Results There were 3 males and two females. Prenatal diagnosis was made in 4 cases. There were 4 full-term newborns and one near term of 36 weeks. Pleural effusion was on the right side in three cases, on the left side in one case and bilateral in one case. Four cases required mechanical ventilation. Somatostatin was indicated in one case. The treatment was successful in four cases. One case presented a dysmorphic syndrome was died by pneumothorax.

Conclusions The treatment of congenital chylothorax is based on conservative management. Somatostatin or its analog octreotide are considered as an adjunctive treatment of congenital chylothorax. However, the refractory cases are treated with chemical pleurodesis or surgical treatment. We propose an algorithm of the treatment of congenital chylothorax after review of the literature.

P644 MANAGEMENT OF CARDIAC RHABDOMYOMA IN NEONATES

1Abdellatif Gargouri, *1Rim Zaghdoud, 1Amel Ben Hamad, 1Chiraz Regaieg, 1Amira Bourouai, 1Ridha Regaieg, 1Nedia Hmida, 2Donia Abid, 3Samir Kammoun, 1Afef Ben Thabet, 1Abdelatif Gargouri, 1Department of Neonatology, Hedi Chaker University Hospital, Sfax, Tunisia; 2Department of Cardiology Hedi Chaker University Hospital, Sfax, Tunisia; 3Department of Cardiology Hedi Chaker University Hospital, Sfax, Tunisia

10.1136/archdischild-2019-epa.972

Introduction Cardiac tumors are rare in infant. Most commonly it’s a Rhabdomyoma with an incidence of 0.02% to 0.08%. These cardiac rhabdomyomas are usually multiple with a preferential location in the ventricular myocardium (up to 94%). We aim to evaluate the epidemiology, clinical features, management and outcome of this rare condition in neonates.

Methods It’s a retrospective study of all cases of cardiac rhabdomyomas registered in the neonatal intensive care unit of Sfax between 2009 and 2018.

Results Six full term newborns were included: one boy and five girls. Two of them were twins from a monochorial and monamniotic pregnancy. Prenatal diagnosis was performed in all cases. After birth, all newborns were asymptomatic. Physical exam revealed associated hemangiommas of the forearm in one case and hypomelanotic macules in 4 cases. Postnatal echocardiography confirmed the prenatal findings in all cases. Multiple lesions were noted in 4 cases. Ventricular location was found in all cases. Associated interventricular septum tumor was found in one case as well as a right atrium tumor in one other case. The mean tumor size was 16 *10 mm. No hemodynamic disorders were noted in all cases. The ophthalmologic and renal assessment was normal for all newborns. Brain MRI was performed in 4 cases. It revealed white matter anomalies and subependymal nodules confirming then the diagnosis of tuberous sclerosis in two patients. During follow up one of them developed focal seizures fully controlled by antiepileptic drugs. The evolution was favorable for all patients. All tumors regressed spontaneously within an average of three years.

Conclusion Cardiac rhabdomyomas are benign tumors which tend to spontaneously regress during early childhood. However they may lead to arrhythmias or hemodynamic disorders due to ventricular inflow/outflow tract obstruction. Thus, long term ultrasound follow up is needed. Moreover diagnosis of cardiac rhabdomyoma must lead clinician to look systematically for an associated tuberous sclerosis as it can be its earliest manifestation.

P642 NEONATAL GASTRIC Duplication CYST: A CASE REPORT

1Amel Ben Hamed, 1Manel Charfi, *1Hayet Zitouni, 1Chiraz Regaieg, 1Amira Bourouai, 1Ridha Regaieg, 1Nedia Hmida, 2Inna Mahri, 1Afef Ben Thabet, 1Abdelatif Gargouri, 1Department of Neonatology, Hedi Chaker Hospital, Sfax, Tunisia; 2Department of Pediatric Surgery, Hedi Chaker Hospital, Sfax, Tunisia

10.1136/archdischild-2019-epa.973

Background Gastrointestinal duplication(GID) cysts are rare congenital malformations. It occurs approximately in 1 out of 10,000 births. It can occur at any part of the alimentary tract. Gastric duplication cyst constitute 2 to 7% of all GID. They are usually cystic and located on the greater curvature,