Liver cyst is a rare cause of fetal abdominal cysts. Hence, criteria for definite prenatal diagnosis remains obscure. We present our case, with suggested framework for prenatal diagnosis.

A 29 year old primigravida, with otherwise uneventful pregnancy presented to our center after detection of fetal abdominal cyst in routine third trimester ultrasound scan. On Ultrasound scan, we made the preliminary diagnosis of liver cyst based on the following criteria: unilocular, clear cyst, occupying right upper abdomen, related to the liver and anterior abdominal wall, showing no peristalsis, with stomach identified on left side. Despite anterior position of the cyst & close relation to anterior abdominal wall, the observation of cyst movement with fetal respiratory movements, confirmed its hepatic origin.

The cyst wall was avascular, yet the posterior border (related to hepatic parenchyma), was closely related to umbilical vein.

Following the course of umbilical vein on sagittal view, it appeared to be displaced posteriorly by the huge cyst. Tomographic ultrasound imaging TUI, confirmed the anterior position of the cyst in relation to gall bladder, there was no connection to GIT nor other recesses, supporting the diagnosis of subcapsular hepatic cyst.

Our case was delivered by CS at 39 weeks. Post-natal MRI performed, confirmed hepatic origin of the cyst. Surgical excision done at age of 1 week. Baby is 5 months old at time of writing and thriving well.