diagnostic procedures may be offered to parents after satisfactory genetic counselling. Some of these subtle signs may come out as rare karyotype abnormalities of varying severity and significance.

Keywords: Genetic, ultrasound, prenatal diagnosis, syndrome

## References

- Ostrow V, De Luca F. Long term follow-up of a child with ambiguous genitalia, mixed gonadal dysgenesis, and unusual mosaicism. J Pediatr Endocrinol Metab. 2009 Sep;22(9):863-6.
- Jacobs PA, Harnden DG, Buckton KE, Brown WM, King MJ, Mcbride JA, Macgregor TN, Maclean N. Cytogenetic studies in primary amenorrhoea. Lancet. 1961 Jun 3;1(7188):1183-9.
- 3. Lin CY, Wang PH, Yang MJ, Chen CY. A case of 45,X/47,XYY mosaicism in a male fetus with a hypoplastic nasal bone. J Ultrasound Med. 2015 Feb;34(2):353-4.

## OP-12 Comparative case reports of prenatally diagnosed left ventricular aneurysm and diverticulum

Ömer Gökhan Evisov<sup>1</sup>, Ova Demirci<sup>1</sup>

 ${}^{\scriptscriptstyle |} Zeynep\ Kamil\ Women\ and\ Children\ Diseases\ Training\ and\ Research\ Hospital,\ Istanbul,\ T\"{u}rkiyers$ 

DOI:10.59215/prn.23.031supp012

Objective: Primary congenital ventricular aneurysm (VA) and ventricular diverticulum (VD) are rare congenital cardiac malformations. The differencial diagnosis is based on anatomical, histological and functional criteria. In this case report; prenatal diagnosis, follow up and clinical outcomes of VA and VD is discussed.

Case: Two cases at 36 and 33 th gestational weeks were referred to our clinic due to suspected fetal cardiac anomaly.



Fig 1. Case 1, LV diverticulum at 36 weeks (A); Case 2, LV aneurysm at 22 weeks (B) and at 33 weeks (C)

Table 1. Clinical characteristics of the cases

	Case 1	Case 2
Gestational age at diagnosis	36	22
Associated Cardiac Chamber*	Left Ventricle	Left Ventricle
Communication*	Narrow	Broad
Wall thickness*	Thick	Thin
Myometrial continuity*	Yes	Suspected
Contraction*	Synchronous	Hypokinetic
Prenatal Diagnosis	Diverticulum	Aneurysm
Prenatal Follow-up	Stable	Dilated Cardiomyopathy
Gestational age at birth	39	34
Postnatal follow-up	Asymptomatic	Death at day 23

\*Sonographic findings of the cardiac outpouching

**Discussion:** Clinical outcomes of VA and VD range from fetal death to asymptomatic survival. Earlier gestational week at diagnosis, outpouching related with LV and hydrops fetalis were reported as the factors associated with mortality, while the type of ventricular outpouching was not. Approximately 70% of cases remain asymptomatic in postnatal follow-up.

**Conclusion:** Venticular diverticulum and aneurysms should both be closely followed up prenatally.

Keywords: Aneurysm, diverticulum,fetal heart, left ventricle

## References

- Ohlow M-A, Von Korn H, Lauer B. Characteristics and outcome of congenital left ventricular aneurysm and diverticulum: analysis of 809 cases published since 1816. International Journal of Cardiology. 2015;185:34-45.
- 2. Shuplock JM, Kavanaugh-McHugh A, Parra D. Prenatally diagnosed congenital ventricular outpouchings: an institutional experience and review of the literature. Pediatric Cardiology. 2020;41:272-281.

## OP-13 A rare lesion detected on the fetal face in the 3rd trimester dacryocyctocele

Raziye Torun<sup>1</sup>, Alkım Gülşah Şahingöz Yıldırım<sup>1</sup>, Atalay Ekin<sup>1</sup>

<sup>1</sup>Tepecik Educating and Research Hospital, Perinatology Department, İzmir, Türkiye DOI:10.59215/prn.23.031supp013

**Objective:** Congenital dacryocystocele is a rare benign disease that presents as a cystic mass on the lacrimal sac at birth. These lesions, which are usually detected incidentally at 30 weeks of gestation, may cause parental anxiety if the prenatal diagnosis is uncertain.



**Fig 1.** Ultrasonographic view of dacriocystocele medial to right eyeball in axial section of fetal face

Case: A 23-years-old, 32 weeks and 1 day G3P1T1Y1 patient was referred to our outpatient clinic due to a cystic lesion on the fetal face. The patient's history was unremarkable and no consanguinity with her wife. In the ultrasound of the patient, a well-defined, thin-walled, 12x10 mm, anechoic cystic structure was observed on the medial side of the right eyeball of the fetus(figure 1). Evaluated in favor of dacryocystocele. There were no additional ultrasonographic features. TORCH