2025/07/04 10:55 1/1 Neuroblastoma clinical features

Neuroblastoma clinical features

- 1. **Symptoms**: Symptoms may vary depending on the location of the tumor, but common signs in children can include:
 - 1. Abdominal pain or swelling (if the tumor is in the abdomen)
 - 2. A palpable mass or lump
 - 3. Bone pain or limping (if the cancer has spread to bones)
 - 4. Unexplained weight loss
 - 5. Irritability or lethargy
 - 6. High blood pressure (if the tumor is producing catecholamines)
 - 7. In some cases, **proptosis** (bulging eyes) or **blueberry muffin-like rash** (in cases of widespread metastasis)

May present with abdominal mass, local or radicular pain, or (with high thoracic or cervical tumors) Horner's syndrome Non-pulsatile exophthalmos. Spinal cord compression may occur from invasion through the neural foramen, and scoliosis may occur. Catecholamine precursors (homovanillic acid (HVA), vanillylmandelic acid (VMA) and dopamine) may be excreted and cause HTN (can be assayed in urine). Periorbital tumor metastases may produce raccoon's eyes (usually unilateral ecchymosis and proptosis). Many of the low-grade tumors regress spontaneously and never present.

Opsoclonus-myoclonus syndrome: in peds, usually indicates neuroblastoma.

The most common clinical presentation of abdominal NBL in children is a large flank mass; however, other rare presentations may include pelvic NBL, bilateral, pelviabdominal, and neonatal NBL, other manifestations may associate with the tumor mass-like metastatic lesions in bone or liver, pallor, abdominal pain, weight loss, and fever. NBL is a biologically active tumor secreting vanillylmandelic acid (VMA) and homovanillic acid, or other metabolites such as catecholamines, neuron-specific enolase (NSE), and vasoactive intestinal peptides in some cases ¹⁾.

Horner's syndrome 2nd order neuron (preganglionic)

Etiologies of dysfunction: lateral sympathectomies, significant chest trauma, apical pulmonary neoplasms (Pancoast tumor), high thoracic or cervical neuroblastoma.

1)

Park JR, Eggert A, Caron H. Neuroblastoma: Biology, prognosis, and treatment. Hematol Oncol Clin North Am 2010;24:65-86.

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