

Conference Abstract

DAY 2 16th September 2023 (Saturday)

POSTER

11.00 am-12.00 pm

Scientific Session 4

Anencephaly**Kimaya Kamat, Geethanjali BS, KS Rashmi, Martin A Lucas**

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Introduction: Anencephaly is a serious developmental defect of the CNS in which the brain or cranial vault are grossly malformed. It is a part of the neural tube defect spectrum, as a result of failure of its closure during the 3rd-4th week of development.

Materials and method size: A female aged 23 years with a gestational age of 14 weeks and 2 days presented to the department of OBG at CDSIMER on 16/01/2023 with complaints of per vaginal bleeding, abdominal pain and amenorrhea for the past 3½ months, And 2 year history of hypothyroidism. Reason of admission was G2A1 foetal expulsion.

Obstetric and menstrual history: A1:2½ months (D&E performed) G2:Present pregnancy LMP:25/09/2022
Results and findings: Per abdominal examination-uterus 14-16 weeks P/V-cervix closed and unaffected USG performed on 9/1/23- SLIUF (13+3 weeks) Acrania / excencephaly- expulsion of male baby, death Weight of 40 gms

Discussion: variable presentation-meroanencephaly, holooanencephaly, craniorachischisis. incidence of anencephaly in India is 2.1/1000 births and since most of these pregnancies result in still birth the prevalence if seen result in death within 2-3 hours after birth. Cause is multifactorial and could be genetic or environmental

Conclusion: Anencephaly can be identified at 12 to 13 weeks of gestation by transvaginal USG and nuchal translucency. This becomes necessary for early termination of an otherwise fatal continuation of pregnancy for the mother.

Keywords: Acrania, excencephaly, meroanencephaly, holooanencephaly, craniorachischisis