A case of fetal lipoma of the corpus callosum

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Objective

Intracranial lipomas account for 0.1-0.5% of all primary brain tumors. Besides of other locations, lesions occur often at or next to the midline, mostly pericallosal cistern. A common symptom of intracranial lipomas are epileptic seizures, but mostly these malformations are asymptomatic. A lipoma may be associated with fronto-nasal dysplasia of varying degree, with a frontal bone defect or with frontal extracranial lipoma.

Methods

The paper presents a prenatally diagnosed case of the lipoma of the corpus callosum. The malformation was discovered by sonography. Both 2D and 3D ultrasound was used to confirm the diagnosis.

Results

A 30-year old gravida 2. was admitted to the High Risk Pregnancy Clinic, Department of Obstetrics in the 38th week of pregnancy, diagnosed with a fetal lipoma of the corpus callosum. The pregnancy was uncomplicated with other diseases. A routine anomaly scan performed at midtrimester revealed no structural defects. During the 3rd trimester ultrasound examination the anomaly was detected. At 2D and 3D ultrasound imaging, a separated round-shaped hyperechoic, calcified mass in the corpus callosum was documented. The lesion was compatible with multiple lipoma. On the 40th week of pregnancy, the patient gave a physiologic, vaginal birth and delivered a female neonate with body weight of 3360g, in a good condition according to the Apgar score. The infant did not present with epileptic seizures. In the cranial ultrasound performed by the neonatologists the malformation of the corpus callosum was confirmed. There were no other abnormalities of the central nervous system found in the examination. Ophthalmology consultation did not show any disorders. In the 7th day of life, the newborn was discharged home in a good general condition. A detailed postnatal evaluation with MRI was performed and the antenatal brain finding were confirmed.

Conclusion

At the time of this writing, the 6-month old infant is well and no specific syndrome has been clinically suspected. There are no indications to remove the mass. In a fetus with a prenatally detected intracranial lipoma, prognosis depends on the presence and type of associated anomalies. The postnatal radiological and neurological follow up should be definitely continued.