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Fetal and postnatal echocardiographic diagnosis of the aortopulmonary window

Diagnóstico ecocardiográfico fetal y posnatal de la ventana aortopulmonar

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With the consent of the couple, the clinical case of a 35-year-old patient with early pregnancy assistance and gestational age of 31 weeks was presented, which was classified as a high genetic risk due to a history of two previous fetuses with congenital heart disease (one with the tetralogy of Fallot and the other with univentricular heart). She was referred to the national reference center for the prenatal diagnosis of congenital heart defects due to suspicion of a cardiac defect (dilated aortic arch), confirmed by the view of the three vessels in the research ultrasound. The essential moment for diagnosis was the complete view of the three vessels, where, from the clas-

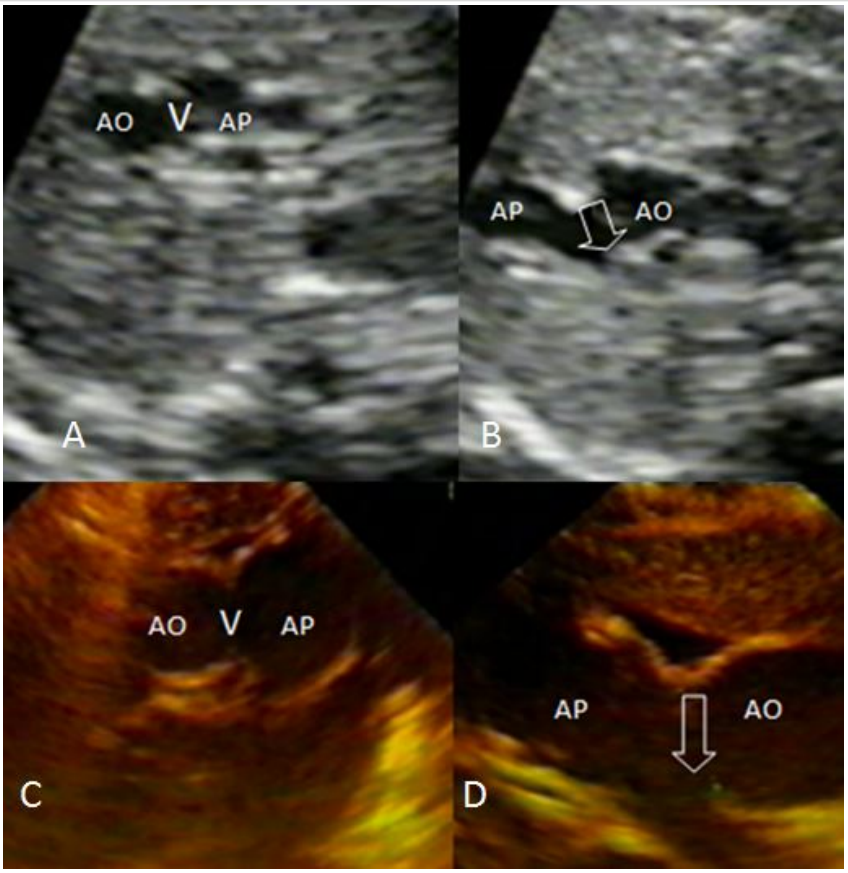

Figure 1

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sic view with previous movements of the transducer, a direct communication between the aorta and the pulmonary artery was displayed, well distal for both of them (**Figure 1, A y B**. AO, aorta; AP, pulmonary artery, V, window). Furthermore, there was observed the presence of an aortic arch to the right and an innominate vein that did not have its usual position but, which was oriented in infra-aortic position to the right superior vena cava. The child was born through a cesarean section at 39.5 weeks, without complications; with weight of 3400 grams, size of 49 cm and an Apgar of 9/9. At 5 days, the child was sent to the national reference center, where the disease was confirmed through echocardiographic studies (**Figure 1, C y D**) and computed tomography angiography (**Figure 2**), and later, the defect was corrected through surgical treatment with excellent results.

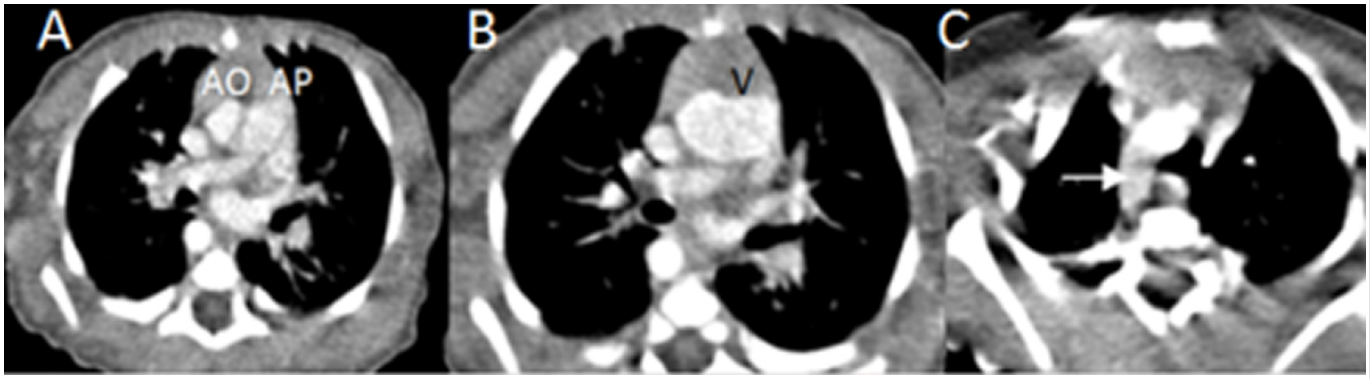

Figure 2