Fetal Sacrococcygeal Teratoma
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History
28 year old female with fetal pelvic mass on prenatal US.

Diagnosis
Fetal Sacrococcygeal Teratoma

Discussion
Sacrococcygeal teratoma is the most common tumor of the fetus and the neonate, with a reported incidence of one in 35,000 to 40,000 live births. Malignant degeneration, the primary cause of death in postnatal sacrococcygeal teratoma, is rare in utero. The high mortality rate of fetal sacrococcygeal teratoma is attributed to tumor mass and associated dystocia, preterm labor caused by secondary polyhydramnios, and development of hydrops and placentomegaly (secondary to high-output cardiac failure associated with arteriovenous shunting). Optimal management of fetal sacrococcygeal teratoma requires accurate imaging of the precise intrapelvic and intraabdominal extent of tumor, the content of the tumor, and the physiologic effects of tumor compression on the pelvic organs or bone structure. MRI is generally superior to sonography on all of these accounts.

Findings
MR-Sagittal FIESTA images demonstrate an exophytic and endophytic solid and cystic (predominantly cystic) pelvic mass. Note the anterior-superior displacement of the urinary bladder.

Reference
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