

Filar Lipoma with Low Lying Conus in VACTERL Syndrome

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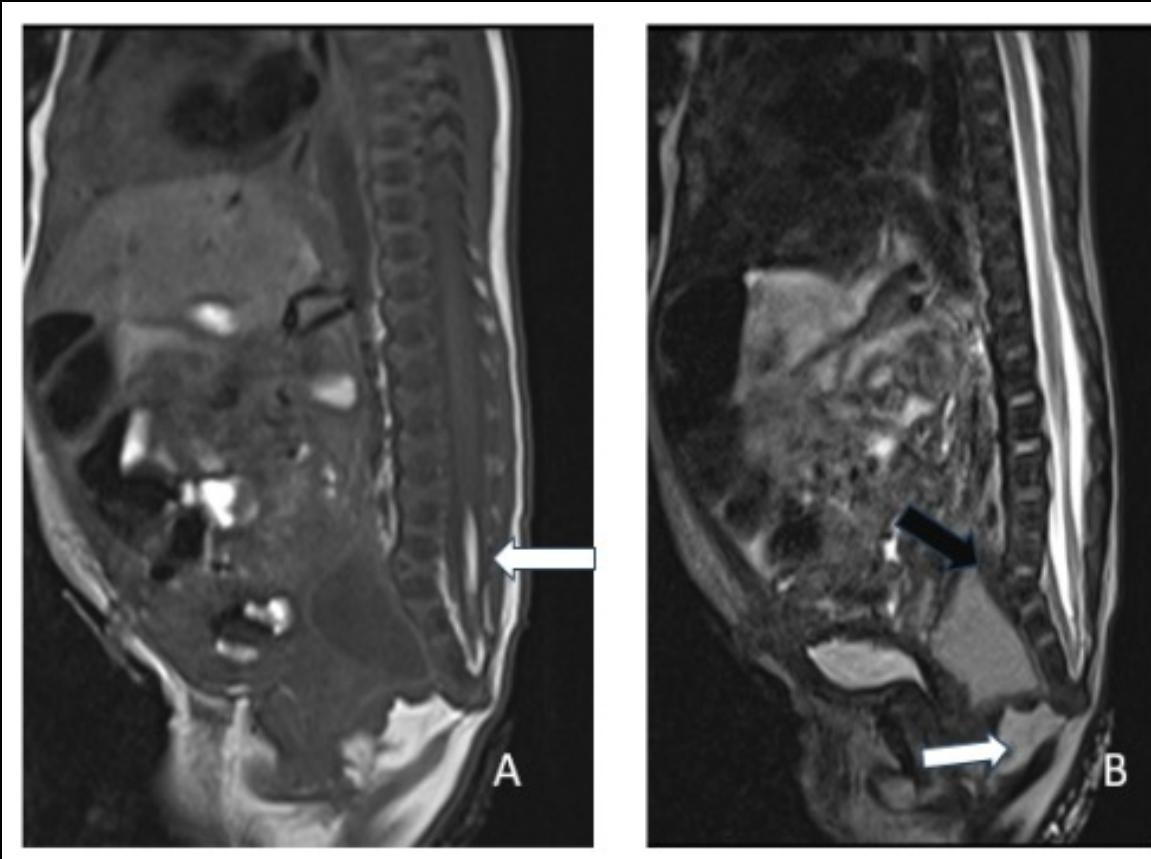
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Clinical Presentation

0 day old male born at 39w2d via C-section. He was prenatally diagnosed with left dysplastic kidney. He was found to have an imperforate anus at birth which prompted MRI spine with suspect of VACTERL syndrome.



Imaging Discussion



A. Midsagittal T1WI revealed filar lipoma measuring approximately 2.2 cm in CC dimension with low-lying conus terminating at L4-5 (arrow).

B. Block-type segmentation anomaly involving L5-S1, with hypoplasia of the distal sacrum/coccyx (black arrow). Agenesis of anal canal in midsagittal view (white arrow).

Management and Outcome

The patient underwent open divided colostomy and laparoscopic anorectoplasty. He was undergone urodynamic testing that was found to be normal.

Take Home Points

- VACTERL stands for vertebral defects, anal atresia, cardiac defects, tracheo-esophageal fistula, renal anomalies, and limb abnormalities.
- Incidence is estimated at approximately 1 in 10,000 to 1 in 40,000 live-born infants.
- Tethered cord syndrome is seen in 23% of infants with anal atresia.
- Anomalies of the vertebra includes hemivertebra, butterfly vertebra, fused segments, extra segments.

Take Home Points

- VACTERL syndrome is a complex condition that requires specialized medical attention, and each case should be managed on an individual basis.
- Imaging plays a critical role to demonstrate congenital anomalies which could be life threatening.

References

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