A case of anomalous venous return

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Objective
The prevalence of persistent left superior vena cava (PLSVC) is 0,2% of foetuses with normal hearts and 9% of anomalous hearts. PLSVC associated with absence of right superior vena cava (RSVC) is very rare (0,09-0,13%) and relevant published data is limited. We aim to present an antenatally detected case of PLSVC with an absent RSVC.

Methods
This is a case report.

Results
A primiparous woman presented for her mid-trimester anomaly scan. A four-chamber view with normal sized ventricles and atrial chambers was seen with an inferior vena cava draining to the right atrium. PLSVC was demonstrated with drainage to a dilated coronary sinus. In addition to this, the RSVC was absent with the innominate vein coursing from right to left. There was also a permeable foramen ovale. In the 3-vessels and trachea view there PLSVC with absence of RSVC was visualized. The neonate had no other associated malformations. He is currently being followed-up by paediatric cardiology and has remained clinically stable thus far.

Conclusion
Isolated PLSVC is a normal variation with little clinical significance. However, detailed assessment is required to detect extra-cardiac anomalies and any other associated cardiac defects that may not be picked up in the routine mid-trimester scan. Delivery may be carried out in a normal hospital. The neonate should be evaluated to ensure that the aorta is patent after the arterial duct is closed.