

THE VALUE OF MAGNETIC RESONANCE IMAGING (MR) AND OTHER ANCILLARY INVESTIGATIONS IN THE FETAL POST-MORTEM.

Aim. To assess the value of ancillary investigations in the fetal PM.

Methods. A review of the PM, x-ray, cytogenetics, culture and MR of 100 fetuses. The PM and MR were graded 0-4 for quality; the x-ray, cytology and culture were graded 0-2 for impact on diagnosis.

Results. These were analysed according to the MR quality .

Very poor quality n=3. PM and MR provided identical information in 2 cases, PM provided more information on 1 case. Poor quality : n=11. In 7 cases the MR and PM were in 100% agreement (in 1 case placental information was needed for cause of death). 2 cases MR was superior , 1 case PM was superior, and 1 case was a limited PM. Cytogenetics was essential in 2 cases. Moderate quality: n=37. In 24 cases MR and PM agreed (but placental information was relevant in 5, histology in 2, x-ray in 1 and cytogenetics in 3), 8 cases MR provided more information , 1 case PM provided more information (missed diagnosis on MR, agenesis of the corpus callosum), 4 cases limited PM. Good quality : n=36. MR and PM agreed in 13 cases (but placenta essential in 4, complete PM in 2 and cytogenetics in 2). MR provided more information in 11 cases (but placenta essential in 1 and cytogenetics in 1). PM superior in 6 cases, limited PM in 6 cases. Excellent quality: n=13. In 8 cases the MR and PM were in agreement (cultures were essential in 1 case). In 3 cases MR provided additional information (cytogenetics was essential in 1 case) and in 2 cases the PM information was superior. **Conclusion.** The ancillary investigations to the PM are sometimes essential for accurate description of the abnormality and cause of death. MR provided macroscopic information useful in addition to full PM in this cohort in 24/100 cases HOWEVER if MR was the only investigation essential information would have been lost in 17/24 (71%) where cytogenetics, culture or placental information was essential. Cultures were essential in 2 cases, x-ray in 2 cases and cytogenetics in 9 cases.

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