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A case report of a prenatal ultrasound diagnosis of a urachal cyst

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Objective

Umbilical cord anomalies are relatively rare. The majority of these structural malformations arise from failed obliteration of urachal or omphalomesenteric duct and can be detected antenatally by detailed ultrasound examination. A patent urachus is counted among a group of umbilical malformations with an observed incidence of 3 in 1, 000, 000 live borns with male infants being three times more affected. The prenatal appearance of a patent urachus is usually an allantoic cyst in the umbilical cord of the fetus with a prevalence of 0. 4–3% at 8–12 gestational weeks. We report a case of an urachal cyst diagnosed in a male fetus in the first trimester of pregnancy.

Methods

This is a case report.

Results

A 26 year-old patient gravida 1, para 0 presented for a regular monitoring of a normal course of pregnancy. At 12 weeks, ultrasounds showed a 5 mm anechoic oval-shaped and well- limited image located above the upper pole of the bladder, below the insertion of the cord. At 20 weeks of gestation there was an increase in size of the cystic abdominal mass to 35x42x30 mm. The skin surface and bladder were normal. The cyst had no communication with the bladder or the umbilical cord. At 41 weeks of gestation the cyst was measuring 78x40x36mm. The patient had a vaginal delivery of a male weighing 3240 g. The neonatal findings confirmed the prenatal diagnosis.

Conclusion

The permeable urachus is a progressive disease that can be diagnosed by prenatal ultrasound as early as the first trimester. This condition does not justify additional imaging or karyotype studying. Surgical treatment is often necessary, but spontaneous resolution is possible during the pregnancy or after birth when the cysts are simple simple.