1	NEURAL AXIS
	Michelle Wilson Ed.D, RDMS, RDCS
	I
2	ALPHAFETOPROTEIN (AFP)
	●Protein formed by:
	■Yolk sac
	■Fetal liver
	Excreted in fetal urine into amniotic fluid
	©Crosses placenta to enter maternal serum
	Maternal serum AFP (MSAFP) The part of the p
	Reported in multiples of the median (MoM)In the setting of >MSAFP and normal US
	Associated with IUGR
_	
3	ANENCEPHALY
	Acrania Fortal avanial harman not forward.
	Fetal cranial bones not formedExencephaly
	■Brain tissue outside the skull
	Anencephaly
	■Fetal skull ends above the orbits
	■Brain tissue has eroded away by 2 nd trimester
	OFrogs Eyes image noted sonographically
4	Cephalocele/Encephalocele
2	Bony defect in the cranial vault
	Sac composed of dura mater protrudes
	OSac may only contain CSF-occipital meningocele
	• Has better prognosis
	■Typically occiput
	■Poor prognosis
	●Usually isolated
	<u>-</u>
5	AGENESIS OF CORPUS CALLOSUM
	©Corpus callosum-bundle of nerve fibers connecting two cerebral hemispheres
	Identified in midline coronal and midline sagittal sections
	Immediately anterior to body of lateral ventricles
_	■Lateral ventricles take on a "Tear Drop" shape
6	HYDRANCEPHALY
	Absence of cerebral hemispheres

- Due to bilateral carotid occlusion
- Sonographically
 - Cranial vault filled with fluid
 - Lateral aspect locate Sylvian fissure
 - OCerebral artery still intact
 - Brain tissue only seen in the occipital region

7 HOLOPROSENCEPHALY

- Incomplete division of forebrain
 - ■Alobar
 - OMost severe
 - OSingle ventricle
 - OFused thalami
 - ■Semilobar
 - OPartial division of the forebrain
 - OPartial fusion of the thalami
 - **■**Lobar
 - OLeast severe
 - OAbsent cavum septum pellucidum
 - ONormal ventricles and thalami
 - OTough to detect prenatally
 - 0

8 Hydrocephaly and Ventriculomegaly

- 1 Ventriculomegaly
 - ■Posterior horn > 10mm
 - ■Head normal in size
 - Hydrocephaly
 - ■Dilated ventricular system
 - ■Head larger than expected for dates
 - ■Noncommunicating
 - ODbstruction from within
 - **■**Communicating
 - OObstruction from outside ventricular system

9 Aquaductal Stenosis

- ●Obstruction, atresia, or stenosis of the aqueduct of Sylvius
 - Causing ventriculomegaly or hydrocephaly
- •Connects third and fourth ventricles, located in the midbrain

10 Choroid Plexus Cyst

Ocystic structure(s) within the choroid plexus

⊙Can be:

- Unilateral or bilateral
- Small or large
- Solitary or multiple
- Unilocular or multilocular

11 MICROCEPHALY

- Small brain enclosed within a small head
- •Most infants with severe microcephaly die shortly after birth
- - ■Viral infections
 - ■Drugs/alcohol
 - Autosomal recessive mode of inheritance
 - ■Idiopathic
- Must do serial measurements
 - May be difficult to diagnose-depending on severity

12 PORENCEPHALIC CYST

- Ocyst in the cerebral hemisphere
- Results from liquefaction of an intracranial hemorrhage
- Cause
- Hypoxic rupture of small vessels of germinal matrix
- Typically single and unilateral

13 SCHIZENCEPHALY

- Ocleft in the cerebral cortex
- - ■Unilateral or bilateral
 - ■Open
 - OExtend through to the calvarium
 - Closed
 - OA lip of gray matter is noted proximal to the skull

14 Vein of Galen Aneurysm

- •Rare arterial venous malformation
- Midline, intracranial lesion
 - Anechoic
 - High volume of flow with Doppler

15 ABNORMALITIES OF POSTERIOR FOSSA

- Dandy-Walker Malformation
 - ■Posterior fossa cyst

- Hypoplastic or absent cerebellar vermis
- ■Look for cerebellar splaying of the lobes
- Dandy-Walker Variant
 - ■Anterior displacement of the vermis by posterior fossa cyst
 - Absence of cerebellar abnormalities
- Both can have ventriculomegaly

16 SPINA BIFIDA

- Failure of neural tube closure
- Absence of skin covering the defect
- OClosed
 - ■Skin covering defect, but outpouching still occurring
 - ■Often have tuft of hair or dimple
 - ■Spina bifida occulta

17 SPINA BIFIDA-LEMON AND BANANA SIGN

- 1 Associated with open spina bifida
 - Lemon sign
 - ■Abnormal scalloping of the frontal bones
 - More angular appearance to the front of the skull
 - Banana sign
 - ■Crescent shaped cerebellum
 - ■Small transcerebellar diameter
 - ■Small cisterna magna

18 Arnold Chiari Malformation

- •Cerebellar tonsils located below the foramen magnum
- Various forms of malformation
 - ■Type I
 - OMost simple
 - OJust tonsils herniate
 - ■Type II
 - OParts of brain deformed
 - OCerebellum and brain stem displaced
 - ■Type II
 - OMost complex
 - OHindbrain displaced
 - Often see encephaloceles
- •
- •

19 ABNORMALITIES IN THE SHAPE OF THE FETAL SKULL
Dolicocephaly
■Long narrow head
■Skull sutures fuse prematurely
■Can get:
⊙ "Strawberry Sign"
⊙ "Clover leaf Sign"
•Don't forget to include the cephalic index with the normal head biometric measurements
20 SACRAL AGENESIS-CAUDAL REGRESSION SYNDROME
•Ranges in severity from absence of the sacrum with short femurs to complete fusion of the lower limbs
■Sirenomelia or mermaid syndrome
Seen almost exclusively in infants born to diabetic mothers
21 Conclusion
Spina Bifida/ Arnold Chiari malformation
Dandy-Walker Malformation/Variant
Agenesis of the Corpus Callosum
Hydranencephaly
Schizencephaly
•Ventriculomegaly/Hydrocephaly
■ Aqueductal Stenosis
■ Choroid Plexus Cyst
Porencephalic Cyst
Microcephaly
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