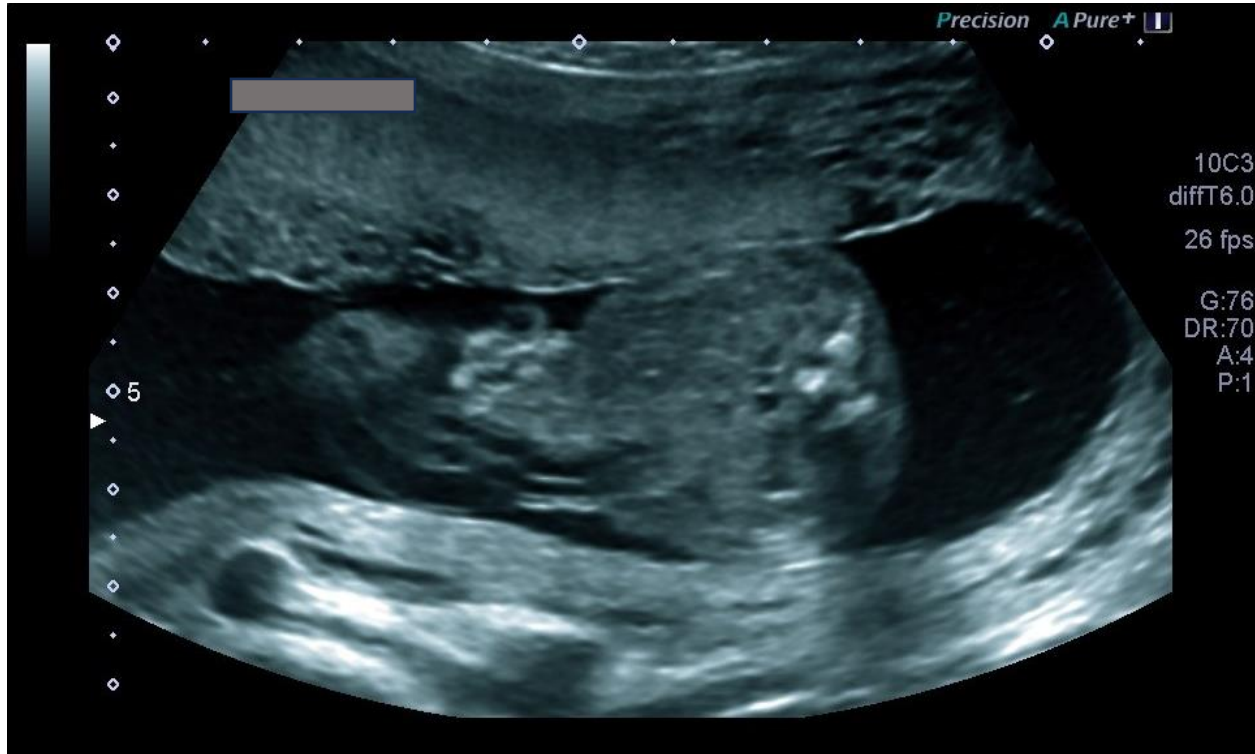


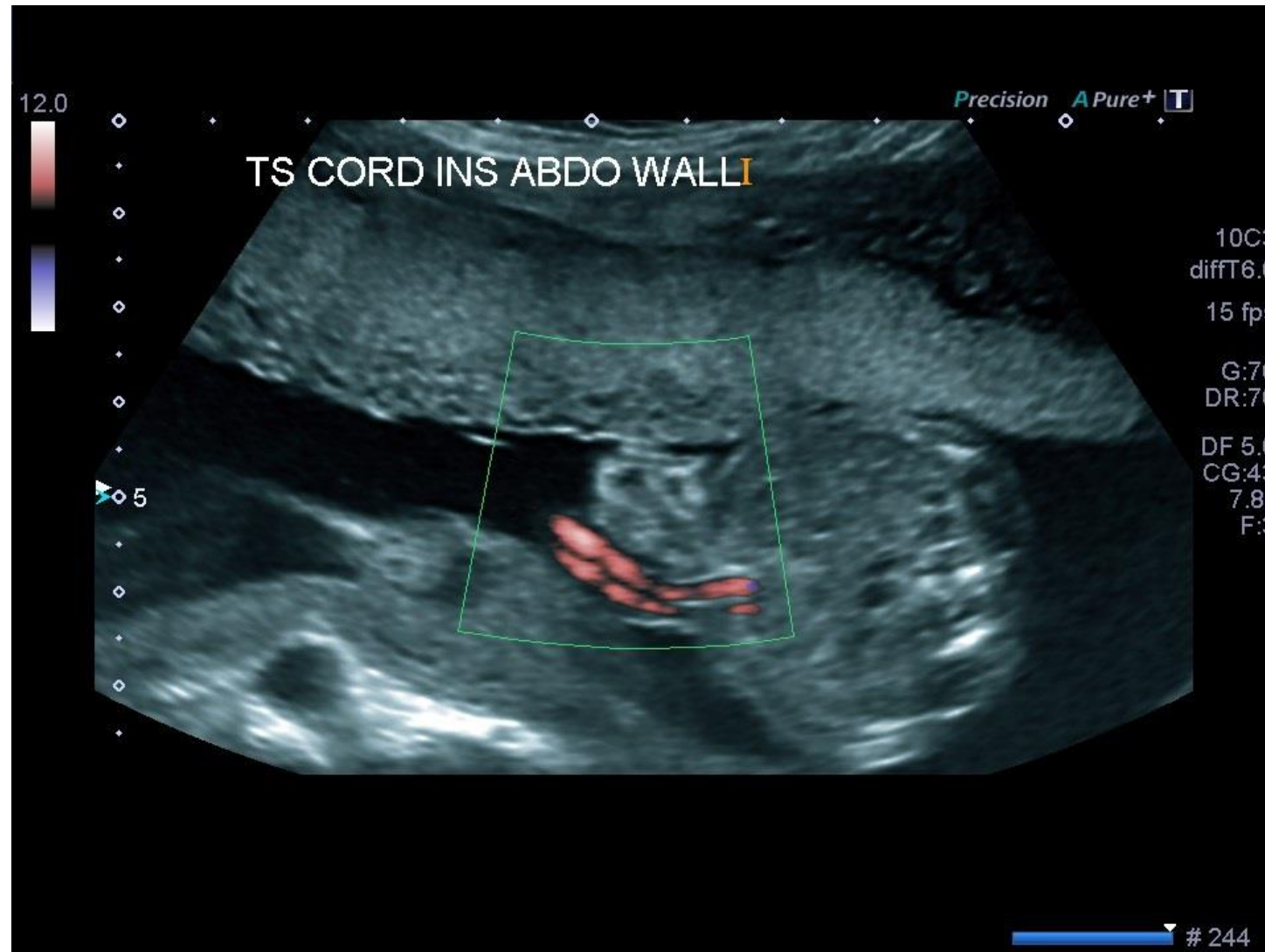
# Obstetric Case 11

## November 2023

26 y/o female  
20 week anomaly scan







Please consider the following questions:

1. What abnormality is present in the fetus?
2. Write a report for this abnormality
3. What is the required care for this baby when born?
4. Are there associated chromosomal conditions?

Do not progress to next slide until you have attempted to answer the previous questions.

## Question 1

Gastroschisis

## Question 2

There is an abdominal wall defect to the right of the cord which does not involve the cord. The bowel is free floating and not contained within a sac.

## Question 3

Delivery recommended in a tertiary centre with specialists able to perform postnatal surgery

## Question 4

No

On identifying gastroschisis, regular antenatal ultrasound scans are needed to:

- 1) Assess growth and amniotic fluid, as polyhydramnios may be a sign of bowel narrowing
- 2) Assess the condition of the bowel as gastroschisis does not resolve in utero. In fact, gastroschisis that appears to be improving is actually a worrying feature

MDT meetings involving paediatricians and paediatric surgeons are needed to plan postnatal care including access to the intensive care unit, method of feeding and the type of feed. There is no contraindication to vaginal delivery based on gastroschisis alone

Gastroschisis is often isolated and with no associated chromosomal problems

Survival rate is generally good but it largely depends on bowel condition at birth. Around 25% of babies will have some bowel-related problems as the amniotic fluid can cause bowel damage