The variable ultrasound features in the semilobar form of holoprosencephaly
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**Introduction:** Holoprosencephaly has evident features in its alobar form. Semilobar and lobar forms present milder ultrasound characteristics.

**Case:** we report a case of a 28 years old G2 P1 with no particular history. First trimester NT was normal but showed abnormal features at the central nervous system. She consulted for a control ultrasound at 14 w. A unique ventricular cavity joined both hemispheres. A single thalamus was identified at the midline with a partial division seen in almost the third of it but it not possible to identify a 3rd ventricle.

Two choroid plexuses were identified, one in each side of the ventricular cavity along with a mild hypotelorism and a flat aspect of the face, without a proboscis. There were no other abnormalities identified, mainly no omphalocele, diaphragmatic hernia, limb, or kidney abnormality. Cardiac axis was at 47 degrees and a normal four chamber view. Biometry was at the 50th perc and the movement of the fetus was within normal. All the features were discussed with the parents along with the possible diagnosis. The couple decided for a medical interruption of pregnancy which was done in another facility.

**Conclusion**
Holoprosencephaly carries a bad prognosis. Milder forms present with less ultrasound features, yet the parents should be informed about the diagnosis as early as the first trimester to allow them to take appropriate decisions in this early period.