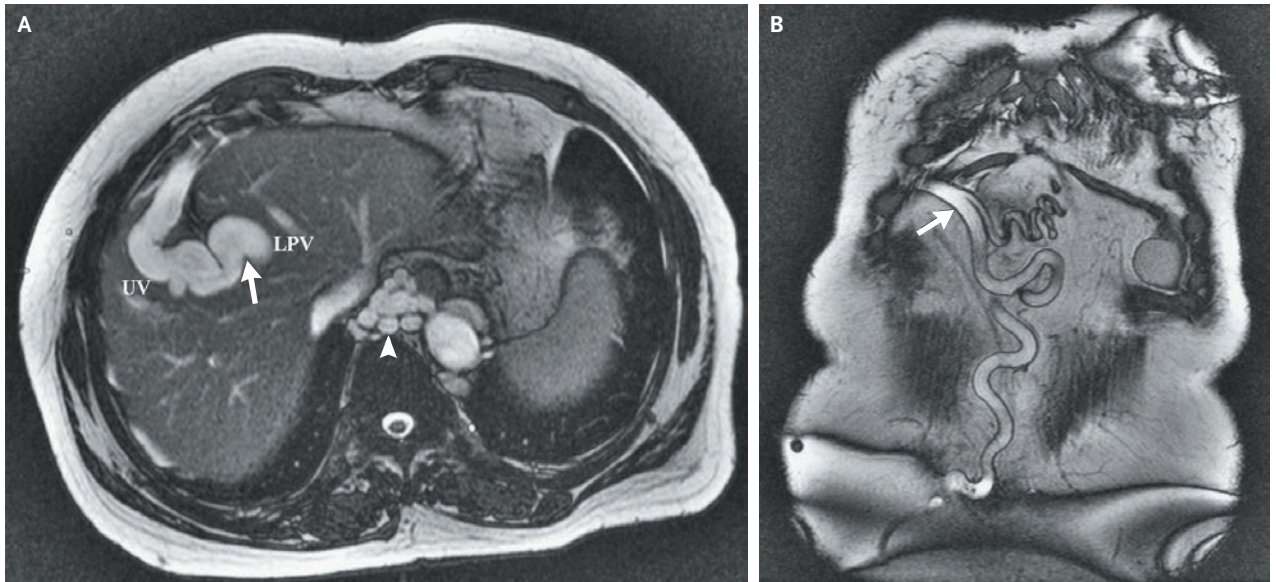


IMAGES IN CLINICAL MEDICINE

Recanalized Umbilical Vein



A 72-YEAR-OLD WOMAN WITH A 10-YEAR HISTORY OF COMPENSATED CIRRHOSIS due to hepatitis C infection presented with swelling of the lower leg. Physical examination showed splenomegaly, spider angiomas, and visible tortuous vessels on the abdominal wall. Axial magnetic resonance imaging through the liver (Panel A) showed a connection (arrow) between the umbilical vein (UV) and the left portal vein (LPV), as well as esophageal varices (arrowhead). Coronal T₂-weighted imaging (Panel B) showed a recanalized umbilical vein (arrow) coursing in the anterior abdominal wall to the umbilicus. Normally, after interruption of the placental circulation at birth, the umbilical vein collapses and forms the ligamentum teres in the adult; however, with the development of portal hypertension, the umbilical vein may recanalize and serve as a collateral route.

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