

Body Stalk Anomaly

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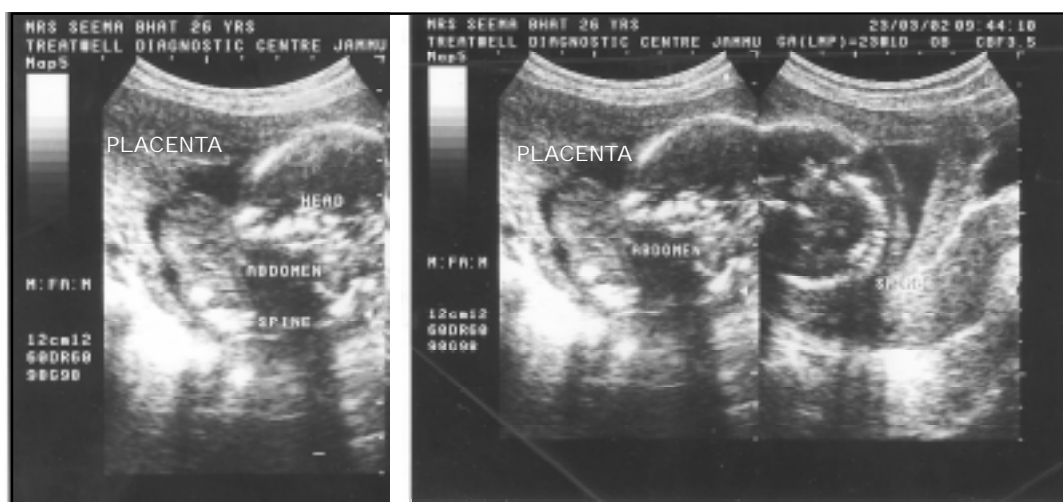


Fig 1

Fig 2

Fig 1: USG showing major anterior wall defect, herniated contents adherent to the placenta with rudimentary umbilical cord. Fig 2: Showing abnormal nuchal thickness and severe kyphosis.

Body stalk anomaly is a rare anomaly with incidence of 1 in 10000 pregnancies. The typical ultrasound features are major abdominal wall defect, severe kyphoscoliosis, neural tube defect, limb abnormalities, malformed umbilical cord (1,2). Absence of umbilicus and umbilical cord and adherence of the placenta to the herniated viscera through large anterior wall defect and reduced amniotic fluid render foetus immobile. There is association of abnormal nuchal thickness measurements (2). Early amnion rupture with amniotic band syndrome and early generalized compromise of embryonic blood flow are attributing causes.

Presented case is 26 year old female who reported to a gynaecologist with history of 6 months of amenorrhea and diminished foetal movements. Per abdominal examination revealed uterus about 20 weeks size and foetal heart sounds were present, regular 130 beats per minute and ultrasound examination for foetal well being was advised. Ultrasonography showed single foetus with 20 weeks of gestational age. There was anterior abdominal wall defect with herniation of contents adherent with placenta. The foetus was immobile with rudimentary umbilical cord and increased nuchal thickness. The amniotic fluid was reduced. (fig1, 2)

This anomaly should be distinguished from other foetal abdominal wall defects. The typical features can be detected ultrasonographically by the end of first trimester. Prenatal diagnosis of this anomaly would permit the early termination of pregnancy or avoidance of surgical intervention.

References

1. Smrcek J M, Germer U, Krokowshi M, et al. Prenatal ultrasound diagnosis and management of body stalk anomaly: Analysis of nine singleton and two multiple pregnancies. *Ultrasound Obst Gynecol*, 2003;12(4): 322-28.
2. Jauniaux E, Vyas S, Finlayson C, Moscoso G, Driver M, Compbell S. Early sonographic diagnosis of body stalk anomaly: *Prenat Dign* 1990;10:127-32.

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