



Fetal adrenal cyst : challenges in prenatal counseling

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- **Background:** Fetal abdominal cysts constitute a variety of possible etiologies. Parents are often eager to have a clear diagnosis.
- **Case:** we report a case of a 28 years old G1 P0 with no particular history. First trimester NT was normal. Biochemical screening was reassuring. Diagnosis of a 7 mm right renal cyst was done at 22 weeks by an ultrasonography done outside of our facility. Morphology scan did not reveal any other associated abnormalities. The patient came for a second opinion exam at 26 weeks. The cyst increased in size during ultrasound follow-up to reach 9 mm. It was located at the the suprarenal but was distinct from the kidney and was probably of adrenal origin. The latter seemed increased in size reaching 17 *15mm. Color Doppler was not in favor of sequestration. Heart rate, umbilical and cerebral Doppler were within normal. Biometry was at the 50th percentile. Possible diagnosis of renal cyst, neuroblastoma, adrenal cyst were the major possibilities discussed with the patient along with the respective outcomes. MRI is a useful tool to differentiate between all these diagnosis, along with the ultrasound follow-up
- **Conclusion:** Fetal adrenal cyst is difficult to differentiate from neuroblastomas. Other diagnostic tests and follow-up are mandatory during pregnancy.