OP 20.04 Fetal abdominal calcifications: prenatal diagnosis, management and outcome

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Objectives

To report our experience with fetal abdominal calcifications detected by ultrasound (Prenatal diagnosis, Management and Outcome)

Methods

➢ Retrospective analysis 3 years
➢ Sonographic study: number, characteristics, associated abnormalities
➢ Maternal STORCH analysis
➢ Amniocentesis for cystic fibrosis mutations and chromosomal analysis (if multiples)
➢ Follow up by pediatricians

Results

➢ 5451 fetus
➢ 15 cases (11 isolated, 4 with two or more calcified foci)
➢ None abnormal karyotypes nor cystic fibrosis mutation
➢ 2 citomegalovirus infection. No STORCH
➢ 12 term fetus, 2 premature delivery and 1 lost at 24 weeks
➢ 13 good outcome (ages: 1 month to 2 years) and only 1 infant had sequelae (Citomegalovirus infection)

Conclusion

✓ Fetal abdominal calcifications are relatively common
✓ Isolated cases have a good prognosis after malformations and infection have been ruled out
✓ If multiple calcifications: chromosomal anomalies and cystic fibrosis should be excluded
✓ If all tests are negative: neonatal outcome carries good prognosis