

When one becomes two: The science of fetus in fetu phenomenon

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ABSTRACT

Introduction: Rare presentation of fetus in fetu diagnosed antenatally. **Case Description:** A primigravida at 36 weeks gestation, with no known maternal illness, radiation exposure, or consanguinity, underwent a transabdominal ultrasound, which revealed a growth-restricted fetus and a fetus in fetu within it. The fetus in fetu was non-viable, fed by a vessel and had rudimentary limbs. MRI of the fetus demonstrated a large, well-defined, encapsulated cystic lesion in the central abdomen, measuring approximately 5 cm. Within the lesion, a small structure resembling a deformed fetus was observed, confirming the diagnosis of fetus in fetu in a male fetus. Maternal blood investigations and parental karyotyping were normal. At 40 weeks, the patient delivered a baby boy weighing 2.8 kg via caesarean section. Postnatally, the baby presented with hematemesis and underwent a laparotomy for excision of the fetus in fetu with ligation of the internal mesenteric artery. The excised cystic mass measured 6 cm and contained a formed fetus with rudimentary upper and lower limbs, a palpable spine and anencephaly. The baby was discharged well on day 15, with serial AFP monitoring. **Discussion:** Fetus in fetu is an extremely rare type of monozygotic twinning in which unequal division of the totipotent inner cell mass of the developing blastocyst leading to the inclusion of a smaller cell mass within a maturing sister embryo. It is distinguished from teratoma by the presence of axial organisation and organogenesis. This case was identified antenatally, managed through a multidisciplinary approach, and followed by successful postnatal treatment.