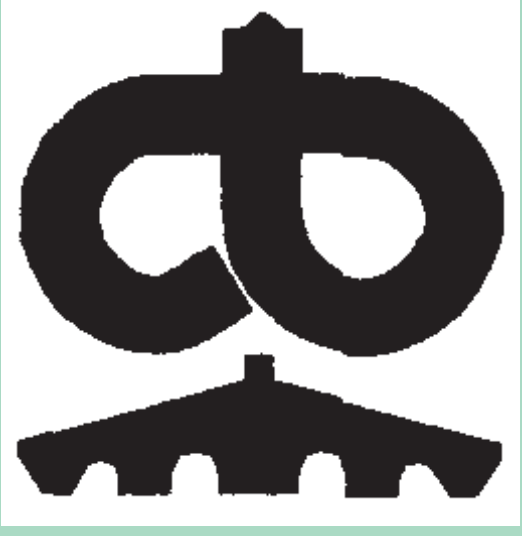


# Foetus acardius amorphous - report of two cases

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## Objectives

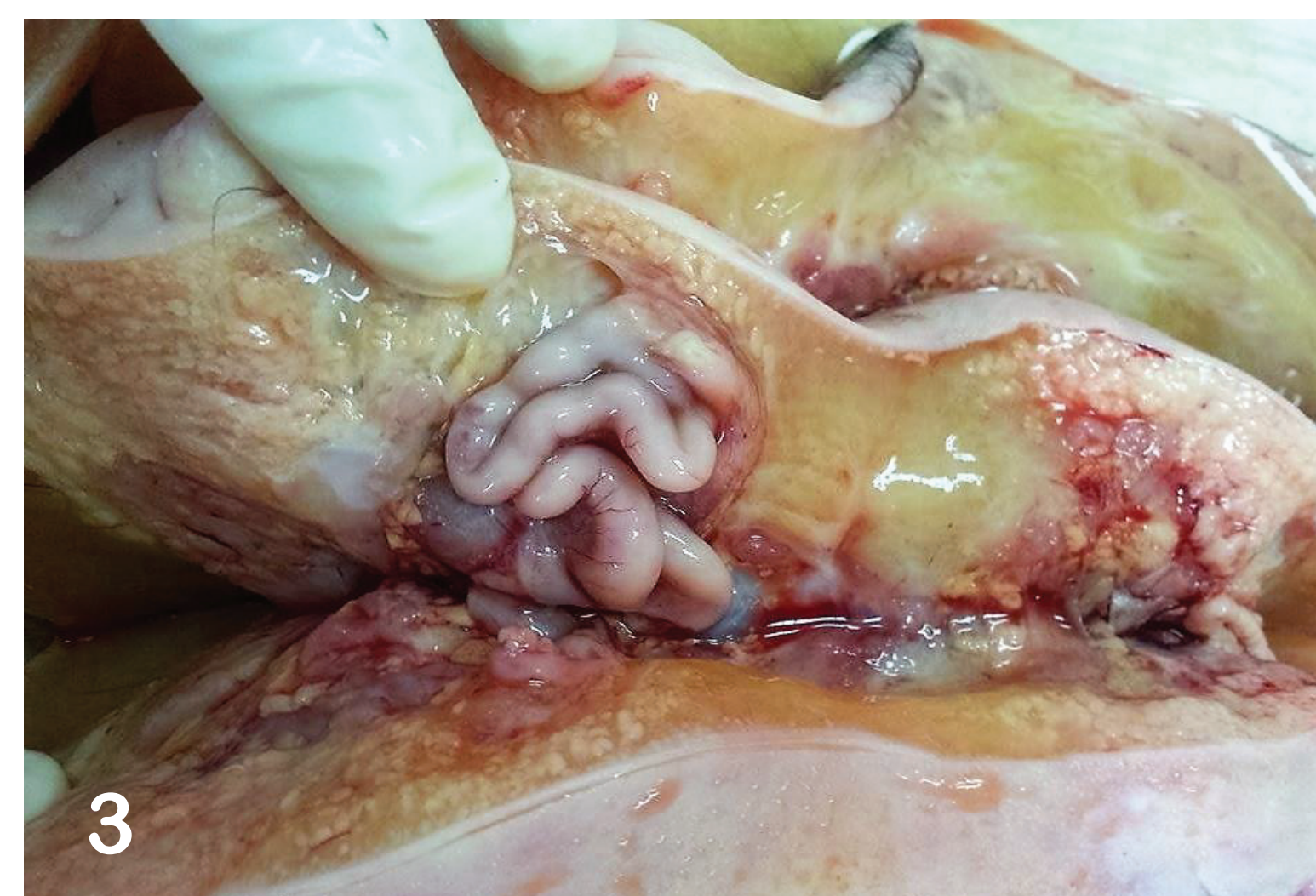
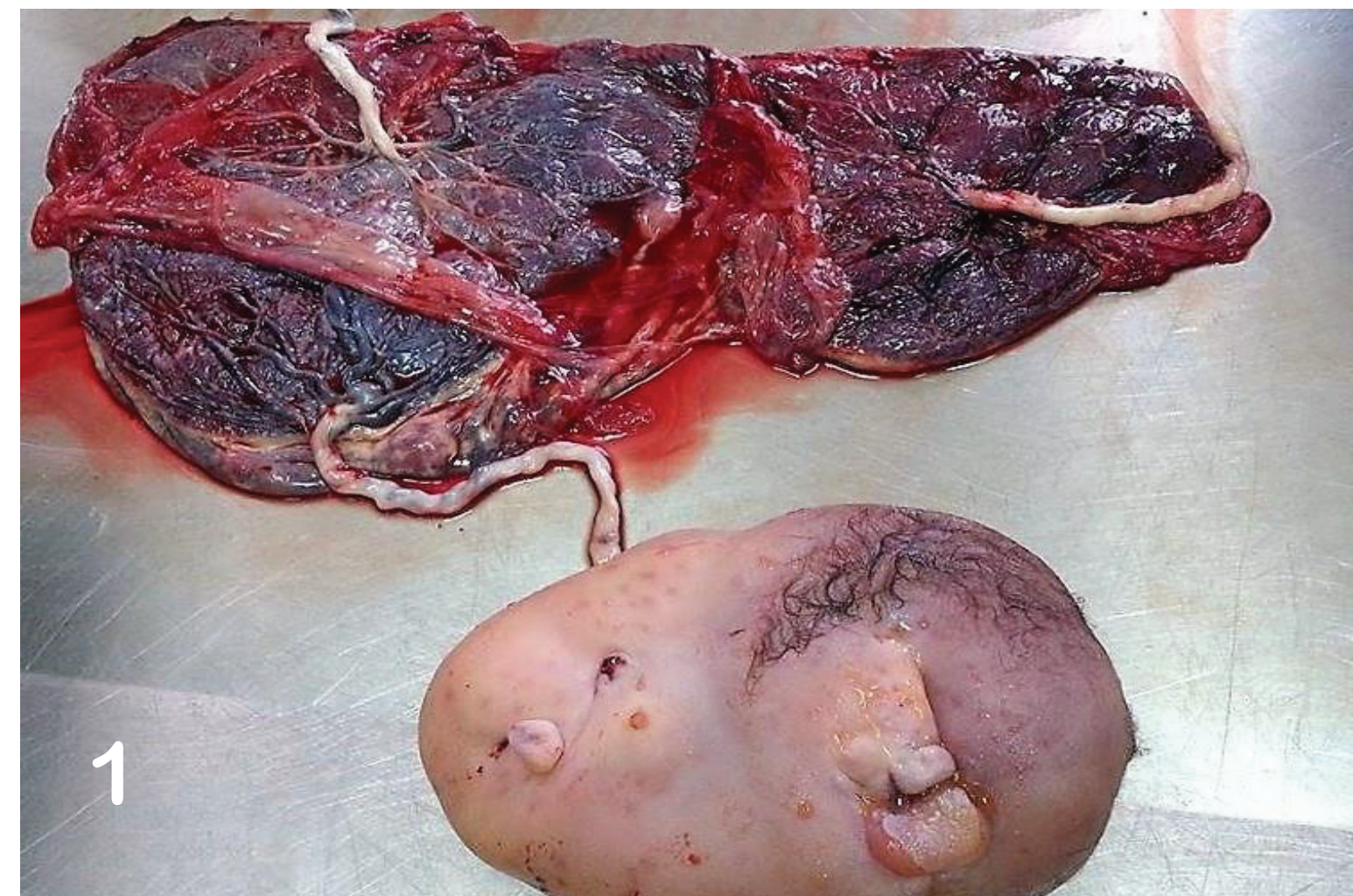
Foetus acardius amorphous is a rare congenital malformation with an incidence of 1:35000 births, which usually is a complication in multiple pregnancies. The main diagnostic dilemma is placental teratoma, a non-trophoblastic, extremely rare tumor, with only 27 cases reported in the literature. We present a case of a triplet pregnancy of a 35-year-old mother and a twin pregnancy of a 32-year-old mother.

## Methods

**Case 1.** Along with three live births, there was a teratogenic, skin-covered, oval tumor mass, weighing 1450 grams and 21x15x6 cm in size, with two epidermal buds with a diameter of 2-3 cm on the surface. On dissection, there were fatty tissue, muscle, cartilage, bone and large intestinal loops.

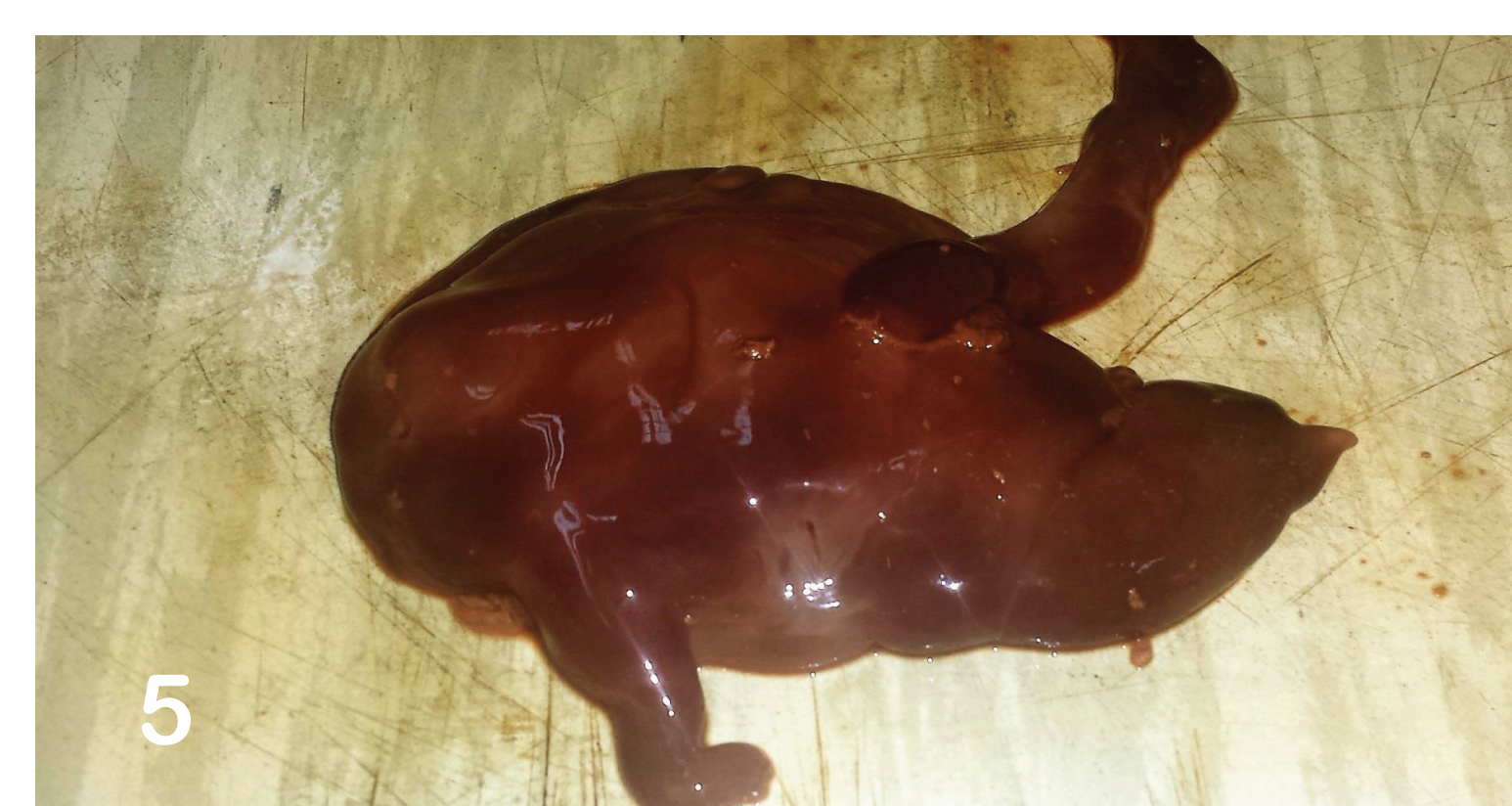
**Case 2.** Along with a stillbirth, there was an oval, skin-covered structure weighing 67 grams and diameter of 9,5 cm, with visible elongated bud, resembling a limb, at one pole. The dissection showed autolytic organoid structures and cavities.

### Case 1



Figures 1-3. Placenta and a teratogenic, skin-covered, oval tumor mass (Fig. 1), with two epidermal buds on the surface (Fig. 2). The dissection showed fatty tissue, muscle, cartilage, bone and large intestinal loops (Fig. 3).

### Case 2



Figures 4-5. Stillbirth with placenta and an oval, skin-covered structure (Fig. 4) with visible elongated bud (Fig 5). Due to progressive autolytic changes, the dissection showed graphically non-representable autolytic organoid structures and cavities.

## Results

There are a few criteria for differentiating acardiac fetus from placental teratoma: a presence of umbilical cord, skeletal structures, visible rudimentary extremities and partially developed visceral organs. On the other hand, a placental teratoma is predominantly composed of a disorganized collection of mature tissues. The gross findings and the profound dissection were crucial for the diagnosis and solved our diagnostic dilemma.

## Conclusions

There is a great overlap between these two entities and the proposed criteria are useful only in clear cases. Some authors consider them as different levels of development and differentiation of a single pathological event. Nonetheless, the clinical information for multiple gestation pregnancies is very important and helpful for diagnosing foetus acardiacus.

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