

Picture Stories

A case of fetal cholelithiasis

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Sri Lanka Journal of Child Health, 2015; 44(3): 174-175

(Key Words: fetal gallbladder microlithiasis)

Case report

We report a case of fetal cholelithiasis detected at 37 weeks gestation in a 28 year old primigravida on antenatal ultrasonography (USG). It was a singleton pregnancy with normal liquor volume and no detectable structural anomaly in the fetus. There was no increase in nuchal translucency or abdominal wall

defects. The baby was delivered at 38 weeks by caesarean section done for fetal distress on 21st March 2014. The postnatal period was uneventful. The baby received vitamin K injection on the first day of life and was exclusively breast fed. A postnatal USG on the 5th day of life showed persistence of micro-calculi in the gall-bladder (Figure 1).

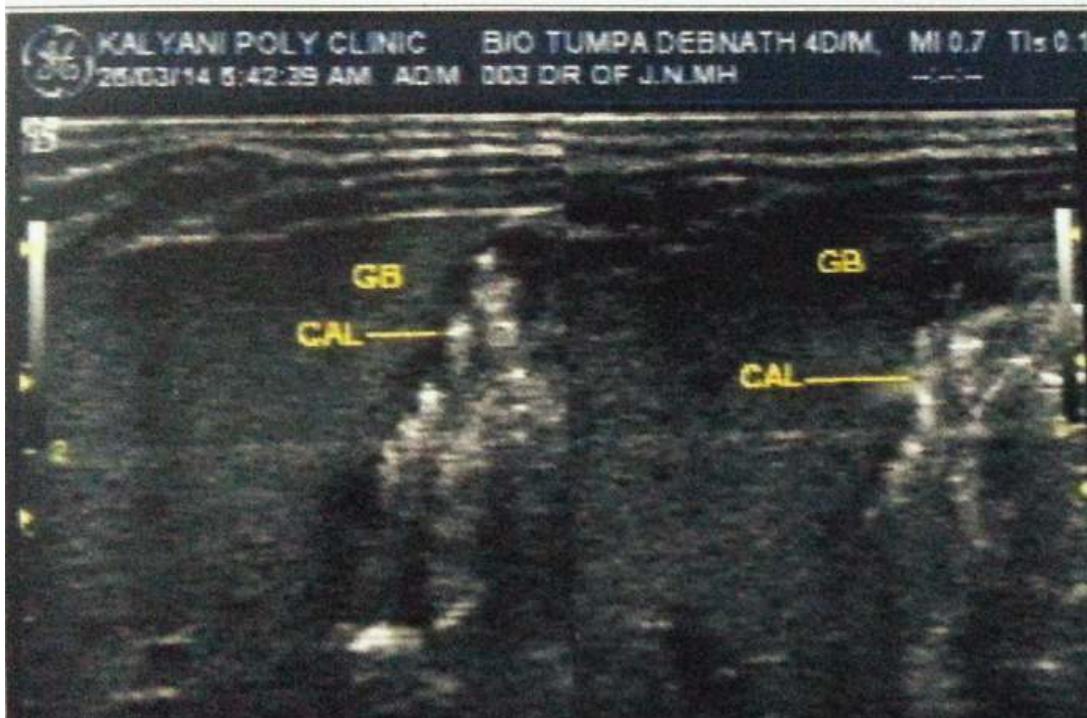


Figure 1: Post-natal ultrasonogram showing micro-calculi in the gallbladder

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(Received on 21 May 2014: Accepted after revision on 22 August 2014)

The baby was discharged home with advice to come for follow-up. A 5 month follow up ultrasonogram done in August 2014 showed disappearance of the gallbladder calculi as shown in Figure 2.



Figure 2: Five month follow up ultrasonogram

Discussion

Although the prenatal diagnosis of fetal gallstones has been described in the literature, fetal cholelithiasis is an uncommon finding¹. The fetal gallstones are often diagnosed on sonograms, by identifying the typical shape and location of the echogenicity². The occurrence of fetal gallstones has been reported among siblings³. The significance and natural history of fetal cholelithiasis is not yet well defined. However Munjuluri N et al. reported 2 cases which resolved within 16 weeks following birth. Both infants however were treated with ursodeoxycholic acid⁴. Cancho Candela R et al. carried out a prospective study of ultrasonographic examination of 9235 fetuses in the third trimester of gestation⁵. Perinatal data was collected. Postnatal ultrasonography was performed in identified cases. Fetal biliary echogenic material was found in one out of every 200 fetuses. No relationship was found with perinatal abnormalities. In further follow-up examinations, ultrasound studies were normal⁵. The prognosis of fetal gallstones is thus favourable. In our patient no treatment was given but the gallstones were no longer visible on the 5 month follow up ultrasonogram indicating spontaneous resolution.

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