

A case of ectopia cordis at the 11 to 14 weeks scan

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Objective

To improve the diagnosis of fetal anomalies in the first trimester anatomy scan at eleven to fourteen weeks.

Methods

A 21 year old, primigravida, attended for a routine ultrasound. She had second degree consanguinity. The family history was negative for congenital or genetic abnormalities and the patient denied exposure to drugs or toxins. Her first scan showed a pregnancy of ten weeks six days with a large yolk sac, embryonic oligohydramnios. She was advised a repeat scan after ten days.

Results

The ultrasound after fifteen days showed pregnancy of twelve weeks and two days with gross cystic hygroma, ectopia cordis, omphalocele, megacystis, short spine and absent nasal bone. In view of the multiple anomalies, the couple opted for pregnancy termination. The prenatal ultrasound findings were confirmed by fetal autopsy. The diagnosis of Pentalogy of Cantrell was confirmed.

Conclusion

The prognosis is poor and is related to associated malformations. CONCLUSION: Ectopia cordis is a rare congenital malformation with a poor prognosis. Ultrasonography is of great value in the prenatal assessment. The ectopia cordis should be precisely localized and classified accurately. Management includes a careful search for associated anomalies, especially cardiac, and assessment of fetal karyotype. Pregnancy termination prior to viability should be considered and discussed with the parents.

