

A case of persistent right umblical vein

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Objective

Persistent right umbilical vein (PRUV) is a vascular pathology occuring due to occlusion of the left umbilical vein. According to the new literatüre, the invidence of PRUV is estimated to be 1:526 in low risk population. PRUV is associated with other congenital abnormalities such as genitourinary, gastrointestinal, cardiac and skelatal disorders however it is an isolated finding in the majority of cases. Three types of PRUV has been described. Intrahepatic PRUV is the most prevelant and it has a good prognosis. Our objective is to report a case diagnosed in our unit.

Methods

A 22-year-old G1P0 woman was presented for assessment at 23+3 weeks of gestation following the earlier ultrasound detection of cardiac echogenic focus. Her first and second trimester screening tests reported to be normal. On repeat ultrasound examination cardiac echogenic focus was not confirmed. The heart was normally sited with normally positioned great vessels. Single umbilical artery was diagnosed.

Results

The umbilical vein was located laterally to the gallbladder and gallbladder was between the stomach and the umbilical vein. Umbilical vein curve was towards the stomach. Ductus venosus was determined. Amniocentesis was recommended to the patient. The amniocentesis result was reported as normal.

Conclusion

PRUV is much more common than previously thought. Diagnosis of PRUV is an indication for detailed anatomic ultrasound and fetal echocardiography. Prognosisis is excellent when it is an isolated finding and PRUV is connected to the portal system. There is still controversy if it is an indication for fetal karyotyping. Large series are needed to clarify the role of this test.