



CONGENITAL BRAIN MALFORMATIONS IN NEONATES WITH CONGENITAL

HEART DISEASE

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INTRODUCTION

 Neonates with congenital brain malformations (CBM) have historically been excluded from neuroimaging studies in the congenital heart disease (CHD) population

OBJECTIVES

 The objective of this study is to describe CBMs, associated genetic diagnoses, and impact on clinical care in neonates with CHD

METHODS

 This single-centre retrospective study included neonates with CHD born between January 2018-June 2023 diagnosed with CBM on MRI

Brain MRI Pathway

Routine pre-/postoperative brain MRI

Neonates with single ventricle or transposition of the great arteries

1.5T Siemens AvantoFit

Number scanned with CBM=11

3T Philips Achieva

Clinical concern for

neuropathology

Neonates with

underlying

Number scanned with CBM=10

seizure or abnormal

neurologic exam

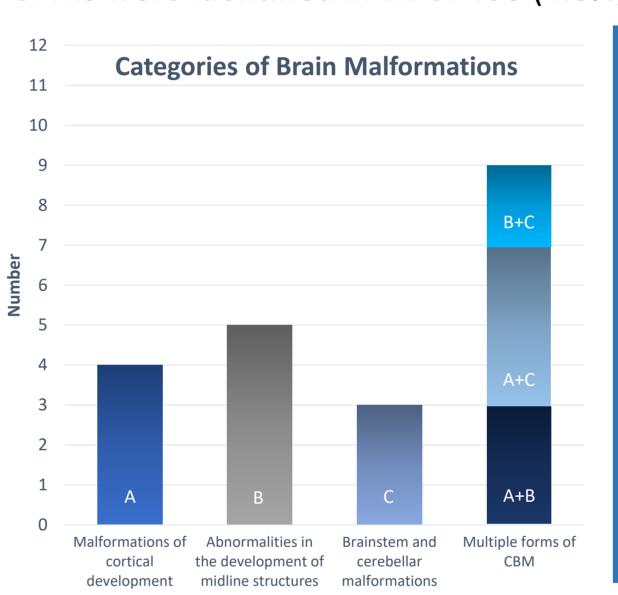
Clinical characteristics vary across the population

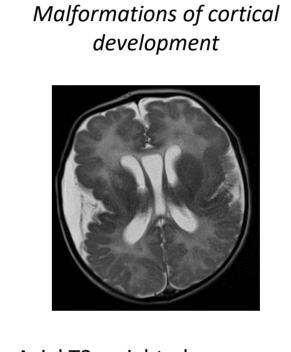
Characteristics	n=21
Male	12 (57%)
Birth gest. age (weeks)	38.1 (30.2-40)
Birthweight (g)	2780 (1380-4110)
Head circumference at birth (cm)	33 (27.8-37)
Cardiac Diagnosis Categorization Single ventricle physiology Biventricular physiology w/o arch obstruction Biventricular physiology w/ arch obstruction	6 (28%) 11 (52%) 5 (24%)
Prenatal cardiac diagnosis	16 (76%)
Prenatal CBM diagnosis	5 (24%)
Maternal age	30 (21-47)
Maternal exposures during pregnancy	5 (23.8%)
Maternal infection during pregnancy	0 (0%)
Presence of dysmorphic features at birth	8 (38%)
Other organ system involvement (excluding heart/brain)	8 (38%)
Amniocentesis	5 (24%)
Post-natal genetic testing FISH Chromosomal microarray Whole genome/exome sequencing	20 (95%) 4/20 (20%) 18/20 (86%) 11/20 (55%)
Seizures	6 (28.5%)
Deceased	5 (23.8%)

RESULTS

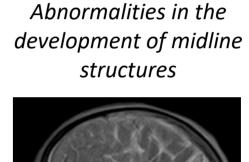
Brain malformations in the cohort presented in three main categories

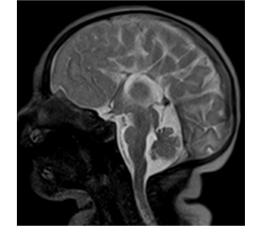
CBMs were identified in 21 of 438 (4.8%, 95% CI 3.1-7.3) neonates who received cardiac care during this period



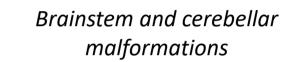


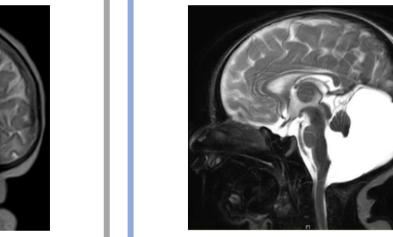
Axial T2 weighted sequence demonstrating severe polymicrogyria in a term neonate with single ventricle physiology





Sagittal T2 weighted sequence demonstrating agenesis of the corpus callosum and simplified gyral pattern in a term neonate with biventricular physiology without arch obstruction





Sagittal T2 weighted sequence demonstrating cerebellar hypoplasia and large retrocerebellar cyst in a term neonate with single ventricle physiology

Diagnosis of a congenital brain malformation impacted clinical investigations and care



75%

A genetic diagnosis was found in 15/20 neonates (75%, 95%CI 52.8-89.2)

30% Other findings – 6/20 had a chromosomal anomaly



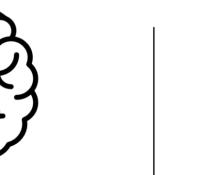
a single gene

45% Other findings – 9/20 had a pathogenic variant in



55%

Diagnosis of CBM on MRI prompted genetic investigations in 11/20 neonates



29%

6/21 neonates underwent palliation following diagnosis of the CBM

CONCLUSIONS

- CBMs in neonates with CHD are rare
- Early diagnosis of CBMs with MRI was important for the initiation of genetic investigations and for directing goals of care