

Choroid Plexus Cysts

The choroid plexus is the part of the brain that makes cerebral spinal fluid. It is not the 'thinking' part of the brain. In approximately 2% of all normal babies, a tiny amount of fluid is sequestered in the choroids during development and appears as a clear cyst in the choroid of the brain by ultrasound. In the overwhelming majority of cases, the cyst(s) will resolve on their own during pregnancy and have no impact on the development or intelligence of the child.

On rare occasion, a CPC is associated with an extra copy of chromosome 18, known as Trisomy 18 or Edwards syndrome. Most fetuses with this condition have multiple birth defects that are readily identifiable by prenatal sonography. Individuals born with trisomy 18 are severely mentally and physically impaired and do not survive for an extended amount of time. Neither the size of the cysts nor the number of cysts has an influence on the risk that a fetus has trisomy 18. The cysts tend to go away regardless of whether the baby is normal or not, and cyst resolution is not helpful in the diagnosis of trisomy 18.

During the course of your ultrasound, we will evaluate your fetus in meticulous detail in order to identify birth defects or other possible markers for trisomy 18. This evaluation includes a detailed look at your baby's heart as well as extremities and is optimally performed between 18-20 weeks gestation. A detailed ultrasound will pick up at least 90% of fetuses with this condition, if not more. If no other markers or abnormalities are identified and you are at low risk based on any of the many accepted screening protocols, the risk that your baby has trisomy 18 is extremely low.

The only way to actually know for certain if a fetus has any chromosomal abnormality is by examining the chromosomes directly. At the 18-20 week gestational age window, this evaluation is done on amniotic fluid obtained by amniocentesis. Amniocentesis requires that a needle be passed into the amniotic sac to obtain fluid and carries a risk of approximately 1:300-500 of pregnancy loss.

