The further course and branching pattern of profunda brachii were normal.

Conclusions/clinical importance: The knowledge of these variations is of anatomical, radiological and surgical interest to explain unexpected clinical signs and symptoms. This variation may have important clinical implications while performing subclavian vein puncture for central venous line and brachial plexus blocks. Such variations are also important in interpreting images and in carrying out surgical and anaesthetic procedures involving axillary artery.

Conflicts of interest

The authors have none to declare.

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An anomalous branch of cavernous ICA

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Introduction: As apart of project on studying morphology and morphometry of internal carotid artery an anomalous case of an aberrant branch of internal carotid artery was observed.

Case description: The aberrant branch of cavernous ICA observed, seemingly fed the posterior circulation. This has been referred to in literature as persistent lateral type of trigeminal artery which arises from the precavernous segment of the ICA and courses along the trigeminal nerve to anstamose with the basilar artery forming a carotid–vertebra-basilar anastamosis. Its occurrence is 0.1–0.6%.

Methods: Scalp and cranium were cut transversely and brain was removed as per the steps given in Cunnigham's dissection manual, securing the anterior cerebral and middle cerebral arteries in the base of the skull.

Complete intracranial part of ICA of both sides was exposed by dissection done from carotid canal to its termination as follows:

- The anterolateral surface of petrous temporal bone was cut from superior aspect to procure the petrous part of the artery.
- The parasellar part of the artery was procured by dissecting the cavernous sinus.
- The artery was removed from the cranium.

Conclusions/clinical importance: Visualization and recognition of these arteries is essential because trans-sphenoidal surgery for pituitary adenoma is dangerous in patients who have this variant.

Conflicts of interest

The authors have none to declare.

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An unnoticed variant of sirenomelia with constellation of multiple anomalies

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Sirenomelia is the rare fatal congenital anomaly characterized by a single midline lower limb, urogenital anomalies, Potter's facies and a single umbilical artery. Around 400 cases have been reported in the literature. Based on a number of feet and degree of fusion of lower limb bones its classified into seven different types. Sirenomelia was reported with associated anomalies involving multiple systems mainly of urogenital, respiratory as well as the alimentary tract system. In our case, we are reporting an unnoticed variation in the fusion of lower limbs and its rare association with tracheoesophageal fistula.

Keywords: sirenomelia, mermaid syndrome, tracheoesophageal fistula, Potter's facies.

Conflicts of interest

The authors have none to declare.

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Osteogenesis imperfecta – a rare case report

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Objective: Osteogenesis imperfecta (OI) is a genetic disorder characterized by increased bone fragility and low bone mass. It is also associated with recurrent pathological fractures numerous extraosseus features like blue sclerae, dentinogenesis imperfecta (DI), hyper laxity of skin and ligaments, hearing impairment and presence of wormian bones in the skull.

Most patients have mutation in one of the two genes encoding alpha chains of collagen type 1 (COL1A1 AND COL1A2). Type I collagen fibers are found in the bones, organ capsules, fascia, cornea, sclera, tendons, meninges, and dermis. Type I collagen, which constitutes approximately 30% of the human body by weight, is the defective protein in OI. Presently medical management in the form of bisphosphonates are beneficial to the patients, though their overall efficacy is still in question. Other treatments include growth hormone, parathormone, bone marrow transplantation and gene based therapy.

Materials and methods: A female still born baby was born in the Dept of O & G at IMS and SUM Hospital Bhubaneswar by a primigravida mother of age around 22 years of low socioeconomic status by normal delivery. The limbs were soft with fragile bones. The X-ray of the baby was done.

Result: The X-ray shows fracture of the right humerus and left femur.

Conclusion: Patients with OI presented late, predominantly with fracture of long bones, deformities and blue sclerae. Pamidronate therapy remarkably decreased fractures and pain in these patients.