Introduction
Sirenomelia is a very rare congenital anomaly of the fetus. The incidence of sirenomelia is reported to be one in 60,000 to 100,000. We experienced a case of type 1 sirenomelia complicated by severe oligohydramnios at the 13th week of gestation.

Case Report
The patient was a 22-year-old nulliparous woman. She was referred to our hospital for anatomical evaluation of the fetus because of her severe oligohydramnios at the 13th week of gestation. An antenatal ultrasonographic scan was carried out and a live single fetus was noted. Because of her severe oligohydramnios, ultrasonographic images were not very clear. As far as we could check, no structural abnormalities were found in the fetal cranium, brain, upper extremities, thorax and heart. However, the lower extremities were in fixed extension and all long bones were visible. The two lower extremities stayed in the same position and no separate movements were seen, which suggested the fusion of the two lower extremities. Color Doppler ultrasound revealed a single umbilical artery. No kidneys and urinary bladder were confirmed. Thus, the diagnosis of type 1 sirenomelia (by Stocker and Heifetz classification) was made prenatally. The parents opted to have a termination of pregnancy, which was performed at the 14th week of gestation. Postmortem images of the delivered baby by computed tomography revealed a single lower limb containing two femurs, two tibiae and two fibulae. An oral glucose tolerance test of the mother was performed in the postpartum period, which showed an impaired glucose tolerance pattern.

Conclusion
Prenatal diagnosis of fetal sirenomelia complicated by severe maternal oligohydramnios may be difficult to make, especially in type 1 sirenomelia in which all long bones are visible. Detailed sonographic examination of the fetus was thought to be necessary for the prenatal diagnosis of sirenomelia.