**AGENESIS OF DUCTUS VENOSUS. PRENATAL SONOGRAPHIC DIAGNOSIS.**

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**INTRODUCTION:** Ductus venosus agenesis is a rare anomaly that is associated with adverse perinatal outcomes. Two cases of prenatal diagnosis of agenesis of DV are presented. **CASE 1:** 35-year-old patient is diagnosed with agenesis of ductus venosus and single umbilical artery during morphological ultrasound about 20$^{th}$ week of pregnancy. Cytogenetic study is normal (46XX). Subsequent controls sonographic findings further confirm the overload of right cavity, pericardial effusion and mild tricuspid regurgitation. The process culminated in a vaginal delivery of a newborn woman whose initial assessment was favorable not requiring hemodynamic support. At first days of life, the echocardiography concluded absence of structural heart disease but mild right atrial and presence of anomalous vessel corresponding to abnormal umbilical vein. Severe right ventricular dilation were observed. One month later, the echocardiography was completely normal. **CASE 2:** 37 years of old patient for selective morphological ultrasound objective is agenesis of ductus and aberrant umbilical vein draining into right atrium. Cytogenetic study revealed a deletion in the 8p23.1 related to psychomotor retardation, heart defects or diaphragmatic hernia, among others. Subsequent sonographic controls show hydrops feta critical aortic stenosis and severe fetal arrhythmia. The patient decided voluntary interruption of pregnancy. **CONCLUSION AND DISCUSSIONS:** This is a rare anomaly (1 / 6,000 pregnancies) The rate of associated malformations is variable (25-65%), and include heart diseases and genetic syndromes or aneuploidy. When it is an isolated finding the prognosis is usually favorable as presented in our Case1. If there cytogenetic alteration associated as in case 2, the prognosis is worse.