Fetal intra-abdominal umbilical vein varix Dilatação da veia umbilical fetal

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Abstract

Fetal umbilical intra-abdominal vein varix is a rare congenital malformation characterized by focal dilatation of the umbilical vein. It's clinical significance is unclear and is usually an isolated finding, in some cases it may be associated with other fetal anomalies, chromosomal defects or fetal death. The authors report a case of pregnant woman at 25 weeks of gestation with a fetus affected by dilatation of an intraabdominal portion of the umbilical vein, with a favorable progress and outcome.

Keywords: Antenatal ultrasound; Fetal anomalies; Umbilical vein varix.

Fetal umbilical intra-abdominal vein varix is a rare congenital malformation characterized by focal dilatation of the umbilical vein. The diagnosis is made by

ameter superior to the parameters established for a given gestational age. Although it's clinical significance is unclear and is usually an isolated finding, in some cases it may be associated with other fetal anomalies, chromosomal defects or fetal death. Most cases progress

favourably, however, thrombosis is a possible compli-

prenatal sonographic diagnosis of a umbilical vein di-

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FIGURE 1. Ultrasonographic image of the FIUVV at diagnostic (25w)

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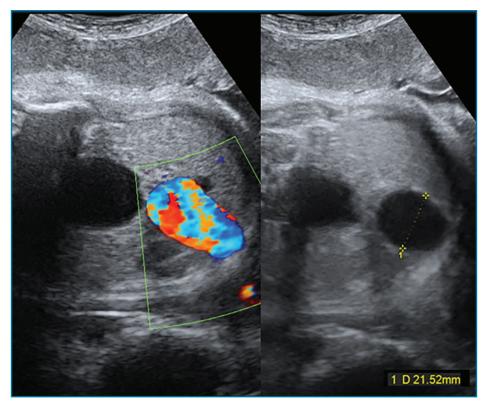


FIGURE 2. Ultrasonographic images of the FIUVV at 36w, with and without color Doppler

cation that can result in an adverse outcome. The authors report a case of pregnant woman at 25 weeks of gestation with a fetus affected by dilatation of an intraabdominal portion of the umbilical vein. The combined screening for fetal aneuploidy performed at 12 weeks of gestation reported a low risk, the morphological ultrasound showed a female fetus with a normal anatomical study. It was found an extrahepatic focal dilation of the intra-abdominal portion of the umbilical vein with 12 mm in diameter at 25 weeks (Figure 1), which reached a maximum diameter of 21 mm at 36 weeks (Figure 2). The serial controls showed evolution without impact on fetal hemodynamic status. Labor was induced at 38 weeks of gestation, giving birth, by instrumental delivery, a 3740g female baby. No abnormalities were evident in the physical examination. Abdominal ultrasound performed on the newborn were normal.

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