Objective:
To assess the suggestive prenatal findings of fetal overgrowth syndromes and to evaluate the diagnostic efficacy of prenatal ultrasound (US) for these conditions.

Methods:
A retrospective study of case series of fetal overgrowth syndromes diagnosed in the Clinical Genetics Section at La Paz Hospital in which prenatal US was performed in our Fetal Medicine Unit (January 2010-December 2014).

Type of pregnancy (spontaneous versus “in vitro” fertilization), first trimester screening, suggestive US prenatal findings, prenatal genetic investigations, perinatal outcome, postnatal clinical examination and postnatal genetic studies were recorded.

Results:
A total of 7 cases were identified, which represents 0.023% (7/30,597) of all newborns in our department. US prenatal signs suggestive of fetal overgrowth syndrome were found in 3 cases (3/7; 42%). No prenatal genetic diagnosis was made. However, a postnatal clinical diagnosis was established in all 7 cases, and confirmed by genetic molecular studies in 6 of them.

Conclusion:
Overgrowth syndromes are uncommon conditions. The majority of them are diagnosed at the postnatal period by clinical examination and genetic molecular analyses. When a large-for-gestational age fetus is suspected, once gestational diabetes is ruled out, it is essential to perform an exhaustive US morphological assessment looking for suggestive findings of overgrowth syndromes. The performance of US prenatal study is low. Despite the low sensitivity, prenatal suspicion can help in the immediate neonatal care.