

Early diagnostic of LBWC. 4310326.

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The LBWC is a complex, rare and a mortal disease with an unknown etiology. Is a spectrum with anterior wall defects, short umbilical cord and limb malformations. There is no classification that covers the entire spectrum of anterior abdominal wall defects. Its etiology is controversial, and there is no genetic cause. This case demonstrates the importance of proper prenatal care and a first-trimester ultrasound.

19 year-old pregnant women presented to the fetal medicine department for her first evaluation. She had no relevant medical story. An ultrasound was performed, revealing a 9-week-old live fetus There was a increased nuchal translucency, proximity of the fetal pole to the yolk sac (image 1), herniation of intestinal loops, and unevaluable lower extremities. We repeat the evaluation at 12 weeks nuchal translucency of 6.3 mm, decreased body movements, gastroschisis, non umbilical cord and altered lower extremity positioning, leading to a diagnosis of LBWC. The parents were informed about the diagnosis and after counseling, they opted for termination of pregnancy. At autopsy (image 2) the fetus presents short cord, gastroschisis, and scoliosis.

The LBWC also known as body stalk is a complex and an incompatible anomaly. Is a spectrum with anterior wall defects, short umbilical cord and limb malformations. The diagnosis has been based on the Van Allen criteria with the presence of two of the three following anomalies: (1) Exencephaly or encephalocele with facial clefts; (2) Thoracic and/or abdominal defect; and (3) Limb defects.

Conclusion

The LBWC is a lethal fetal malformation syndrome. It is a pathology of unknown cause. The diagnosis is made with ultrasound. Early diagnosis is important for proper treatment. diagnosis should be made as early as possible.



Figure 3. An un-complex diagram