



2025

KARNATAKA RADIOLOGY EDUCATION PROGRAM

DEPT. OF RADIO DIAGNOSIS, JJMMC,
DAVANGERE

Mentor: Dr. Sowmya J , Assistant professor

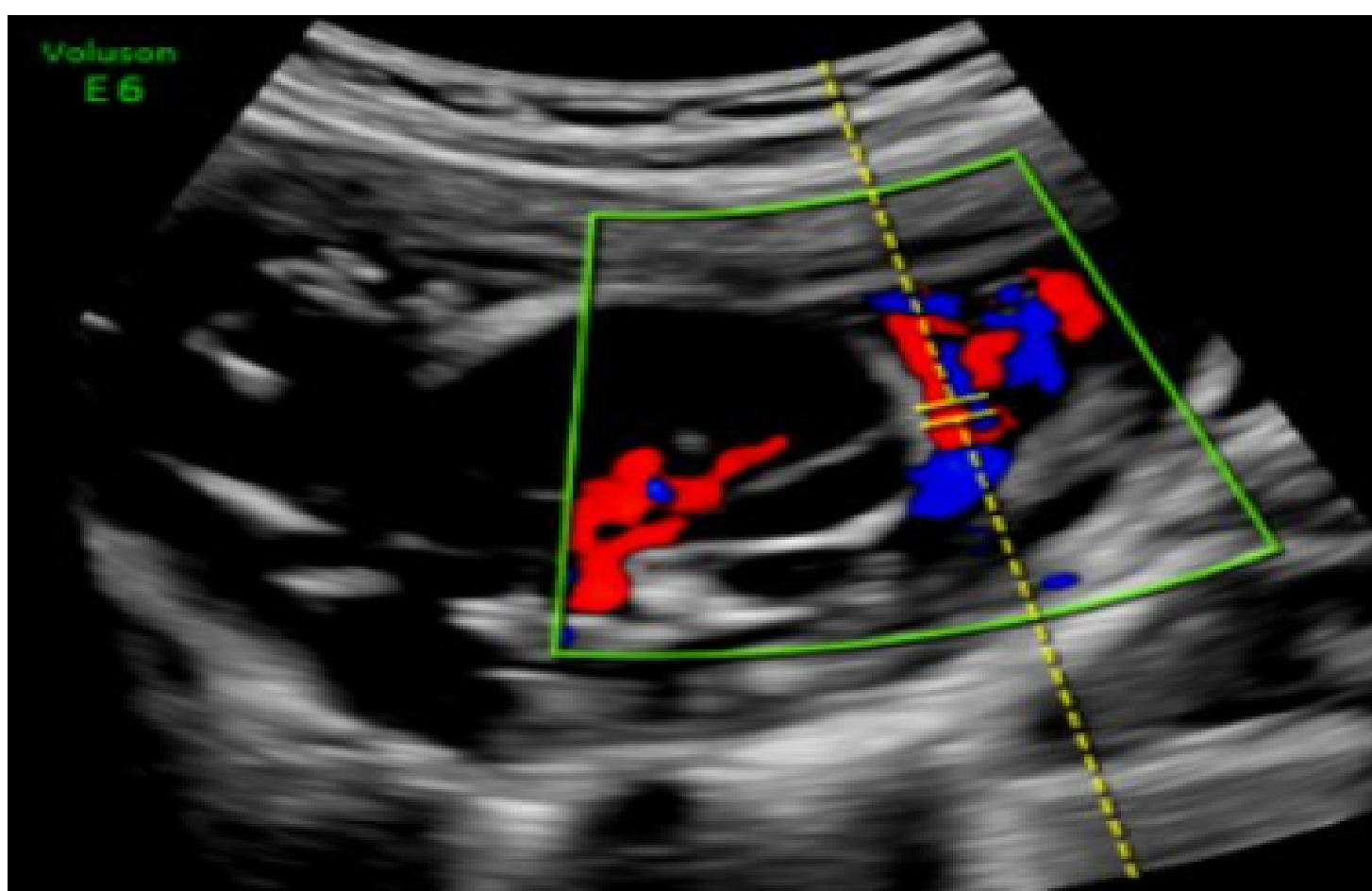
PG Resident: Dr. Shivanagouda Patil

History

- A 28year old pregnant woman G2P0L0A1 came to anomaly scan at 21weeks 0day of gestation.
- Non consanguineous marriage and spontaneous conception.
- Dating scan was done at 10weeks–normal, gestational age assigned as per LMP.
- First pregnancy : Conceived after 1 year of marriage(Previous pregnancy: Spontaneous abortion at 12 weeks no obvious cause detected). No scans were done in 1st trimester
- No history of HTN/DM/thyroid disorders.



Fetal parameters: All fetal parameters BPD , HC AC FL AND other long bones were <1st percentile with EFW <1st percentile according to Hadlock 4 software. The mineralization of the bones appeared normal. No bowing or fractures to indicate skeletal dysplasia. Calvarial shape was normal.

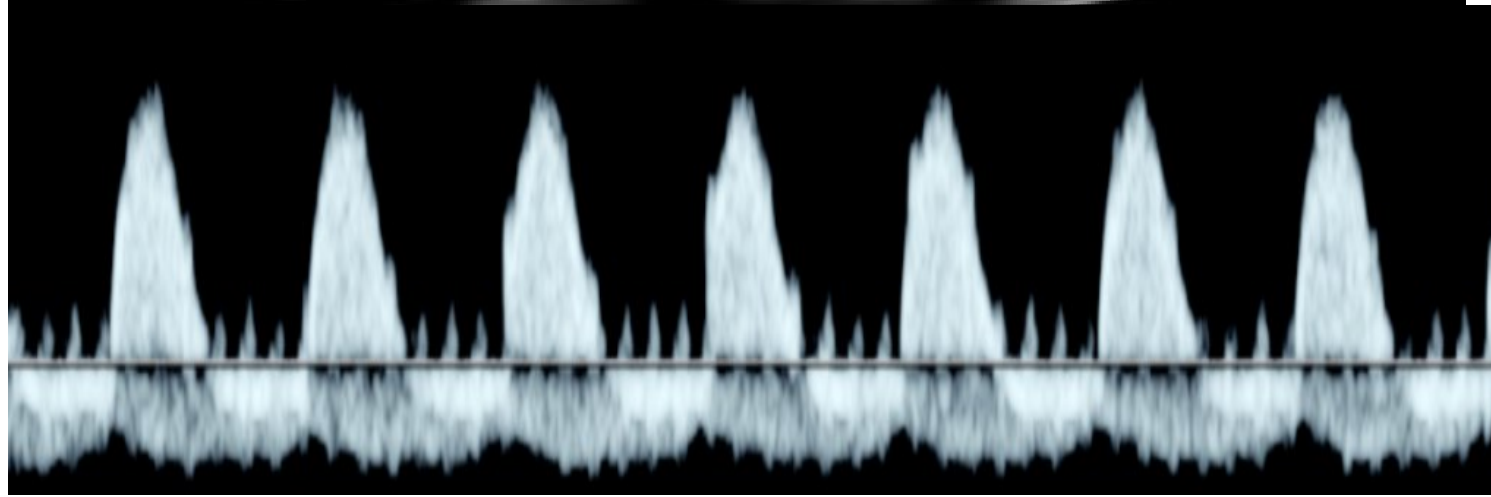


UA

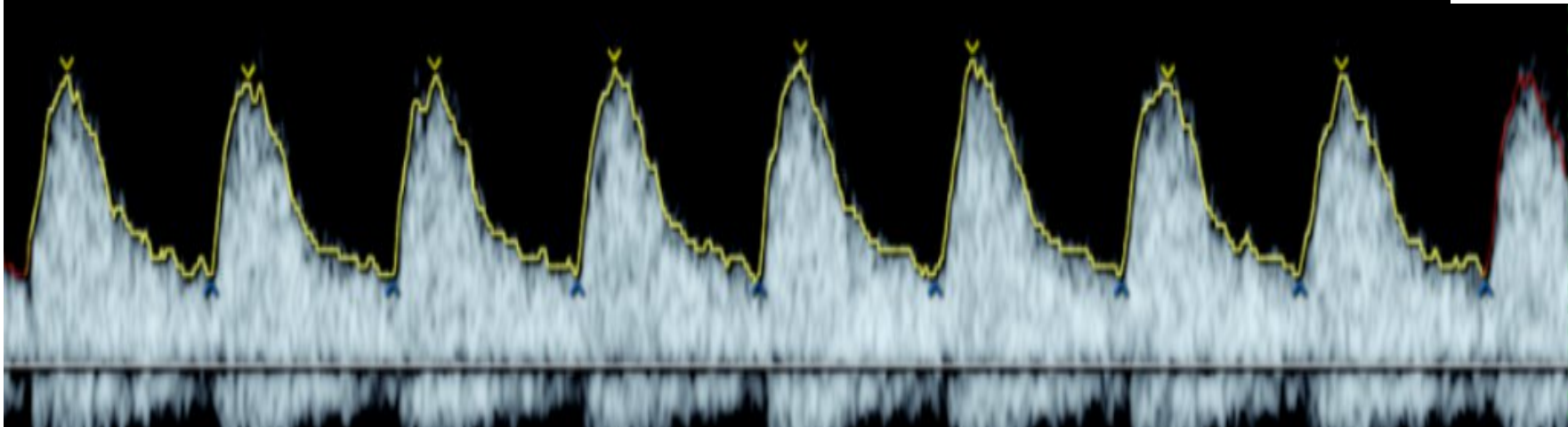
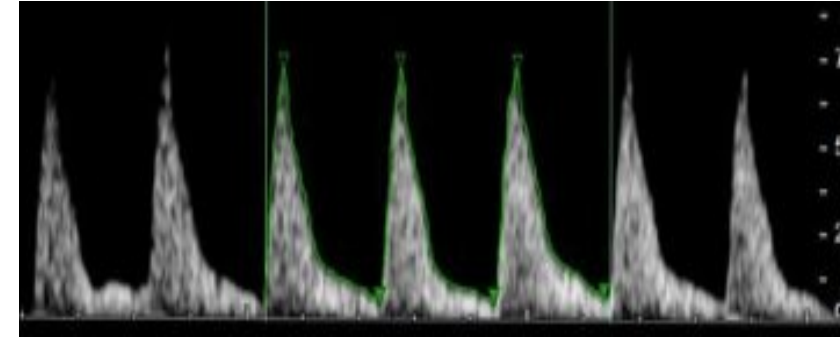
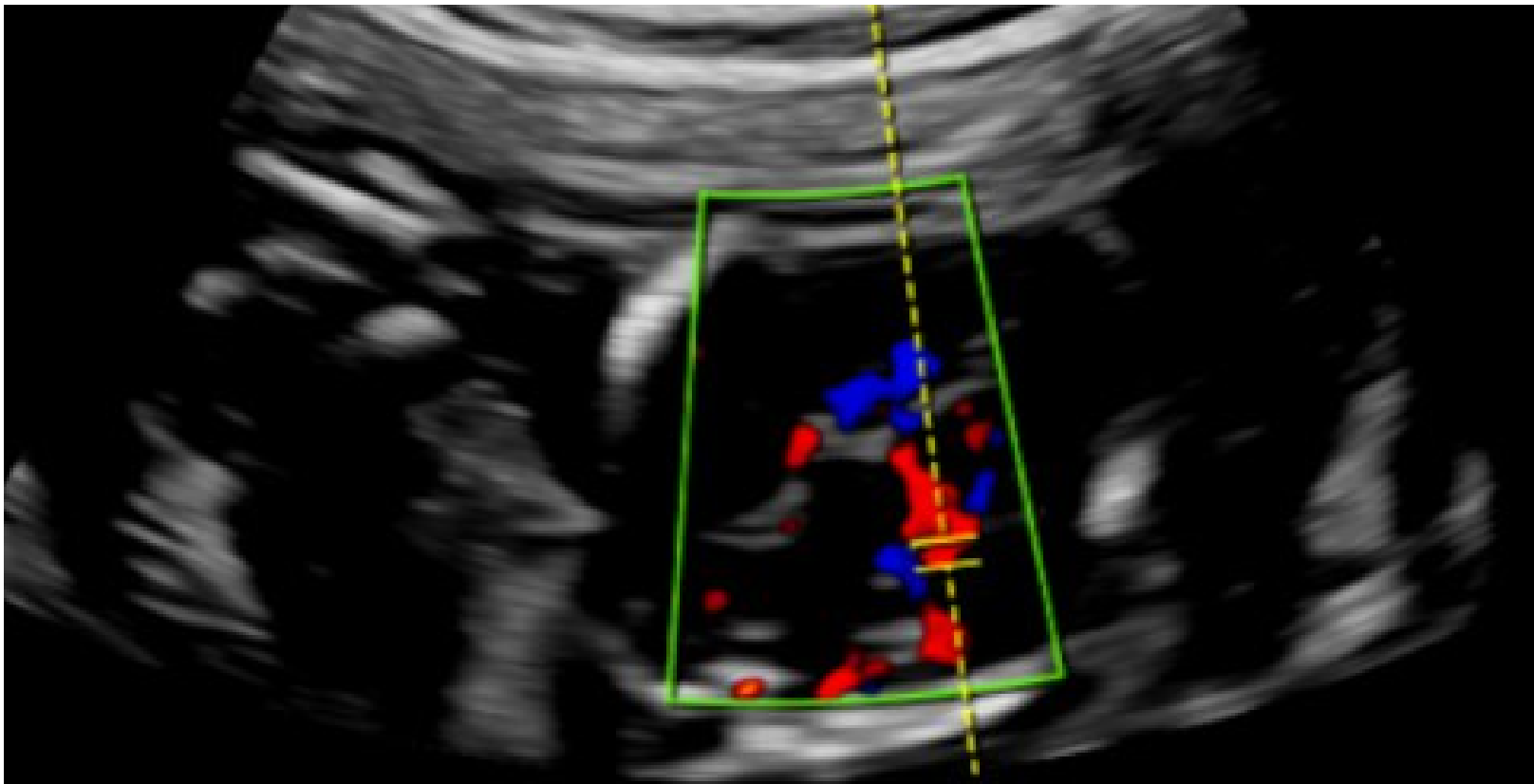
Umbilical artery doppler shows reversal of end diastolic flow which indicates high resistance

The PI of umbilical artery was 1.9 corresponding to pathological $>99^{\text{th}}$ percentile. CPR usually more than 1 ($< 1 < 3^{\text{RD}}$ PERCENTILE).

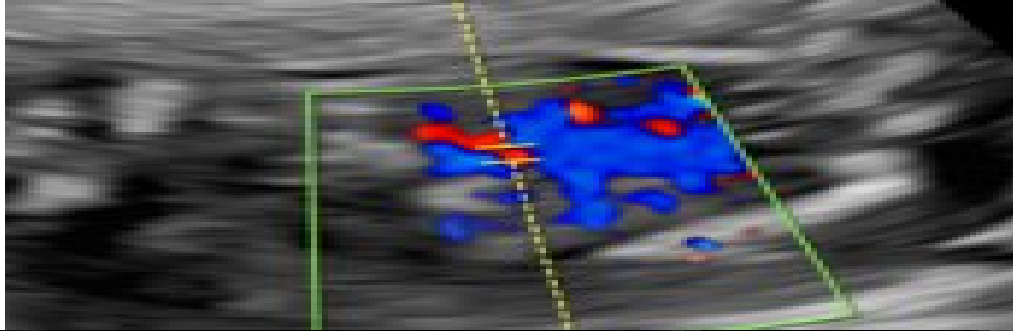
(Normal UA waveform which shows normal forward flow with end diastolic flow above the baseline)



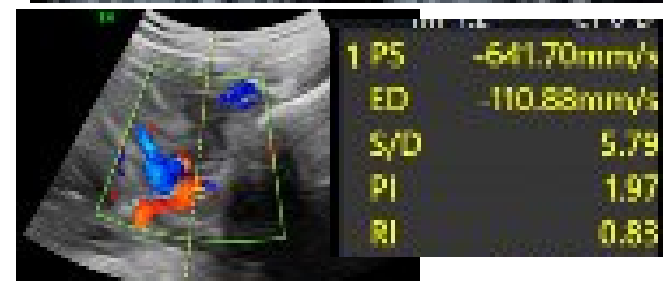
MCA



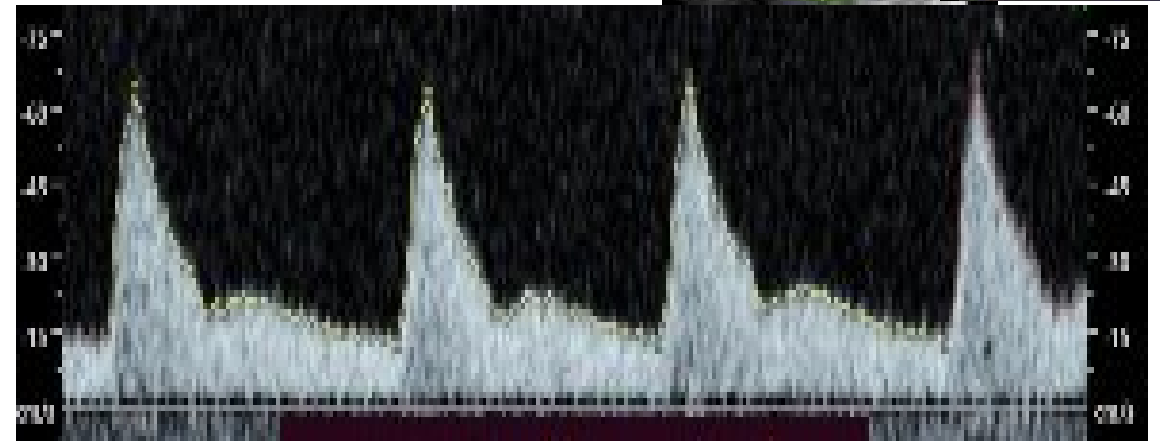
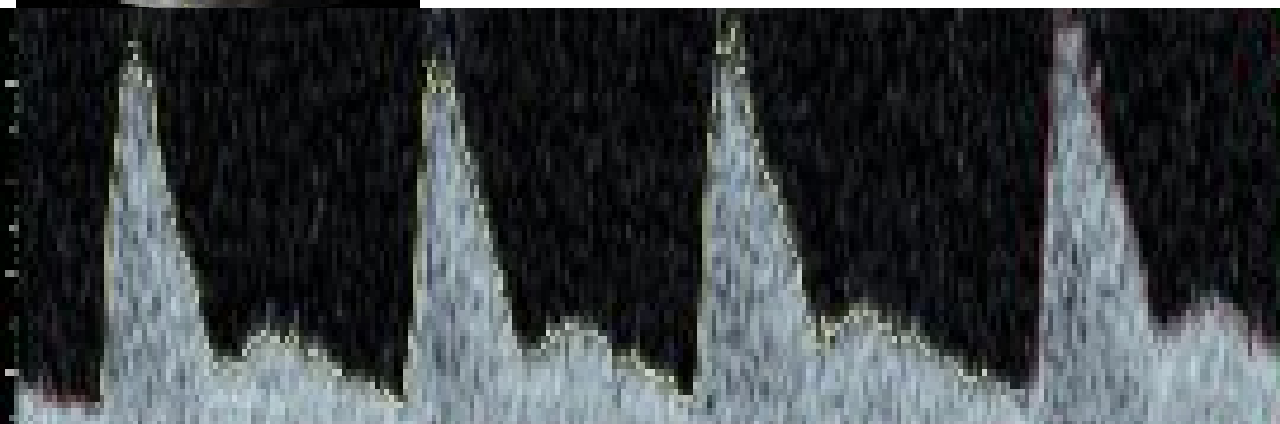
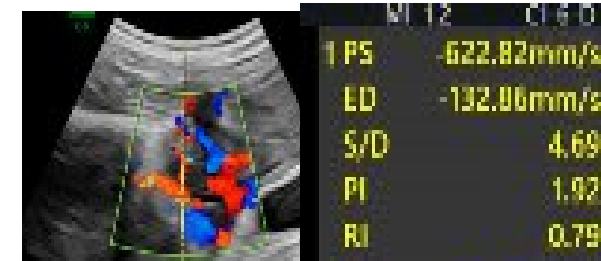
with reduced rapid upstroke in MCA indicating low resistance.- fetoplacental insufficiency and PI of MCA is $< 3^{\text{rd}}$ percentile (Normal – high resistance flow with minimal antegrade flow in fetal diastole)



DUCTUS
VENOSUS



UTERINE
ARTERIES



Umbilical artery

GA (weeks):

21

GA (days):

0

Pulsatility index:

2.1

Calculate

Percentile:

98

Result:

Pathological

Cerebroplacental ratio

GA (weeks):

21

GA (days):

0

Pulsatility index cerebral media artery:

1.17

Pulsatility index umbilical artery:

2.1

Calculate

Cerebroplacental ratio:

0.557142857142857

Percentile:

<1

Result:

Pathological

Middle cerebral artery

GA (weeks):

21

GA (days):

0

Pulsatility index:

1.1

Calculate

Percentile:

1

Result:

Pathological

Uterine arteries

GA (weeks):

21

GA (days):

0

Pulsatility index right uterine artery:

1.97

Pulsatility index left uterine artery::

1.92

Calculate

Average pulsatility index:

1.9449999999999999

Percentile:

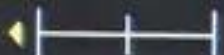
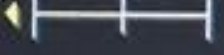
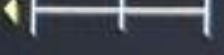
>99

Result:

Pathological

LMP	05.07.2024	GA(LMP)	21w0d	EDD(LMP)	11.04.2025	G		Ab	
DOC		GA(AUA)	16w4d	EDD(AUA)	12.05.2025	P		Ec	

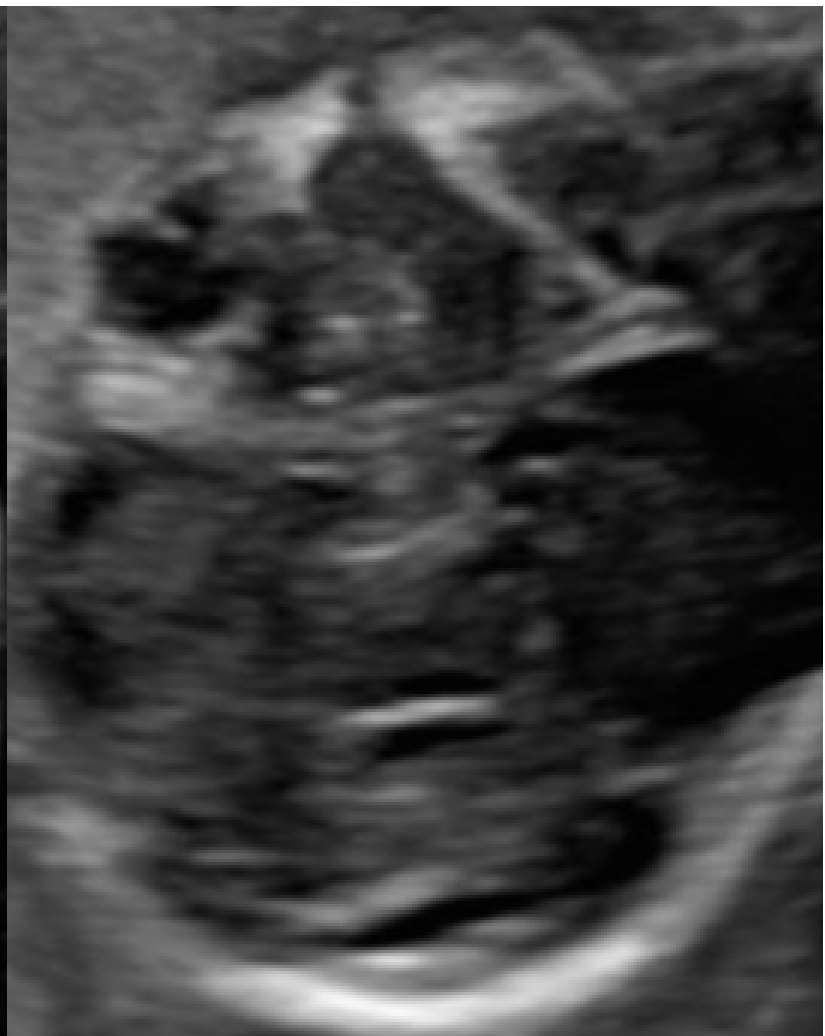
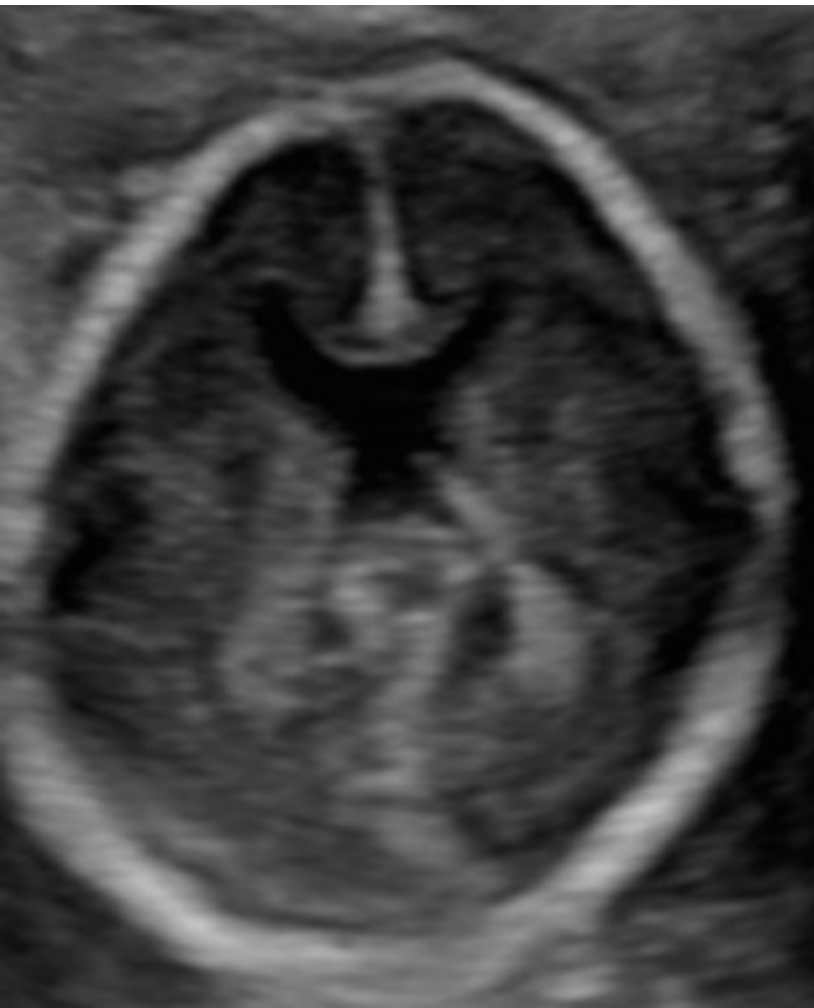
<i>EFW (Hadlock)</i>	<i>Value</i>	<i>Range</i>	<i>Age</i>	<i>Range</i>	<i>GP</i>	<i>Williams</i>
AC/BPD/FL/HC	143g (5oz)	± 21g	15w6d			N/A

<i>2D Measurements</i>	<i>AUA</i>	<i>Value</i>	<i>m1</i>	<i>m2</i>	<i>m3</i>	<i>Meth.</i>	<i>GP</i>	<i>Age</i>
BPD (Hadlock)	☒	38.26 mm	38.26			last	 <1%	17w5d
OFD (HC)		49.01 mm	49.01			avg.		
HC (Hadlock)	☒	138.28 mm	138.28			avg.	 <1%	17w2d
HC* (Hadlock)	☐	13.79 cm	13.79				 <1%	17w1d
AC (Hadlock)	☒	102.89 mm	102.89			avg.	 <1%	16w2d
FL (Hadlock)	☒	18.29 mm	18.29			last	 <1%	15w3d
TIB (Jeanty)	☐	15.20 mm	15.20			avg.	 <1%	15w2d
HL (Jeanty)	☐	20.45 mm	18.84	22.05		avg.	 <1%	16w0d
RAD (Jeanty)	☐	15.12 mm	15.12			avg.	 <1%	15w0d

- AC, EFW and all the biometry parameters $< 3^{\text{rd}}$ percentile with abnormal doppler.

(Reverse end diastolic flow of umbilical artery with high PI values of bilateral uterine arteries and increased, continuous diastolic flow in MCA)

S/O Stage III Early onset fetal growth restriction (Barcelona) with severe oligohydramnios & severe uteroplacental and fetoplacental insufficiency



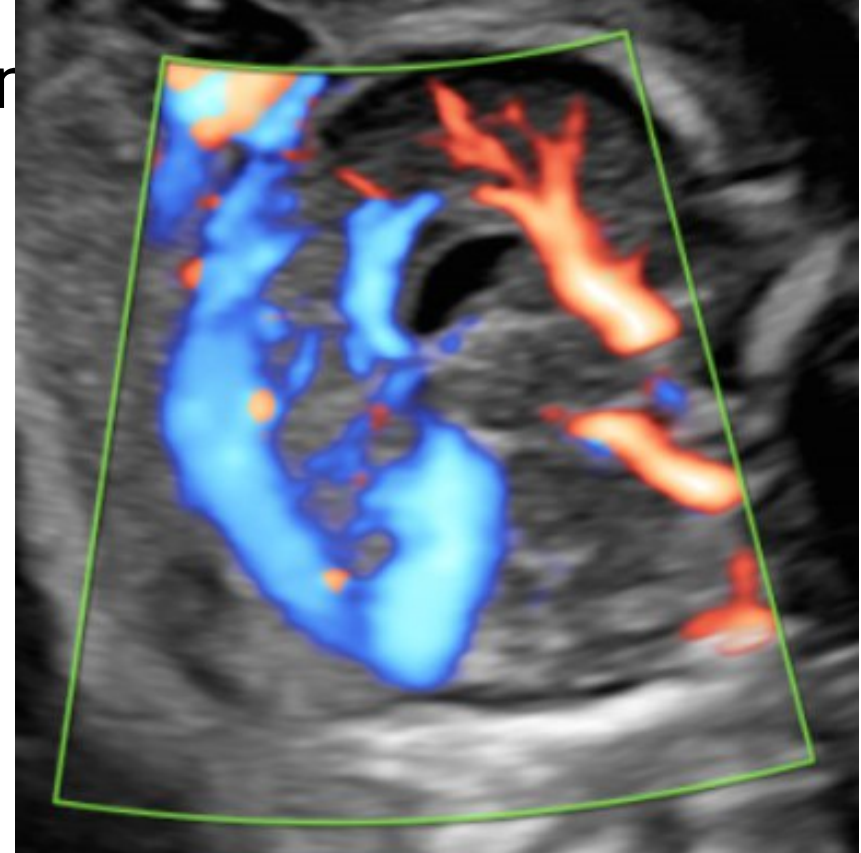
These are the three sections taken while generalized screening transventricular, trans thalamic, trans cerebellar shows fusion of frontal horns of bilateral lateral ventricle with absence of cavum septum pellucidum.

- So we did extended neurosonogram of the fetus in axial sagittal and coronal sweeps.
- Axial sweep from cranial to caudal shows fusion of frontal horns of bilateral lateral ventricle with absence of cavum septum pellucidum, bilateral thalami, brainstem and posterior fossa structures appeared normal.
- Bilateral orbits appeared normal.
- Hard palate and alveolar arch appeared normal.
- We ruled out holoprosencephaly.

- Sagittal sweep confirmed the findings with normal corpus callosum throughout and no evidence of corpus callosal agenesis.
- Ossified nasal bone and lips were appeared grossly normal.
- Coronal sweep showed abnormal anterior complex- fusion of from num septur

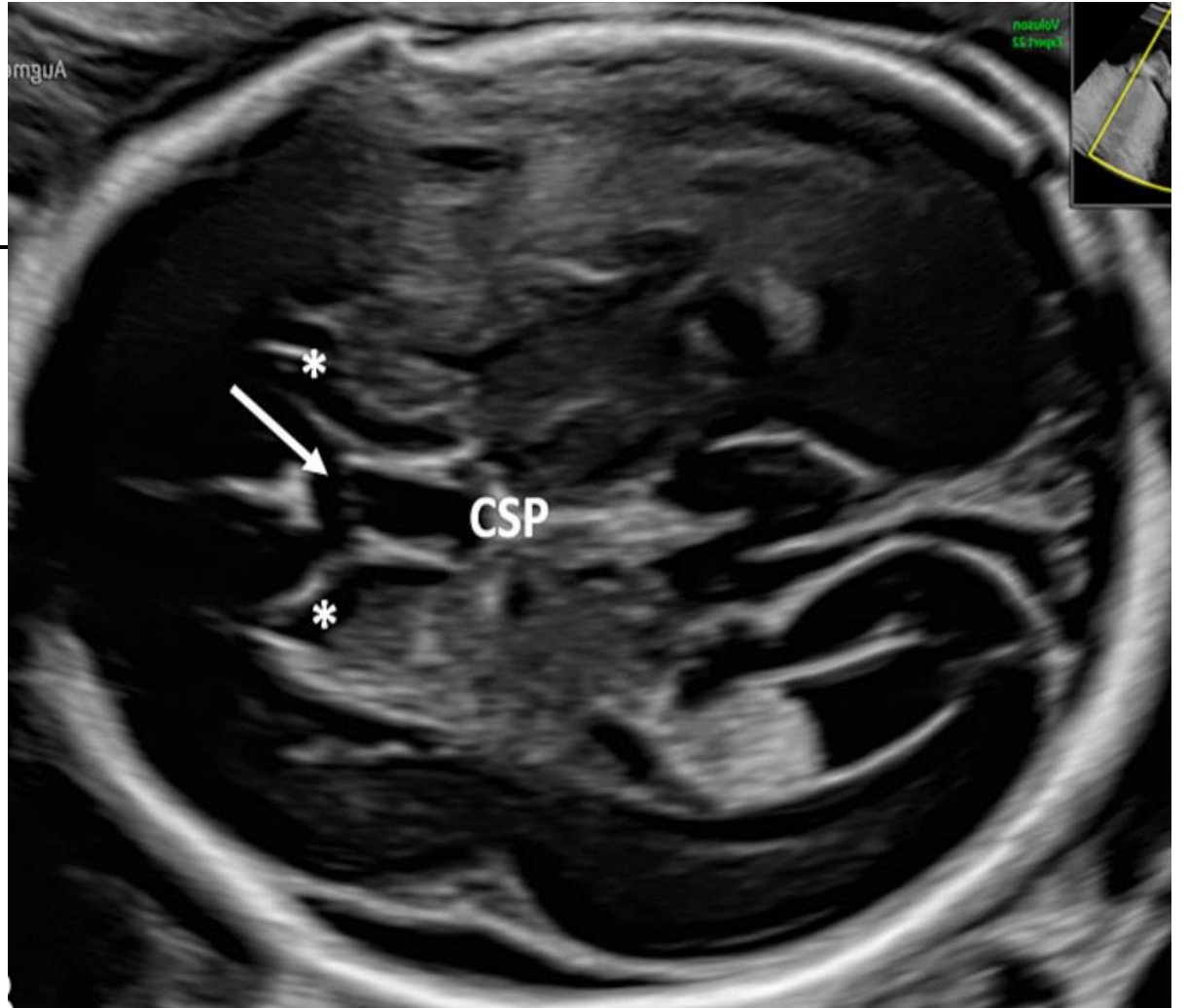


Corpus callosum appears normal in length and thickness with normal pericallosal arteries

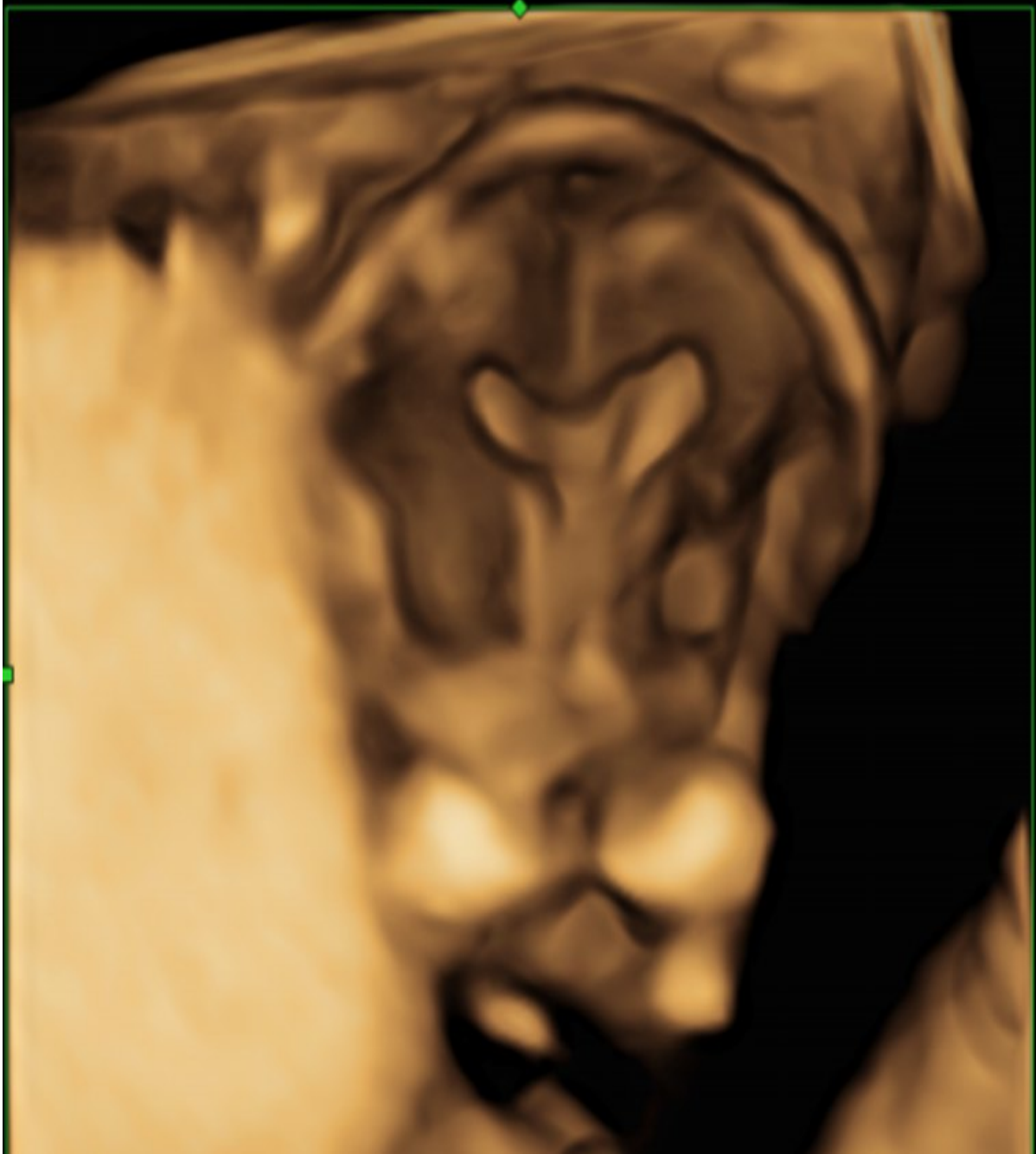


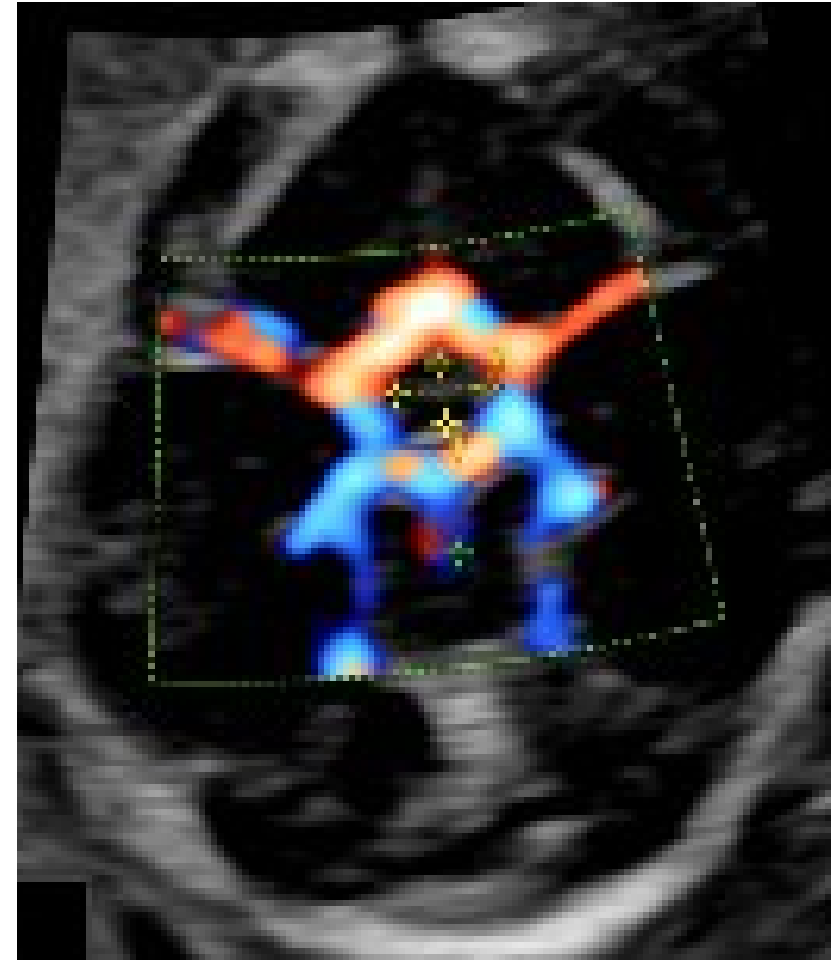
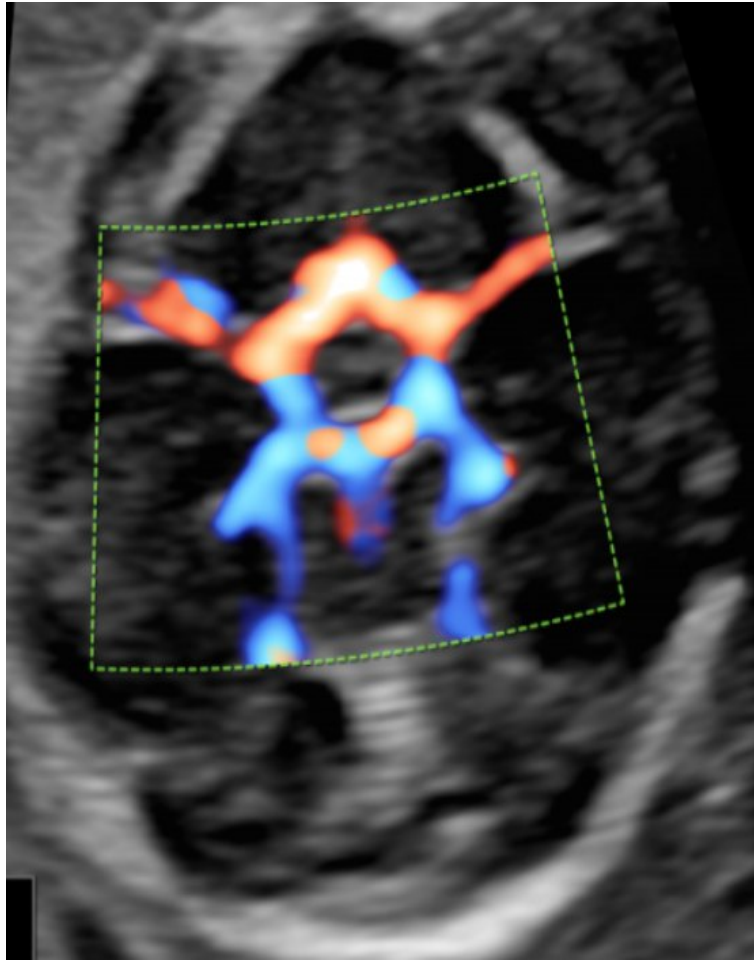
Abnormal anterior complex

Normal



Magnified view of frontal horns with non visualization of cavum septum pellucidum with fusion of frontal horns of bilateral lateral ventricle- septal agenesis





We have screened for optic chiasm diameter because to rule out septo-optic dysplasia in which hypoplastic optic chiasma
Optic chiasm diameter appears normal for age measuring 4.2mm in D(3.9mm is 50th percentile).

Central structure surrounded by circle of willis is Optic chiasma .

1 D 2.48mm
2 D 4.15mm

IMPRESSION:

- Reverse end diastolic flow of umbilical artery with increased resistance in umbilical and decreased resistance in MCA
- Gestational assigned as per LMP :21w 0days with EDD:11/04/2025
- Gestational assigned as per present USG :16w 4days with EDD:12/05/2025
- F/S/O Stage III Fetal growth restriction(Barcelona) with severe uteroplacental and fetoplacental insufficiency

Isolated septal agenesis

- Suggested Chromosomal microarray analysis & DNA storage.

THANK YOU