

Fetal occipital encephalocele: Case Series

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Objective

To describe the characteristics of 3 cases with prenatal diagnosis of occipital encephalocele in a tertiary referral center. .

Methods

Retrospective review of 3 cases of occipital encephaloceles diagnosed prenatally, sonographic finding and perinatal outcome. The diagnosis of encephalocele was considered when a defect in the skull associated with protrusion of meninges and brain tissue was identified in both the axial and sagittal sections of the fetal head. The parents were offered fetal karyotyping and examination of the fetal anatomy.

Results

Three cases occurred in singleton pregnancies. A median maternal age of 25 (range 16-30) years. All the patients had an otherwise uncomplicated antenatal course. However, one patient consumed cocaine and tobacco at the time of the scan and another was diagnosed with Meckel-Gruber syndrome. The median diagnosis made in external centers was 18.3 (range, 17.0-20.6) weeks. The median gestational age at evaluation in our centers was 24.5 (range, 20.6-24.2) weeks. All infants born at term.

Conclusion

After establishing the diagnosis of encephalocele, a thorough evaluation of the fetal anatomy is necessary. Invasive testing should be offered. The cases that underwent neurological correction of the defect had no severe neuromotor disabilities. However, when the cranial defect was associated with other major anomalies, the outcome was lethal. Parental counselling should be individually tailored in an interdisciplinary approach, collaborating with the department of genetics, neuropsychiatry and neurosurgery. Follow up should include repeated sonograms and MRI.