Tailgut Cyst
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History
9 month old female with sacral dimple.

Diagnosis
Tailgut Cyst (unconfirmed)

Discussion
The most caudal portion of the hindgut invaginates into the primitive tail and regresses by the eighth week of embryonic development-persistence may give rise to a tailgut cyst. Tailgut cyst may be found at any age and in both genders but is most commonly detected in middle-aged females being evaluated for abdominal pain or constipation. Tailgut cysts are susceptible to hemorrhage and infection but rarely, malignant transformation. Tailgut lesions may be unilocular or multilocular, lined with multiple, varying types of epithelium. Sonography shows a multilocular cystic mass. CT shows a well-marginated, presacral mass of fluid density, often displacing the rectum. On MRI, tailgut cyst usually displays low signal intensity on T1-weighted images and high signal intensity on T2-weighted images. Variations in mucin content and secondary hemorrhage or infection may alter its appearance. Differential diagnoses should include epidermoid cyst, dermoid cyst, rectal duplication cyst, anal gland cyst, cystic lymphangioma, and anterior meningocele. Histologic analysis is essential to establish a definitive diagnosis of tailgut cyst.

Findings
MR-Sagittal and axial T2 images from spine examination show a multilocular presacral cystic mass displacing the rectum and uterus anteriorly and to the right.

Reference
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