

## Obstetric Case 8

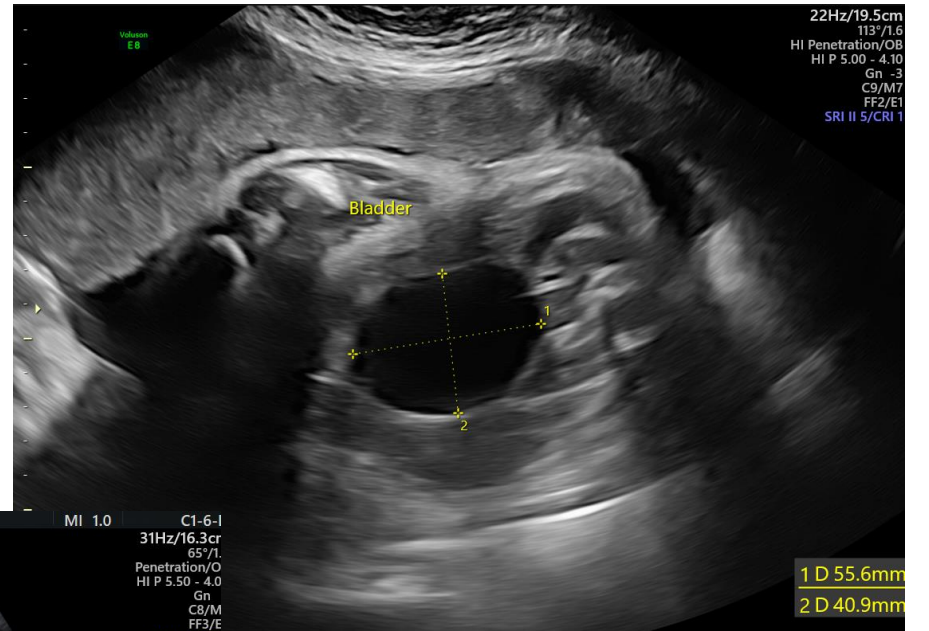
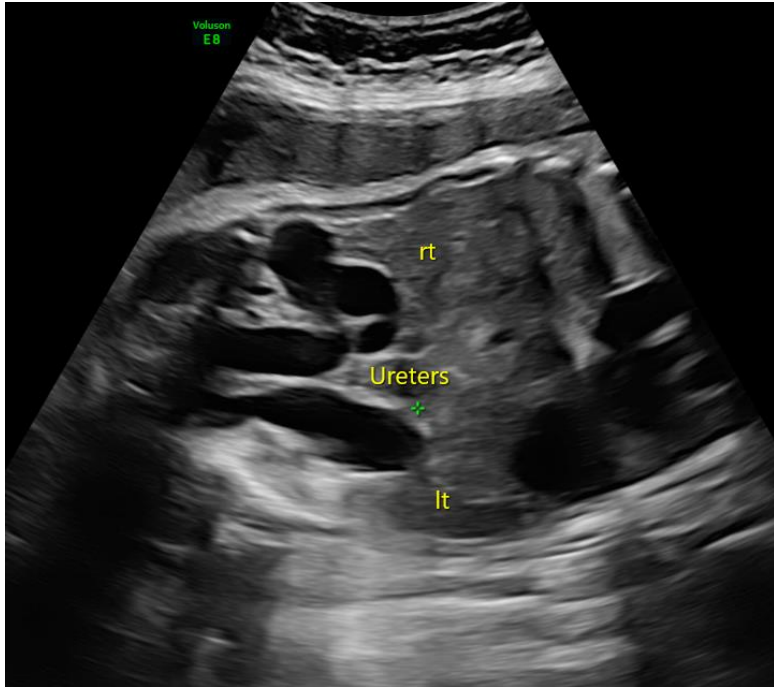
April 2023

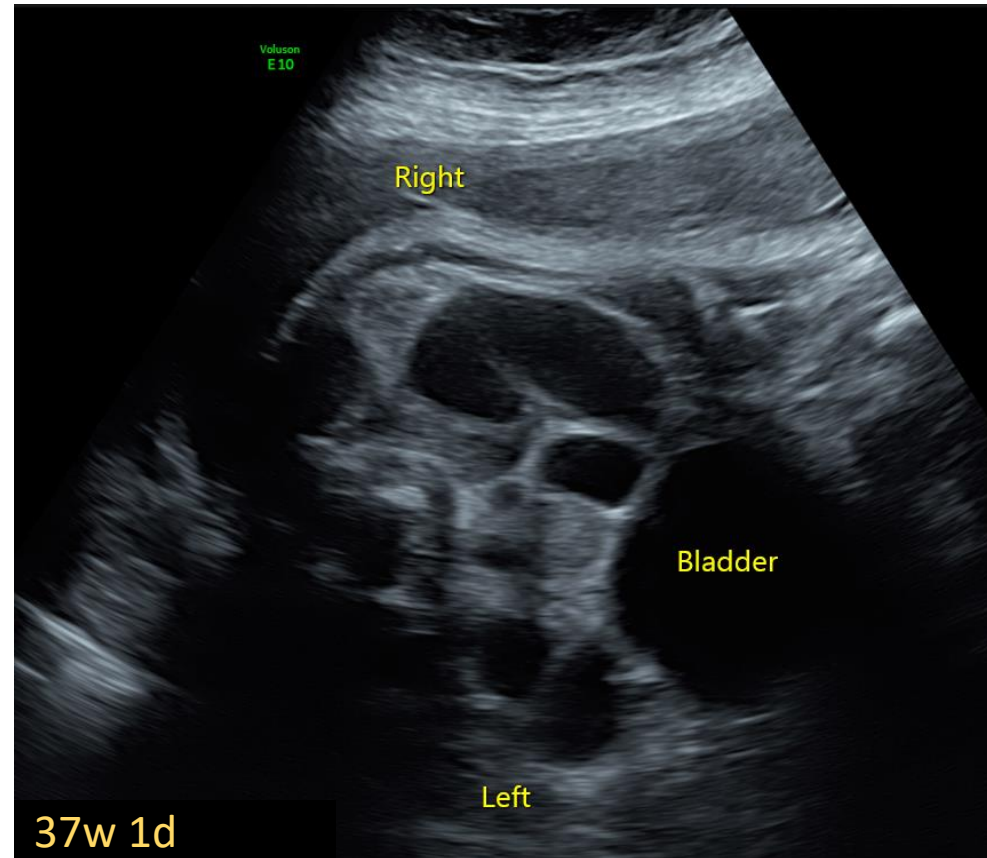
28 y/o female. G2P1 (healthy 2 year old girl)

Anomaly scan normal appearances. Male fetus.

Now growth scan at 36w requested for measuring large.

36w 1 day





Consider the following questions:

1. What abnormality is present in the fetus?
2. What may cause this condition?
3. What other testing might be recommended postnatally?

Do not progress to next slide until you have attempted to answer the previous questions.

## Question 1

Bilateral vesicoureteral reflux

## Question 2

Posterior urethral valves is a common cause in males.

Ureterocele and ureter duplication.

## Question 3

Postnatally, an ultrasound scan to assess the severity and progression of the condition.

A micturating cystourethrogram may offer additional information.

# Vesicoureteral Reflux (VUR) Fact File

- VUR is when urine flows back up to the kidney rather than out through the urethra
- It's due to faulty valves at the distal ureter
- Severity of VUR is graded 1 to 5 with 5 being the most severe
- It occurs more frequently in males
- Infants are at a greater risk of repeat urinary tract infections and may have problems urinating
- Grades 1 to 3 may be managed conservatively
- Grades 4 and 5 may require valve surgery

