

Double aortic lesion in the fetus

Doble lesión aórtica en el feto

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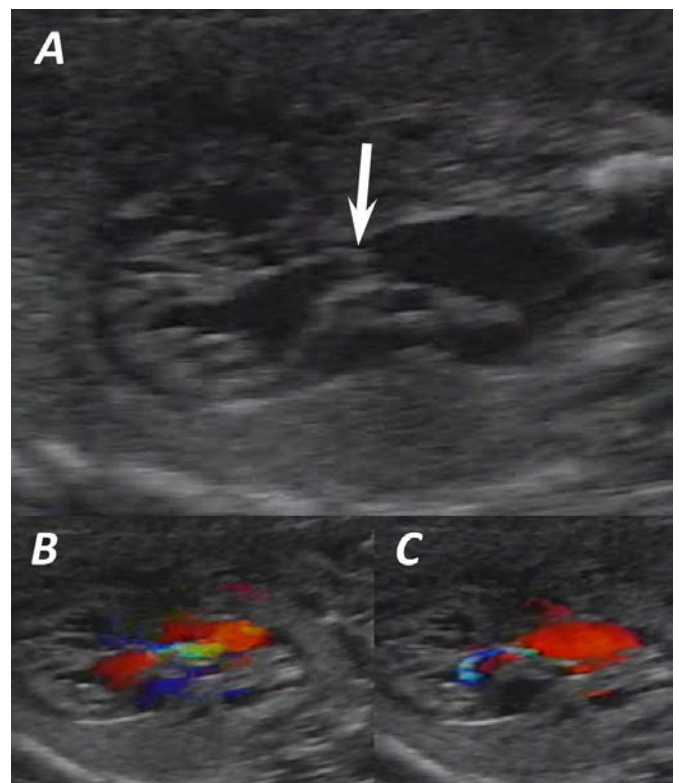
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A 24 weeks pregnant woman, first pregnancy, without obstetrical risk, was sent to the National Reference Center for diagnosing congenital heart disease, for a suspicion of a structural alteration of the fetal heart. A fetal echocardiogram was carried out and the presence of a thickened aortic valve, with limitations in the opening (**Panel A**, the arrow indicates the aortic valve) was perceived when observing the long axis of the left ventricle. This image led to think about the possibility of an aortic stenosis, which was observed by using the color Doppler superimposed to the bidimensional image, where the presence of turbulent flow in systole (**Panel B**) could be seen, accompanied by a retrograde flow in diastole, which also indicated the presence of an aortic insufficiency (**Panel C**). After delivery, the double valve lesion in question was confirmed, with predominance of insufficiency, not a frequent illness in a newborn.

An aortic insufficiency is rarely identified in the fetus without pathological implications, but monitor-



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ing is recommended to exclude the subsequent development of an aortic valve disease. The presence of severe aortic insufficiency is characteristic of a rare disease of the tunnel between the aorta and the left ventricle, where the regurgitation surrounds

the valve rather than going through it, as it goes through a similar communication to a tunnel between the ascending aorta and the left ventricle, above the level of the Valsalva sinus.