

EP 05.09 Gallbladder duplication: a rare case in a male neonate

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Background

Gallbladder duplication is a rare congenital anomaly of the biliary system, occurring in approximately 1 in 4,000 births. Prenatal diagnosis is uncommon, as most cases are incidentally detected in adulthood.

Case presentation

A 31-year-old nulliparous woman was referred at 28+3 weeks for a suspected fetal abdominal cystic mass.

Ultrasound showed two parallel anechoic fluid-filled structures in the gallbladder fossa, with no vascularization or biliary duct dilatation. Findings remained stable during follow-up.

Postnatal assessment

Postnatal ultrasound confirmed two adjacent fluid-filled structures below the liver.

After feeding, asymmetric contraction of one structure supported gallbladder duplication.

MRCP Findings

3D-MRCP demonstrated two gallbladders with separate cystic ducts merging into a single duct, confirming a **true Y-shaped gallbladder duplication**.

Conclusion

Gallbladder duplication, although rare, should be considered in the differential diagnosis of fetal cystic structures in the right upper abdomen.

Prenatal recognition can guide targeted postnatal imaging, allowing accurate anatomical characterization and appropriate follow-up.



Figure 1. The two anechoic formations within the liver parenchyma



Figure 2. Contraction of the lateral cystic structure and no change in appearance of the medial cystic structure