Arbor Vitae Uteri

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Indian J Radiol Imaging 2022;32:627–628.

We read with interest the pictorial essay, "Magnetic Resonance Imaging of Uterine Cervix: A Pictorial Essay," by Gala et al.1 The article is an excellent depiction of various pathologies affecting uterine cervix. However, we would like to make the following contributions.

The endocervical mucosa is arranged in two longitudinal ridges namely anterior and posterior from which oblique folds radiate—an appearance similar to a branching palm leaf, hence the name arbor vitae uteri (►Fig. 1). These are most frequently depicted in neonates and females in their 30s.2 Since the normal neonatal cervix is disproportionately enlarged and wider than the uterine corpus3 and the cervix in reproductive age group females is mature, an interplay of factors namely prominent size of the cervix, maturity of the cervix, and an effect of hormones has been speculated to be the cause of greater visibility and hence a higher detection

Fig. 1 Arbor vitae uteri: longitudinal transabdominal ultrasound of a normal uterus in a 6-day-old healthy girl depicts echogenic mucosal branching folds similar to a palm leaf.

Fig. 2 Coronal T2-weighted imaging in 21-year-old (A) and 26-year-old (B) females depicts plicae palmatae (red arrow).

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rate of these folds. Also known as plicae palmatae, these interdigitating branching folds are seen sometimes on ultrasound and magnetic resonance imaging (Fig. 2), but are best depicted on hysterosalpingogram. These may be thin, numerous, and closely spaced or thicker, sparse, and widely spaced. The longitudinal ridges from which the plicae originate have been called the ridge of plicae palmatae and may be mistaken as a uterine septum. Absence of extension to the uterine fundus is, however, a feature of the ridge of plicae palmatae unlike the septum. Polypoidal enlargement of plicae mimicking a tumor in a neonate has been described.

We conclude by once again commending the authors for an excellent article on an important topic.

Conflict of Interest
None.

Acknowledgement
None.

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