Case Report

A 17-week pregnant was referred for a routine scan which revealed bilateral mild ventriculomegaly, a lemon-shaped head but no Chiari malformation. Close examination of the spine revealed a small sacral meningomyelocele. The spinal cord was seen apparently attached to the lesion. No other obvious defects were detected, and in particular fetal leg movements were normal. The pregnancy was closely followed-up and by 20 weeks there was complete reversal of the ventriculomegaly and by 26 weeks the conus medullaris detached from the defect, in spite of remaining lower than expected. MRI confirmed that there was no further neurological tissue present in the sac, which was then named as a meningocele. It is unclear why the ventriculomegaly observed in the early second trimester resolved. It is possible that epithelization of the sac could have prevented further leakage from the defect. Interestingly, intrauterine correction of meningomyelocele has demonstrated success in partially reversing hindbrain herniation but not ventriculomegaly.

Conclusion

One could speculate that hindbrain herniation and ventriculomegaly could involve partially independent mechanisms or that when an intrauterine correction of a meningomyelocele is performed it is too late to reverse ventriculomegaly.