

EP 14.18 | Prenatal Diagnosis of Umbilical Cord Angiomyxoma

Case Report

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Introduction

- Umbilical cord angiomyxoma, an extremely rare tumor.
- ~45 cases reported in the literature.
- May cause perinatal complications, including cardiac insufficiency, hydrops, and fetal death. Rarely, tumor growth may compress adjacent umbilical vessels, leading to vascular constriction or even occlusion of an umbilical artery.

Case presentation

A 34-year-old woman with a previous cesarean section underwent an early fetal anatomy scan at **16+5 weeks**. Fetal anatomy was normal, but a 30 mm solid–cystic mass was identified at the placental cord insertion. The lesion was not intrinsically vascularized but was surrounded and traversed by umbilical vessels (Figure 1). Umbilical cord angiomyxoma was suspected and close surveillance was initiated.

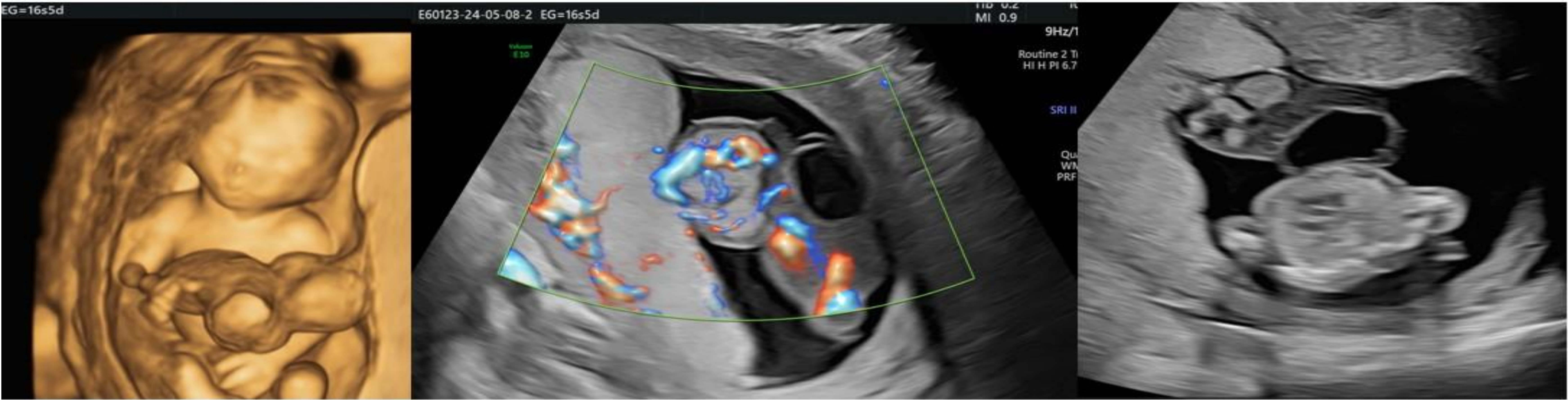


Figure 1: 16+5 w. Complex solid–cystic mass at the placental cord insertion, surrounded and traversed by umbilical vessels.

CONCLUSION: Umbilical cord angiomyxoma can be suspected prenatally by ultrasound. In this case, serial assessment of fetal well-being, tumor growth and the relationship with the umbilical vessels allowed uncomplicated continuation of pregnancy.

Follow-up

No complications occurred during the pregnancy.

Serial ultrasound examinations were performed to monitor fetal well-being and tumor progression.

A **healthy neonate** was delivered by cesarean section at **37 weeks**.

Histopathological analysis **confirmed the diagnosis**, with no additional placental lesions identified (Figure 2).

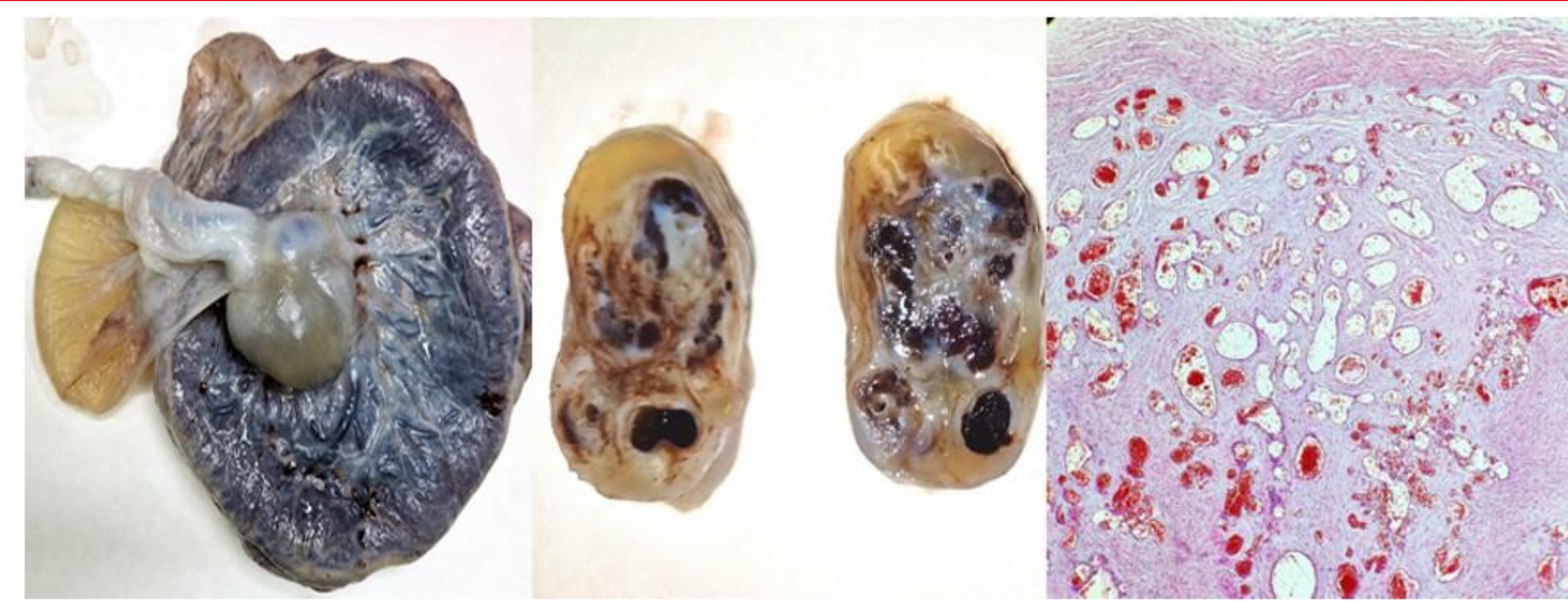


Figure 2: Macroscopic examination revealed a discoid placenta measuring 170 × 160 × 38 mm and weighing 800g, with a 55 mm angiomyxoma in the umbilical cord



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