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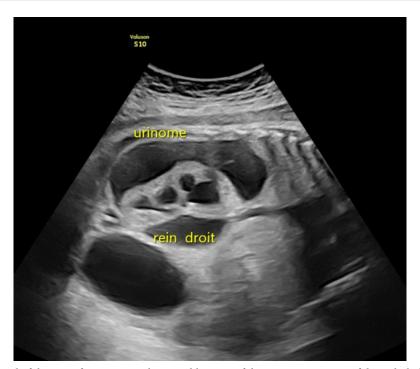
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### Clinical-Medical Image

# Antenatal Urinoma Revealing a Posterior Urethral Valve

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**Figure 1:** Antenatal ultrasound of the same fetus at 30SA showing dilatation of the excretory cavities of the right kidney, complicated by a perirenal collection corresponding to a urinoma.

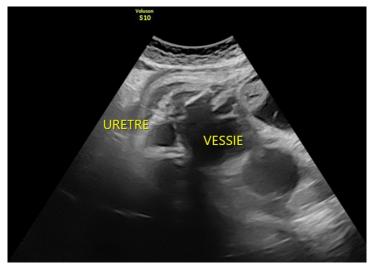


Figure 2: Antenatal ultrasound of a 30SA fetus showing the dilatation of the posterior urethra with mega-bladder (keyhole sign).

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## Clinical-Medical Image

The posterior urethral valve is the most common congenital obstructive lesion of the urethra, with an estimated incidence of ~1 in 10,000-25,000 live births [1]. Diagnosis can be made antenatally, It is rarely detected in the first trimester, as the prognosis is poor, but more often after 18SA. The urinoma is the ultimate complication and results from the hyper-pressure in the excretory cavities that progress to UHN and rupture of a calyx, resulting in antenatal urinoma (Figure 1), with a poor prognosis. In addition, the distension of the posterior urethra and a megabladder (Figure 2) is very useful for confirming the etiological diagnosis of this sub vesical obstruction [2]. Other suggestive signs visible in the second or third trimester are [1]. A mega-bladder (to be verified with delayed emptying after 30 min of examination) measuring >3cm in the second trimester or >5 cm in the third trimester.

- This bladder shows signs of struggle: a thickened, irregular wall (Figure 2).
- Oligohydramnios in advanced cases.
- In the most severe cases, renal dysplasia may also be present, as evidenced by hyperechoic kidneys with cortical cysts.

Keywords: Posterior urethral valve; Urinoma; Utrasound antenatal dignosis

### **Conflict of Interest**

None of the authors has any conflicts of interests to disclose.

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