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Counseling for mothers that their fetus had isolated choroid plexus cyst at prenatal sonography

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Background: The aim of this study was to determine the outcome of isolated fetal choroid plexus cyst (CPC) to provide proper counseling for patients.

Method: This cross-sectional descriptive study was carried out using the archive of Royan Institute in Tehran, Iran, between April 2009 and December 2012. Overall, 6240 prenatal screening sonographies were performed in our imaging department during this period, and isolated CPC was detected in 64 fetuses. Mother serum screening tests, fetal echocardiography and amniocentesis were evaluated in patients with isolated CPC. A follow-up phone call was made to all individuals to learn about the neonatal outcomes. Data was analyzed by SPSS16 using descriptive statistics.

Results: A total of 6240 pregnancies were assessed and isolated CPC was present in 64 cases. Results of double test (N=30), triple test (N=5) and fetal echocardiography (N=24) were normal in these cases. Quadruple test result showed 3 abnormal out of 29 mothers that all had normal karyotypes. During the research, four samples were dropped out due to preterm birth (PB) (N=3) and intrauterine fetal death (IUFD) (N=1). In all remaining fetuses (N=60) we found that neonatal outcomes were normal and no anomaly was seen right after birth.

Conclusion: Our findings indicated that isolated CPC is a benign regressive condition with no clinical significance. Therefore, to consult parents, midwives can inform them about absolute regression of the cyst by 25-28th week of gestation. Mothers can get assured of their fetus health, particularly when mother serum screening is negative.

Keywords: fetus, anomaly, Choroid Plexus Cyst (CPC), sonography, counseling