Abstract

The lymphatic vascular malformations (LVM) are consequences of the congenital obstruction of the lymphatic drainage, being the lymphatic vessels sequestered and not communicated with the venous system, its incidence is low, of 1: 12,000 live births, but the majority are manifested in the pediatric age, between 50-65% are detected at birth and 90% diagnosed before 2 years.

Currently they are classified within vascular anomalies as a low-flow vascular malformation and not as a tumor, so the terms lymphangioma or hygroma to name them are obsolete.

Diagnostic images allow classification according to the size of the cysts in microcystic, macrocystic and mixed, which is significant to decide the treatment. They also allow to detect complications, to make differential diagnosis, support percutaneous treatment and follow up. The use of ultrasound with Doppler is an ideal and first-line method, however in the extensive, deep, multicompactorial LVM, which are in relation to vital organs, MRI is the study of choice in children. Computed tomography (CT) also allows the characterization of these anomalies, its use is in the diagnosis, when we study a mass of etiology not specified, however, by ionizing radiation should be avoided its use in the pediatric age.

We present images of US, CT and MRI, including fetal MRI (Figure), representative cases of LVM isolated or associated with syndromes or other anomalies.