an irritable neonate with bulging anterior fontanelle, separated sutures, OFC of 39cm and right sided partial ptosis. Within few hours since admission, he had progressive opisthotonus and a respiratory arrest. He underwent immediate surgery which included insertion of left sided Ventricular-Peritoneal shunt and right sided Cysto-Peritoneal shunt. He made a successful recovery and now developing normal.

Results - Non contrast CT brain on admission revealed an extensively large cyst arising from right middle cranial fossa compressing third ventricle resulting in gross hydrocephalus and midline shift.

Conclusion - Postnatally, many arachnoid cysts are asymptomatic and remain quiescent for years, although others expand and cause symptoms by compressing adjacent brain and/or expanding the overlying skull, rarely causing serious effects like cranial nerve involvement, bulbar symptoms and respiratory arrest.