

## Accidental Puncture of Shunt Tube by Subcutaneous Suture

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Ventriculo-peritoneal shunt is one of the commonest procedures in neurosurgical practice [1] and almost all neurosurgeons struggle with shunt malfunctions and their complications [2]. Three month old male child underwent right ventriculo-peritoneal shunt at a peripheral hospital for congenital aqueductal stenosis. The child presented to our institute with the complaints of watery discharge from the operated site. There was no history of fever or trauma. The child was severely malnourished and dehydrated. Anterior fontanel was full but lax. Neurologically he was opening eye spontaneously, excessively crying and moving all four limbs. On local examination there was well healed linear operative scar along the line of cranial end of shunt tube, vicryl thread could be seen coming out through the skin and whenever the child was crying there was leakage of cerebrospinal fluid (CSF) from the suture site (Fig. 1). The wound was explored through the curvilinear incision well away from the shunt tube (Fig. 1). Hydrocephalus constitutes one of the major problems in neurosurgery and ventriculo-peritoneal shunt



**Fig 1: Left:** Clinical photograph showing linear incision (white arrow) and vicryl thread that could be seen through the skin (black arrow) **Right:** Whenever child was crying there was leakage of CSF from the thread site

is the primary treatment for most etiologies of hydrocephalus in the pediatric population[2,3].

Complications related to shunt use are commonly classified as infectious, mechanical or functional <sup>1</sup> and may present with unique symptoms and signs[3,4]. We all are taught during neurosurgical training that ventriculo-peritoneal shunt is never a small procedure and should be performed very carefully. When performed meticulously this kind of complication in present case is always avoidable. Also using curvilinear incision rather than linear incision in the scalp helps to keep away the shunt parts away from the suture line.

This is a case report on a child with autism and mental retardation. He injures himself when it is warm. This case is the first report of thermal stimuli as a possible reason for self injury behavior in children with autism.

## References

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