Ventriculomegaly

You have learned that your baby has **ventriculomegaly**. This fact sheet was designed to provide you with information about this ultrasound finding and answer the most commonly asked questions.

Fetal and adult brains have solid areas (brain matter) and compartments within them called **ventricles** that produce and circulate cerebrospinal fluid (CSF). The CSF circulates within the brain and up and down the spinal cord. The normal width of each ventricle is 10 millimeters (mm).

What is ventriculomegaly?

Ventriculomegaly is a condition where the ventricles (spaces within the brain) are enlarged due to an increased amount of CSF. When CSF becomes trapped, the ventricles increase in size. Ventriculomegaly can occur on one side (unilateral) or on both sides (bilateral).
Ventriculomegaly can be subdivided into mild (10-12 mm), moderate (13-15 mm) and severe (>15 mm).

What are the causes of ventriculomegaly?

The majority of cases of mild ventriculomegaly will resolve (go away) on their own, and can be considered a normal variant in pregnancy. Ventriculomegaly can be caused by an underlying fetal chromosome abnormality, genetic condition, infection, structural issues or an obstruction (blockage) to the flow of CSF.

What are my next steps?

We offer all patients consultation with the Maternal Fetal Care Center at Boston Children's Hospital where you will have an opportunity for additional imaging (ultrasound and fetal MRI) to confirm this finding. If confirmed, you will meet with a pediatric neurologist who will provide you with additional information regarding ventriculomegaly.

You may have a blood test to check for a previous exposure to a virus. If you have not had blood screening for chromosome abnormalities (cell-free DNA/NIPT), you may elect to have it at any time.

You may be offered a diagnostic procedure called *amniocentesis* to rule out a chromosome abnormality. Amniocentesis involves obtaining a small amount of amniotic fluid from around the baby and analyzing cells within the fluid. Amniocentesis can determine if a baby has a chromosome abnormality with a high degree of certainty. Your provider and genetic counselor will discuss this option in greater detail, if you are interested. There are many conditions that amniocentesis can detect that NIPT cannot such as microdeletion syndromes.

Regardless of whether you choose to have additional testing, you will have additional ultrasounds throughout the remainder of the pregnancy to measure the ventricle(s) and monitor the baby's growth.

Our team of perinatologists and genetic counselors are available to provide education and support. *If you would like to discuss this further, a genetic counselor is available at 781-624-5041.*