

lence of LBW in Babol Mazandran (a north state) IRAN 1998.

Methods: This research was designed for limited span of time (cross-sectional), 3695 cases of neonates from all deliveries of Babol were selected in first 10 months of 1998. The data were collected by measuring the birth weight and interviewing the mothers, statistical analysis was done by SPSS software.

Results: The ratio of LBW was 7.44%. 61.6% were preterm and 38.4% SGA. Birth weight of 244 (88%) were between 1500-2500g, 19(6.9%) 1000-1499g, 6(2.8%) 750-999g and 6(2.8%) less than 750g. 50% of neonates was born from first pregnancy. Age of 9.8% of mothers were less than 18 years old, 82% between 18-35 and 8.2% more than 35 years old.

Conclusion: Prenatal education and regular antenatal visit for detection and prevention of preterm labor reduce the prevalence of LBW in my country like to the developed countries.

FCP165

ANTENATAL DIAGNOSIS AND PROGNOSIS OF CONJOINED TWINS: CASE REPORT

Çelik E., Şen C., Vural A., Kepkep K., *University of Istanbul, Cerrahpasa Medical School, Department of Perinatology, Obstetric and Gynecology, Istanbul - Turkey*

In this report, two conjoined twin cases that were diagnosed at 19 th and 25 th week of gestational age are reported. First case was made termination of pregnancy because of the very poor outcome. Second case continued to carry the pregnancy after given counselling for the possibility of successful separation procedure with good outcome after birth. The neonates were delivered at 38th weeks of gestation and had separation procedure at 10th month of age without any complication. In selected cases, there is no need to make abortion because of the possibility of successful separation procedure after birth with good prognosis. Colour Doppler ultrasound examination in early stage of pregnancy in conjoined twin can make it possible to decide which cases are candidate for successful separation procedure after birth.

FCP166

PRENATAL DIAGNOSIS AND MANAGEMENT OF THE ANEURYSM OF THE VEIN OF GALEN.

A CASE REPORT

Salıhoğlu F., Körbeyli B., Tuştaş E., Şimşek Y., Şen C., *University of Istanbul, Cerrahpasa Medical School, Department of Perinatology, Obstetric and Gynecology, Istanbul - Turkey*

Background: "Aneurysm of the vein of Galen" encompasses a range of different midline arteriovenous fistula malformations. Prenatal Doppler sonography may contribute to the differential diagnosis of fetal cystic lesions of various origins. We describe a case of aneurysm of the vein of Galen which was detected as a cerebral cystic lesion prenatally. Diagnosis was incomplete as Doppler sonography has not been used.

Case Report: A cystic cerebral lesion, dilated third ventricle and cardiomegaly were identified by ultrasonography in a fetus at 32 weeks gestation. A 4600g male infant was delivered at 41 weeks gestation with cesarean section because of cephalopelvic dysproportion. Cranial Doppler sonography revealed dilated third ventricle and aneurysm of the vein of Galen at the midline posterior to the third ventricle. Cranial magnetic resonance imaging showed severe neural parenchymal destruction in both hemispheres, additionally. Echocardiography revealed pathologies secondary to increased hemodynamic load. Postnatal management included transarterial embolization of the vessels feeding the aneurysm after angiography, by radiologists. The infant has grown appropriately at four months of age with no problems.

Conclusion: Prenatal diagnosis of aneurysm of the vein of Galen is possible with real-time ultrasonography, pulsed wave Doppler, color-velocity imaging and magnetic resonance imaging. Identification of this condition should prompt close follow-up of the pregnancy. Careful obstetric management and early postnatal intervention may lead to a favorable outcome. This case demonstrates that Doppler sonography is crucial for evaluation of fetal cystic lesions in the brain.

Key Words: Aneurysm of the vein of Galen, Prenatal diagnosis, Doppler sonography.