Two Cases report of Middle Interhemispheric Variant of Holoprosencephaly

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Objective: In order to give more image information of MIH.

Methods: Ultrasound and MRI images of 2 fetus with MIH were analysed.

Results:
Case 1, 25y, G1P0, LMP July 16, 2018. Prenatal ultrasound scan at 24+4 WKS showed that the vavum septi pellucid was not shown, the two bodies of the lateral ventricles fused together (Figure 1). At 25+3 GA wks, MRI T2 weighted imaging showed that the two bodies of the lateral ventricles fused together and the corpus callosum was normal. The couples decided to terminate the pregnancy. After induced abortion at 26+4wks, seq[hg19]del(4)(p15.2)
chr4:g.23360001_23540000del was detected by high-throughput DNA sequencing of abortional tissue (Fig 2).

Case2, 31y, G2P1. The ultrasound scan at GA of 30 +5wks showed that both sides of lateral ventricle were moderate widening by 1.29cm and 1.30cm. The two bodies of the lateral ventricles fused together (Fig 3). The vavum septi pellucid width was 0.26cm. MRI T2 weighted imaging showed that the post part of vavum septi pellucid was absent and the two bodies of the lateral ventricles fused together while the corpus callosum was normal.

Conclusion: By scanning the transcranial section of fetus anterior horn, the body and the posterior horn of the lateral ventricle continuously, we can find the special type of holoprosencephaly -MIH variant by prenatal ultrasound, and then we can make clear the diagnosis of MIH by 3D ultrasound multi-section imaging and MRI examination.