Prenatal diagnosis of interruption of IVC with Azygos continuation. Nirvana Sabry, Mona Aboulghar, Ahmed Z. Elsheikhah, Omaima Idris

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Introduction
We report our experience in prenatal diagnosis of 10 cases with interruption of IVC and azygos continuation and outcome of this anomaly.

Method
Retrospective analysis of images of all cases diagnosed at Cairo Fetal Medicine Unit.
4 cases with structural cardiac anomalies, 2 cases with viscerocardiac heterotaxy, 1 case with polysplenia, 3 cases with no associated anomalies

Result
5 of 10 cases survived, out of cases associated with structural cardiac anomalies; one with AVSD underwent surgery and survived, the others had early neonatal death, one of the two cases with viscerocardiac heterotaxy developed intestinal obstruction, the other one was free of obstruction, one case with polysplenia suffered biliary atresia, died shortly after Kasai operation

Cases with isolated interruption had favourable outcome

Conclusion
Prognosis of interruption of IVC depends on associated anomalies. All cases of IVC interruption should be scanned carefully as it may be a manifestation of left isomerism so, detailed fetal echo and careful scan to exclude intestinal obstruction should be held. After birth special care should be paid to neonatal jaundice and intestinal obstruction.