

Chorioangioma: challenges in clinical management

Desiree Ting YY, Ryan L, Lay-Kok T
KK Women's and Children's Hospital, Singapore, Singapore

Objective

Chorioangioma is the commonest benign neoplasm of placenta, and tumours larger than 5cm are associated with fetal and maternal complications. We present a case with large chorioangioma diagnosed in second trimester that had adverse effects on both mother and fetus.

Methods

A 32-year-old, gravida 2 para 0, gestational age of 25⁺⁵ weeks reported abdominal distension and bloating for 2 weeks at her routine antenatal follow up. On clinical examination, abdomen appears to be large for gestational age. Her ultrasound scan revealed a large 9.0x8.2x4.2cm hypoechoic mass in the placenta with blood flow to it, suspicious of placenta chorioangioma, and polyhydramnios of amniotic fluid index of 37.8cm. Fetal biometry and fetal Doppler indices were within normal limits; there was no cardiomegaly, pericardial effusion nor fetal hydrops observed. Patient developed premature rupture of membranes at 26 weeks, and was managed conservatively. Antenatal corticosteroids and magnesium sulphate for fetal lung maturity and fetal neuroprotection were given. She underwent therapeutic amnioreduction of removing 3 liters of clear amniotic fluid. However, overnight she developed acute desaturation with tachypnoea secondary to fluid overload.

Results

The patient underwent emergency caesarean section for mirror syndrome at 26⁺¹ weeks. The neonate was born with good Apgar scores but was admitted to intensive care unit in view of severe prematurity. The patient herself made an uneventful recovery postoperatively. Histopathology confirmed the placental chorioangioma.

Conclusion

The potential complications arising from chorioangioma are not confined solely to perinatal morbidity but also associated with serious maternal morbidity – polyhydramnios, preterm labour and importantly maternal compromise. Mirror syndrome must be considered as a differential when there is clinical deterioration in the mother and would be an indication for delivery. Multidisciplinary care is important for optimal outcomes.