

DIFFERENTIAL DIAGNOSIS OF A CASE OF BILATERAL CYSTIC SWELLING OF NECK IN AN ABORTED FETUS

Maruti ram Annamraju *¹, Subhadra Devi Velichety ².

*¹ Assistant Professor of Anatomy, S.V.Medical College, Tirupati, Andhra Pradesh, India.

² Professor of Anatomy, Sri Venkateswara Institute of Medical Sciences, Tirupati, Andhra Pradesh, India.

ABSTRACT

Objective: To analyse the anatomical and radiological observations in a fetus with bilateral cystic swelling of neck.

Materials and Methods: A total of 30 aborted fetuses were studied for academic purpose ranging from age 12 weeks to 36 weeks. A male aborted fetus of 24 weeks with huge swelling in cervicothoracic region was investigated by radiological and ultrasonographic examination. A detailed foetal autopsy was conducted for associated anomalies.

Observation: A huge cystic swelling was observed in the posterior region of neck and upper thorax with mandibulo facial defect. About 1.2cm defect was noted in occipital bone with herniation of echogenic brain contents and hypoechoic collection in to the occipital region.

Conclusion: Prenatal diagnosis of Cystic hygroma and Encephalocele can be made from 9th week onwards, which will be helpful for planning delivery or to deal with neonatal complications.

KEYWORDS: Cystic Hygroma; Encephalocele; Spina bifida; Multiple Pterygium.

Address for Correspondence: Maruti ram Annamraju, Assistant Professor of Anatomy, S.V.Medical College, Tirupati, Andhra Pradesh, India. **E-Mail:** marutiramannamraju@gmail.com

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INTRODUCTION

Lymphangiomas are congenital lymphatic malformations that occur most commonly in the head, neck or axilla ; however , they may arise anywhere in the developing lymphatic system and constitute 5.6% of all benign lesions of infancy and childhood[1].

Encephalocele refers to a group of rare congenital anomalies of the central nervous system where brain tissue protrudes from a defect in the skull. Encephalocele can occur in isolation, as well as with other unrelated congenital defects or as part of a well described syndrome[2].

MATERIALS AND METHODS

After approval by the institutional ethical committee 30 aborted foetuses of 12 weeks to 36

weeks gestational age and both sexes were collected from Government Maternity Hospital with prior informed consent from parents or close family members. Among these a male aborted fetus of 24 weeks age weighing 1.25 kg presented a huge bilateral neck swelling with multiple pterygium-webbing.

OBSERVATIONS:

Following external features were observed in this case.(Figs.1&2)

1. Hypertelorism.

2. Saddle nose.

3. Micrognathia.

4. Uplifted auricle.

5. Low posterior hair line with unswept hair directional pattern.