Introduction

• Truncus Arteriosus (TA) is a Cyanotic congenital heart defect were blood is pumped from the heart through a single truncal valve into a truncal artery, which gives rise to the aorta and pulmonar arteries. The ranges from 6-10 per 100,000 live births. Its cause is unknown. In patients with arterial trunk there is a common arterial trunk positioned above the ventricular septum which provides supplies for the systemic and pulmonary circulation and coronary arteries.

Case Report

• A 35 year pregnant, gravida 3 para 2, was referred for fetal echocardiography after an abnormal ultrasonography had shown a subaortic ventricular septal defect.

• Fetal echocardiography : Four-chamber view revealed an atrial septal defect (septum primum, septum secundum) and superior sinus venosus defect. There was a wide ventricular septal defect at the outlet localization, hypertrophy and fibroelastosis of the left ventricle wall and periaрdical efusion. Both coronary arteries were dilated just distal to the valve(figure 1). A single great vessel output was observed from the ventricles (truncal vessel) (Figure 2). Both pulmonary arteries arose independently from either side of the truncus (Figure 3) A right upper pulmonary vein dreined into the right atrium. (Figure 4)

• Fetal echocardiography confirmed the diagnosis of persistent truncus arteriosus, type 3 a. Cardiac failure and persistent pulmonary hypertension resulted in death.

Conclusion

• Fetal echocardiography can diagnose a Truncus arteriosus identifying the origin of the central main pulmonary artery or pulmonary branch from the ascending truncal root. Antenatal diagnosis of fetal cardiac abnormalities is important because it provides parents an opportunity of obtaining prognostic information prior to birth and planing specific needs at birth, thus improving neonatal outcome.