Late third trimester diagnosis of a congenital haemangioma: a case report

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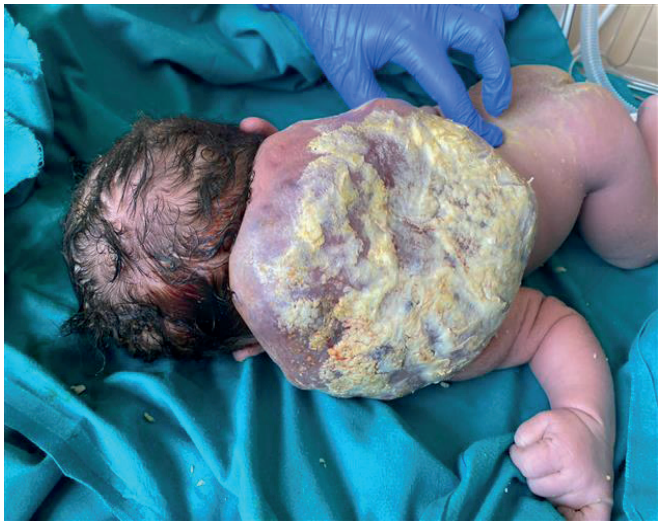
Objective. We present the case of a child born with a voluminous rapidly involving congenital hemangioma on the back side of the neck.
Materials and Methods. The mother was 36 years old and had a non eventful personal history. The pregnancy was uneventful and her routine ultrasound scan showed no fetal abnormalities. She referred to hospital for contractions at 40 weeks. At the admission ultrasound, a voluminous soft tissue lesion measuring 14 × 15 cm was detected on the posterior side of the neck. The mass had a predominantly cystic appearance and was highly vascularized. Due to the risk of labour dystocia an uncomplicated caesarean section was performed. A healthy male weighting 4515 g and hemodynamically stable was delivered.
Results. The presence of a congenital hemangioma was confirmed but a blood sample showed severe anemia and thrombocytopenia that required several transfusions of blood, plasma, platelets and clotting factors. Due to the association of congenital haemangioma and thrombocytopenia a diagnosis of Kasabach-Merritt syndrome was made. Despite treatment with steroids and acetilsalicilic acid and subsequent sclero-embolization of the lesion, only partial reduction of the mass was obtained. Subsequently, the lesion was removed by surgery and a histological examination confirmed RICH's diagnostic hypothesis. After surgery, the child's conditions improved rapidly, he was finally discharged at 7 months in good conditions.



Conclusions. The Kasabach-Merrit syndrome is a rare condition whose prenatal diagnosis is rare. We describe the case of a rapidly evolving congenital hemangiomas in the late third trimester that highlights the importance of performing an admission ultrasound before labor.