Fetal laryngeal obstruction

Enlarged hyperechogenic lungs with associated compression of the heart and ascites are the typical features of bilateral type III cystic adenomatoid malformation of the lungs. As reported by Choong and colleagues[1], identical features could result from laryngeal obstruction and even fetal lung biopsy could not help make the differential diagnosis. However, the association between upper airways obstruction and hyperechogenicity of the fetal lungs may help to explain the miraculous antenatal spontaneous resolution of some cases of 'cystic adenomatoid malformation'. It is possible that at least some cases of bilateral or unilateral hyperechogenicity of the lungs, diagnosed as cystic adenomatoid malformation, are due to stenosis along the bronchial tree with retention of mucoid fluid distal to the obstruction. With advancing gestation, the relative obstruction is relieved and the appearance of the lungs improves.

Harris Birthright Research Centre for Fetal Medicine
King's College School of Medicine and Dentistry
London, UK

K. NICOLAIDES

REFERENCE

1. Choong, K. K. L., Trudinger, B., Chow, C. and Osborn, R. A. (1992). Fetal laryngeal obstruction: sonographic detection. *Ultrasound Obstet. Gynecol.*, **2**, 357–9