Objective
Encephalocele is characterized as a protrusion of the brain and/or meninges through a defect in the skull that is covered with skin. The frontal encephalocele is placed between the bregma and anterior part of the ethmoid bone. We reported a rare case of large fetal frontal encephalocele; the diagnosis was suspected initially by prenatal ultrasound and confirmed by postnatal evaluation.

Methods
Case report.

Results
A 24-year-old multipara late registrant woman admitted to our hospital at 18 weeks of gestation for first routine examination. Her past medical and obstetric histories were unremarkable. There was no history of genetic disorders or structural anomalies noted in the family history of both parents. Sagittal and axial sonography of the fetal face depicted a midline soft-tissue mass measuring 1.8 × 1.5 × 1.3 cm projecting anteriorly from the lower aspect of the fetal forehead above the nasal bridge and between the fetal orbits (Figure 1). The soft tissue mass appeared to contain both tissue and fluid. No other abnormalities were noted in detailed USG. Following genetic counseling, the patient declined amniocentesis and the parents decided to continue with the pregnancy. The mother and fetus were followed up by us. Fetal surveillance was assessed with serial ultrasonography and cardiotocography. The pregnancy was uneventful. The mother was admitted to the hospital for bleeding and pain at 32th weeks of gestation. A live baby boy weighing 1810g was delivered vaginally. The neonate was noted to have a 5 x 4cm midline purplish soft tissue mass in the anterior region with dystrophic skin (Figure 2).

Conclusion
Anterior encephalocele is a rare condition with a reported incidence in the West of between 1: 35 000 and 1: 40 000 live births. It is situated between the bregma and the ethmoid bone and they are not considered neural tube defects. Anterior encephaloceles are divided into two main types: sincipital and basal defects. Sincipital encephaloceles are external lesions, which occur near the root of the nose and are subdivided into three types: nasofrontal, nasoethmoid, and naso-orbital. Basal encephaloceles are internal lesions, which occur within the nose, the pharynx, or the orbit. Prognosis of fetuses with encephalocele depends upon the size of the lesion, presence of associated central nervous system anomalies and/or associated syndromes. The mortality rate of encephalocele is high. The diagnosis is easily made from sonographic findings during the second trimester and may also be made in the first trimester.