

Review

Teratogenetic Periods for the Principal Malformations of the Central Nervous System

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Summary. The teratogenetic periods of the most important CNS malformations are defined and briefly discussed. The results are presented in a synoptic figure.

The present study is based on the analysis of normal CNS development and on morphogenetic interpretations of the pertinent anomalies. The data compiled from the literature concerning normal development are presented in an analytical table and are also summarized in a synoptic figure.

Key words: Teratogenetic periods – CNS malformations.

Zusammenfassung. Die teratogenetischen Perioden der wichtigsten Mißbildungen des ZNS werden bestimmt und kurz besprochen. Die Ergebnisse sind in einer Übersichtstabelle dargestellt.

Die vorliegende Studie beruht auf der Analyse der normalen Entwicklung des ZNS und auf der morphogenetischen Interpretation der betreffenden Anomalien. Die aus der Literatur zusammengestellten Daten über die normale Entwicklung sind tabellarisch angegeben und in einer Übersichtstabelle zusammengestellt.

Introduction

The numerous malformations of the CNS may arise during almost the whole period of intrauterine life. In the available literature, we have been unable to find comprehensive studies giving a panoramic view on the timing of the possible teratogenetic periods. This has stimulated this synthetic study, based exclusively on the abundant but dispersed data in the literature.

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Method

The method used in this study consists of a double approach:

- a) the analysis of data concerning the normal development of the CNS, and
- b) the morphogenetic interpretation of the pertinent malformations.

In the delineation of the teratogenetic periods, we first studied the morphogenesis of the anomalies and then, using these data and those related to the normal development of the corresponding structures, we attempted to define precisely the time period during which the malformations seem to arise. The conclusions reached on several aspects of the CNS development and the genesis of the malformations were in agreement with data found in the clinical pathological reports.

Malformations may be regarded as a peculiar response of tissue *under development* to any noxa (Chuaqui, 1976). The teratogenetic periods defined in this study are valid for harmonic malformations (Werthemann, 1955) which are explained mainly as a result of developmental inhibitions. Disharmonic malformations, where destructive and abnormal proliferative processes are important pathogenetic factors (Werthemann, 1955) – for example in Tuberous Sclerosis (cf. Brun, 1965) – are not considered in this paper.

Embryonic stages were defined according to Streeter's horizons (Streeter, 1942, 1945, 1948, 1951; Heuser and Corner, 1957).

Results

The data on normal development concerning the malformations discussed here are presented chronologically in Table 1. The different events of normal development related to anomalies are disclosed in synoptic Table 2. The teratogenetic periods are shown in Table 3.

Table 1. Development of the principal structures of the CNS

Time from conception	Morphological features	References
Horizon VIII. 15–16 days	– General area of the neural plate autoradiographically discernible	Lemire et al., 1975; O'Rahilly and Gardner, 1971
Horizon IX. 18 ± 1 day (1–3 somites. 1.5 mm)	– Neural folds appear – Prosencephalon, mesencephalon and rhombencephalon are distinguished	Langman, 1969; Lemire et al., 1975; O'Rahilly and Gardner, 1971; Smith, 1970 O'Rahilly and Gardner, 1971
Horizon X. 22 ± 1 day (4–12 somites. 2 mm)	– Partial fusion of the neural folds and initial development of the neural tube – Cephalic circulation begins with the appearance of dorsal aortas and future internal carotid arteries	Heuser and Corner, 1957; Heuyer, 1959; Lemire et al., 1975; O'Rahilly and Gardner, 1971; Smith, 1970 Heuyer, 1959; Pease, 1971
Horizon XI. 24 ± 1 day (13–20 somites. 2.5–3 mm)	– Closure of the anterior neuropore	Hamilton et al., 1960; Lemire et al., 1975; Loeser and Alvord, 1968; O'Rahilly and Gardner, 1971; Patten, 1958; Streeter, 1942)

Table 1 (continued)

Time from conception	Morphological features	References
	<ul style="list-style-type: none"> – Upon fusion of the neural folds the lamina terminalis forms causing the disappearance of the terminal notch – Optic vesicle present 	Loeser and Alvord, 1968; O'Rahilly and Gardner, 1971 O'Rahilly and Gardner, 1971; Streeter, 1942
Horizon XII. 26 ± 1 day (21–29 somites. 3.5 mm)	– Closure of the posterior neuropore	Hamilton et al., 1960; Lemire et al., 1975; Streeter, 1942
Horizon XIII. 28 ± 1 day (30–38 somites. 4–5 mm)	<ul style="list-style-type: none"> – Primitive ependymal layer, mantle and primitive marginal layers evident in the neural tube – Impending subdivision of the prosencephalon – Middle cerebral, posterior communicating and ophthalmic arteries present 	Streeter, 1945 Patten, 1958; Streeter, 1945 Heuyer, 1959; Patten, 1958
Horizon XIV. 29 ± 1 day (6–7 mm)	<ul style="list-style-type: none"> – Cerebellar plate visible – Thickening of the lamina terminalis and optic chiasm primordium appear – Basilar artery present 	O'Rahilly and Gardner, 1971; Streeter, 1945; Tridon, 1959 Friede, 1975; Sharp, 1959 Heuyer, 1959
Horizon XV. 31 ± 1 day (7–8 mm)	<ul style="list-style-type: none"> – Cerebral vesicles with pallium and floor. The pallium made of a germinal layer and a periependymal zone – Beginning subdivision of the rhombencephalon – Primitive meninges and first traces of spinal pia mater appear 	Streeter, 1948; Tridon, 1959; Tuchmann-Duplessis, 1970 Tuchmann-Duplessis, 1970 O'Rahilly and Gardner, 1971
Horizon XVI. 33 ± 1 day (9–10 mm)	<ul style="list-style-type: none"> – Thalamus and striate bodies well delineated – Lamina terminalis broadens to form the commissural plate – Appearance of the posterior commissure 	Hewitt, 1961; Lemire et al., 1975; Tridon, 1959; Yokoh, 1968 O'Rahilly and Gardner, 1971; Tridon, 1959 Hogg, 1945; Streeter, 1948
Horizon XVII. 35 ± 1 day (11–14 mm)	– Beginning reduction of the ependymal channel	Heuyer, 1959
Horizon XVIII. 37 ± 1 day (14–16 mm)	– Choroid plexus of the lateral ventricles start to develop	Heuyer, 1959; O'Rahilly and Gardner, 1971; Yokoh, 1968
Horizon XIX. 39 ± 1 day (17–20 mm)	– Commissural plate differentiates into pars tenuis and pars crassa	Loeser and Alvord, 1968
Horizon XXII. 45 ± 1 day (25–27 mm)	– Union of the striatum and thalamus forms the opto-striate system	Tridon, 1959

Table 1 (continued)

Time from conception	Morphological features	References
Horizon XXIII. 47 ± 1 day (28–30 mm)	– The pallium has differentiated into archipallium and neopallium, and the floor into lateral and medial striate bodies	Tuchmann-Duplessis, 1970
End of the second month (25–50 mm)	– Cerebellar plates fuse and traces of cerebellar bodies appear – Anterior and hippocampal commissures appear – Appearance of the mantle layer in the cerebral hemispheres, which are composed of: germinal layer, mantle layer and marginal velum – Beginning of the first migration wave which will form the cortical plate – Cystic necrosis within the commissural plate (initial cavum septi)	Tridon, 1959 Loeser and Alvord, 1968; Tridon, 1959; Walker, 1944 Hamilton et al., 1960; Ostertag, 1956; Tuchmann-Duplessis, 1970 Sidman and Rakic, 1973 Loeser and Alvord, 1968
Third month. (70–80 mm)		
A) At the beginning of the third month	– Initial formation of the cortical plate (cerebral primordial layer according to Tridon 1959 and Tuchmann-Duplessis 1970) – Fusion of the cerebellar bodies, with vermis and cerebellar hemispheres recognizable. Vermis completely developed. – Trigone formed – Anlage of corpus callosum – Spinal cord displays its typical cytoarchitecture (including the formation of the median raphe)	Sidman and Rakic, 1973 Patten, 1958; Tridon, 1959 Heuyer, 1959; Ostertag, 1956; Tridon, 1959 Abbie, 1939; Heuyer, 1959; Loeser and Alvord, 1968; Magee and Olson, 1961; Ostertag, 1956; Patter, 1958; Tridon, 1959 Pease, 1971; Tridon, 1959
B) From the beginning of the third month on	– Differentiation of archipallio- and neocortex begins – Appearance of the cerebellar superficial cortical layer – Appearance of the subpial granular layer in the cerebral allocortex – End of the first migration wave (11th week) and commencement of the second migration wave – Splenium corporis callosi recognizable (end of 3rd month)	Tridon, 1959 Jacob, 1928; Kuhlenbeck, 1950 Brun, 1965 Sidman and Rakic, 1973 Loeser and Alvord, 1968

Table 1 (continued)

Time from conception	Morphological features	References
	<ul style="list-style-type: none"> – Thalamus and IIIrd ventricle in their definitive aspect – Choroid plexus of the IVth ventricle formed – Circle of Willis formed – Interhemispheric fissure appears 	<p>Patten, 1958; Tridon, 1959</p> <p>Tridon, 1959</p> <p>Heuyer, 1959</p> <p>Chi et al., 1977</p>
Fourth month (120–130 mm)	<ul style="list-style-type: none"> – End of the second migration wave (16th week) – The cerebral primordial cortical layer appears subdivided into external layer (corresponding to cells of the second migration wave) and internal layer (corresponding to cells of the first migration wave), separated by the zone of the future granular layer – End of the differentiation of the archi- and paleocortex – Appearance of the subpial granular layer in the isocortex – Adult morphology of the corpus callosum is achieved – Migration of cells that will form the cerebellar granule cells, Golgi cells and Purkinje cells. – Appearance of the laminar structure of the cerebellar surface. Cerebellar lobules and fissures recognizable. – Formation of foramina Luschka and Magendie – Sylvian, parieto-occipital and calcarine fissures appear. Callosal and olfactory sulci formed. Gyrus rectus present. 	<p>Sidman and Rakic, 1973</p> <p>Streeter, 1932</p> <p>Filiminov, 1947; Tuchmann-Duplessis, 1970</p> <p>Brun, 1965</p> <p>Loeser and Alvord, 1968</p> <p>Tuchmann-Duplessis, 1970</p> <p>Hamilton et al., 1960; Streeter, 1948</p> <p>Harvey and Burr, 1926; Tuchmann-Duplessis, 1970</p> <p>Chi et al., 1977</p>
Fifth month (167–185 mm)	<ul style="list-style-type: none"> – Complete differentiation of the cerebellum achieved – Foramen of Magendie patent – Septum pellucidum present – End of cell migration from the germinal cortical layer – Rolandic and cingulate sulci appear. Insula present 	<p>Patten, 1958</p> <p>Heuyer, 1959; Tridon, 1959</p> <p>Heuyer, 1959; Tridon, 1959</p> <p>Brun, 1965; Ostertag, 1956; Poliakov, 1961</p> <p>Chi et al., 1977</p>
Sixth month (215 mm)	<ul style="list-style-type: none"> – Lamination of the cerebral cortex: the internal layer appears subdivided into layers V and VI – Subpial granular layer reaches its maximum development. It involutionates afterwards. 	<p>Patten, 1958; Tridon, 1959; Tuchmann-Duplessis, 1970</p> <p>Brun, 1965</p>

Table 1 (continued)

Time from conception	Morphological features	References
	– Corpus callosum completely developed	Loeser and Alvord, 1968; Magee and Olson, 1961; Patten, 1958; Rakic and Yakovlev, 1968; Tridon, 1959
	– Foramina of Luschka patent	Heuyer, 1959
	– Superior temporal and prerolandic sulci appear. Parahippocampal gyrus develops.	Chi et al., 1977
Seventh month (210–230 mm)	– Subdivision of the external cortical layer into layers II and III	Tridon, 1959; Tuchmann-Duplessis, 1970
	– End of differentiation of the neocortex	Filimov, 1947; Tuchmann-Duplessis, 1970
	– Establishment of the different architectonic patterns of the cerebral cortex	Heuyer, 1959; Patten, 1958; Tridon, 1959
	– Most of the cerebral gyri and sulci present	Chi et al., 1977
Eighth month (285–310 mm)	– Disappearance of the germinal zone of the hemispheres	Heuyer, 1959; Poliakov, 1961; Robinowicz, 1964
	– Inferior temporal sulcus appears. Angular, supramarginal, and inferior temporal gyri develop	Chi et al., 1977
Ninth month (320–350 mm)	– Involution of the embryonic granular layer of the cerebellum	Jacob, 1928; Langman, 1969
	– The Sylvian fossa becomes the Sylvian fissure	Patten, 1958
	– Anterior and posterior orbital, and paracentral gyri appear	Chi et al., 1977
After birth	– Involution of the subpial granular layer of the cerebral cortex	Brun, 1965

Discussion

Amyelia, Arhaphia. Persistence of the spinal neural plate or sulcus (Minkowsky, 1954; Tridon, 1944, 1959) in turn determines a failure of closure of the posterior vertebral arches and lack of development of the spinal meninges (Friede, 1975; Langman, 1969; Patten, 1958; Peters, 1974; Smith, 1970; Tridon, 1944; 1959). The teratogenetic period is very early in development (horizon IX) and is a very restricted one (Minkowsky, 1954) (for the different theories concerning neural tube anomalies see Lemire et al., 1975, 1978).

Anencephaly, Acrania. This anomaly occurs at the neural plate or neural sulcus stage (Lemire et al., 1978; Minkowsky, 1954; Tridon, 1944, 1959) and is manifest as a lack of closure of the encephalic cavity. This in turn determines a defect

in the development of the cranial vault (Friede, 1975). The teratogenetic period is an early one (horizons X and XI) (Heuyer, 1959; Langman, 1969; Lemire et al., 1975; Patten, 1958; Smith, 1970). For some cases of anencephaly Ostertag (1956) suggests a reabsorptive process affecting the initially well differentiated, already closed brain anlage. (For discussion of this hypothesis see Lemire et al., 1978.) Anyway, the teratogenetic period will be set before the second month (Lemire et al., 1978).

Neuro-Spinal Dysrhapism (rachisquisis, spina bifida). This is a localized dysraphic defect, usually affecting the more caudal vertebrae (Ingraham, 1944; Tridon, 1944, 1959). It is due to a defect in the induction of closure of the corresponding vertebral arches, which is produced by a lack of closure of the underlying neural sulcus (Heuyer, 1959). Due to the fact that the closure of the caudal part of the neural sulcus occurs between the horizons X and XII (O'Rahilly and Gardner, 1971; Tridon, 1959), the teratogenetic period lasts until the latter horizon (Heuyer, 1959; Ingraham, 1944; Lemire et al., 1975; Tridon, 1944).

Diplomyelia. This anomaly corresponds to the formation of a medial, dorso-vertebral fissure in the spinal neural plate. The malformation may occur as long as the neural plate stage exists (horizons X, XI and XII) (Benstead, 1953; Herren and Edwards, 1940; Netzký, 1953). It may be attributed to a disturbance in the induction of either the paracordal mesoblast or the precordal plate on the neural plate (Peters, 1974; Tridon, 1959).

Agenesis of Commisures. Under this heading four groups of malformations may be distinguished representing different degrees of severity of dorsal dysgenesis (Loeser and Alvord, 1968):

- 1) Agenesis of all commisures;
- 2) Total agenesis of corpus callosum (with normally developed anterior commissure and trigone);
- 3) Partial agenesis of corpus callosum, and
- 4) Hypoplasia of corpus callosum.

These anomalies occur as a continuous spectrum of malformations; their teratogenetic periods, especially those of the last three, cannot be sharply defined from each other.

A) Agenesis of all commisures. The teratogenetic period of this group extends from the time when the lamina terminalis thickens (horizon XIV) to the end of the second month when the first commissure (anterior commissure) should appear. This concurs with data in the literature based on the interpretation of isolated cases (Heuyer, 1959; Lehmann, 1955; Magee and Olson, 1961; Morcier, 1934; Tridon, 1944, 1959). The anomaly may be attributed to a defective development of the whole pars crassa (Loeser and Alvord, 1968).

B) Agenesis and hypoplasia of corpus callosum. The period of normal development of the corpus callosum extends from the third to the sixth month (see Tables 1 and 2). A disturbance occurring at the beginning of the third month will produce a total agenesis of corpus callosum (Loeser and Alvord, 1968). If the disturbance occurs later, at the middle of the third month, a partial

agenesis will result affecting only the posterior portion of the corpus callosum (Baker and Graves, 1933; Heuyer, 1959; Josephi, 1944; Lehmann, 1955; Loeser and Alvord, 1969; Tridon, 1959), since the splenium forms later than the rostral portion (cf. Lemire et al., 1975 and Loeser and Alvord, 1968). Between the fourth and sixth month hypoplasia of the corpus callosum may occur, with associated anomalies of the fornix and psalterium (Josephi, 1944; Marburg, 1949; Tridon, 1959).

Cyclopia, Arhinencephaly. These malformations are characterized by incomplete or failure of division of the cerebral hemispheres and fusion of the double angle of the eyeballs (due to the destruction of the germinal tissue between them – Torus opticus – (Starck, 1965). There is an absent corpus callosum and defective fornix; in addition, an absent olfactory bulb and optic nerve, and defects in the development of the nasal primordium. If fusion of the hemispheres involves only the anterior portion, a rudimentary splenium may be present (Friede, 1975). Experimentally, the anomaly can be produced by altering the archencephalic inductor (Heuyer, 1959; Lehmann, 1955). The teratogenetic period has been considered by different authors to be set between the stages of 3 and 5 encephalic vesicles (2 and 4 according to Starck's concept (1965)). It has been fixed particularly during the period of division of the prosencephalon (horizons XII to XV) (Ebaugh and Hoft, 1963; Friede, 1975; Heuyer, 1959; Marburg, 1948; Mosberg and Voris, 1954).

Encephalocele, Cranioschisis. This anomaly corresponds to a defective closure of the cranial bones, more commonly the occipital one, thus causing an exencephaly (Heuyer, 1959; Tridon, 1944, 1955). The teratogenetic period extends from the time when differentiation of the cranial base scleroblastema begins (horizon XII, Lemire et al., 1975; O'Rahilly, 1952; this process beginning in the occipital segments) to the time when the occipital base becomes cartilaginous (horizon XV, O'Rahilly, 1952).

Cerebellar Agenesis and Hypoplasia. Agenesis may occur as a consequence of an incomplete development of the cerebellar plate (horizon XIV; Baker and Graves, 1931; Morsier, 1955a, b; Rubinstein and Freeman, 1940; Sahs, 1941). However, if the plates are already developed, isolated agenesis of the vermis may result (Morsier, 1955a, b); the teratogenetic period of this malformation has been set during the fusion phase of the cerebellar plates (end of 2nd month) (Heuyer, 1959; Sahs, 1941). Cerebellar hypoplasia usually affects the hemispheres, and is due to a delay in cellular multiplication or to an arrest of cell migration (Heuyer, 1959). Its teratogenetic period corresponds to the stages of development of the cerebellar hemispheres (3rd month until the beginning of the 4th month).

The estimated teratogenetic periods for cerebellar agenesis and hypoplasia (horizon XIV until the beginning of the 4th month) do not differ substantially from those in the literature (Baker and Graves, 1931; Heuyer, 1959; Morsier, 1955a, b; Rubin, 1969; Rubinstein and Freeman, 1940; Sahs, 1941; Tridon, 1959).

Microcephaly. The principal underlying morphogenetic mechanism is a delay in cell multiplication or an arrest of cell migration (cell death – as for example after irradiation – seems to play an important pathogenetic role). Therefore, brains with a low cellular density and brains with a reduced number of cortical layers are included in this category (Friede, 1975). The teratogenetic period may be set between the time of development of the cerebral vesicles (horizon XIV) and the 3rd month, when the macroscopic aspect of the cerebral hemispheres is already defined (except for sulci and gyri) and the first migration wave which will form the primordial cortical layer is finished (Greenfield and Wolfsohn, 1933; Heuyer, 1959; Peters, 1974; Sidman and Rakic, 1973; Wilson, 1940).

Hydromyelia. This malformation corresponds basically to an incomplete involution of the central canal, which is manifested by an anomalous juxtaposition of the lateral walls of the spinal canal (Andre, 1951; Heuyer, 1959). It is due to a relative lack of ventral migration of the posterior ependyma (which in turn determines absence of the dorsal raphe) (Heuyer, 1959; Tridon, 1944). These abnormalities do not affect the secretory functions of the structures involved (Heuyer, 1959). The teratogenetic period corresponds to the stages of reduction of the ependymal canal; this process includes the initial apposition of the lateral walls (5th to 6th week) and the later formation of the dorsal raphe (7th to 10th week) (Herren and Edwards, 1940; Peters, 1974; Tridon, 1944, 1959).

Agenesis of the Optostriate Body. This abnormality is caused by a lack of fusion of the primordium of the striate body with that of the thalamus. The disturbance may be due to an incomplete development of either primordium (Tridon, 1944, 1959). The estimated teratogenetic period thus extends from horizon XVI to horizon XXII.

Syringomyelia. A disturbance in the formation of the posterior raphe of the spinal cord is generally thought to be the cause of this malformation (Andre, 1951; Heuyer, 1959). The same basic disturbance would be a condition for the later dissolution of spinal cord parenchyma (Gardner and Angel, 1959; Netzký, 1953). The teratogenetic period of this malformation corresponds to the development of the posterior raphe (horizon XX until the 3rd month) (Peters, 1974; Tauber, 1935; Tridon, 1959).

Heterotopic Nests (of Gray Matter) in Hemispheric White Matter. An arrest of neuroblast migration causes this abnormality, thus causing the presence of subcortical masses of gray substance (Friede, 1975; Heuyer, 1959). Although the heterotopic cells are derived from the same cells which form the cerebral cortex, the anomaly is not strictly a cortical dysplasia: the gyri and, particularly, the cortical laminar architecture are normal (Popoff and Feign, 1964; Tridon, 1944). The teratogenetic period thus corresponds to the period of migration of neuroblasts, which occurs from the 7th to the 16th week (Sidman and Ra-

kie, 1973) (from the second to the fourth month according to Feld et al., 1955; Heuyer, 1959; Peters, 1974; Popoff and Feign, 1964; Tridon, 1944, 1959).

Agyria, Pachigyria. Agyria and pachigyria are different degrees of the same basic disturbance. In agyria (lissencephaly) there is an absence of gyri; in pachigyria there is a reduced number, those present being broader and less convoluted than normal (Brun, 1965). In both anomalies the neocortex is affected, with sparing of hippocampus and limbic cortex (Friede, 1975; Heuyer, 1959; Josephi, 1944). The cortex is broader than normal, although made up of only 4 layers, and the amount of white matter is reduced. When there is normal cortex in adjacent areas, the deepest layer of the abnormal cortex is subcortically placed in relation to the normal cortex. The superficial cell layer is continuous with the normal cortex (Brun, 1965; Miller, 1963; Rubin, 1969). It is believed that the abnormality is due to an arrest of neuroblast migration from the periventricular matrix towards the superficial cortex (Friede, 1975; Heuyer, 1959; Tridon, 1959). This interpretation is supported by the close similarity of the abnormal cyto-architecture with certain fetal stages of normal development showing a subpial granular layer (Brun, 1965). It has been postulated that the neuroblasts in the second phase of migration (which normally forms the superficial layer), are incapable of moving beyond the location of the neuroblasts which have already migrated in the first phase. As a consequence, the larger cortical neurons, normally located in the deepest cortical layers, would be found in the superficial layers (Brun, 1965; Heuyer, 1959). Thus, the teratogenic period of both anomalies would correspond to the second migration phase (11th to 16th week, Sidman and Rakic; end of the 2nd to beginning of 4th month according to Brun, 1965; Heuyer, 1959; Josephi, 1944; Miller, 1942; Peters, 1974; Rubin, 1969; Tridon, 1959; Walker, 1942).

Micropolygyria. The micropolygyric neocortex is characterized by an excessive folding and an abnormal cyto-architectonic pattern which most typically displays a four-layered cortex: molecular layer, upper dense cell layer, intermediate cell-sparse layer, and deep cell layer. This pattern is similar to that of the archicortex (Brun, 1965; Crome, 1952; Friede, 1975; Heuyer, 1959). According to most authors, the total thickness of the micropolygyric cortex is less than that of the normal adjacent cortex; the upper layer continues with layers II and III, and the deep layer continues with layer V of the adjacent cortex (Brun, 1965; Friede, 1975). Somewhat different topological relationships are described by other authors (see below).

Three morphogenetic principles have been postulated to explain micropolygyria: an arrest of neuroblast migration, an imbalance of intracortical cell multiplication, and a post-migratory laminar destruction. According to Brun (1965), an arrest of the first cell migration wave, which forms the deep cortical layers (Sidman and Rakic, 1973) takes place, thus accounting for the frequent presence of subcortical heterotopic cell nests (Brun, 1965). However, the disturbance is thought to affect the intracortical migration more than the migration towards the cortex (Friede, 1975); since the second migration wave occurs normally (11th to 16th week, Sidman and Rakic, 1973) a relatively dense upper layer

forms and the excessive superficial folding is explained by differences in growth velocity of the supragranular and infragranular layers (Crome, 1952; Friede, 1975; Greenfield and Wolfsohn, 1933; Heuyer, 1959). Thus the teratogenetic period extends from the time when formation of the cell cortical plate begins (8th week, according to Sidman and Rakic, 1973) throughout the whole period during which the six-layered neocortex is constituted (7th month). This estimated period is in agreement with data obtained in cases of micropolygyria due to carbon monoxide poisoning, the latter occurred in none of the reported cases before the 20th or after the 28th week of gestation (Richman et al., 1974). The hypothesis of a post-migratory laminar destruction is based upon a few reported cases where the deep and the cell-sparse layers appeared continuous with layers VI and V, respectively, whereas the upper layer displayed three sub-layers blended with layers II, III and IV (Richman et al., 1974). It is assumed that in upper and deep cell layers located in this way both early and late migration waves are normally represented; the cell-sparse layer is regarded as the result of a post-migratory encephaloclastic event affecting mainly the layer V of the neocortex (Richman et al., 1974). The first determination point of the teratogenetic period would thus coincide with the end of cell migration (5th month). If no further morphogenetic event is postulated, the second determination point cannot be defined, that is to say, micropolygyria could also occur after the 7th month, which does not seem to be the case.

Dandy-Walker Malformation. This anomaly has been regarded as a form of hydrocephalus resulting from the obstruction of the foramina of Luschka and Magendie (Benda, 1954; Fowler and Alexander, 1956; Heuyer, 1959). On this assumption, it can reasonably be expected that the teratogenetic period will be located during the period of opening of the foramina (5th and 6th month) (Benda, 1954; Heuyer, 1959; Tridon, 1944, 1959). However, the following triad is also designated as the Dandy-Walker anomaly and has patent foramina: malformation of the vermis, a cystic roof of the IVth ventricle, and an elevated tentorium (Lemire et al., 1975; Peters, 1974). This triad could be explained by an arrest in the development of the hind-brain, with persistence of the anterior membranous area (which normally disappears before the foramina become patent). Such an arrest would include an absence of the cerebellar foramina. The teratogenetic period for this triad would be located in an earlier stage, namely the 3rd month (Benda, 1954; Fowler and Alexander, 1956; Friede, 1975; Tridon, 1944, 1959).

Fifth and Sixth Ventricle. Cavum septi pellucidi and cavum Vergae are normal structures which disappear in the last three months of development (Basu, 1935; Hughes et al., 1955; Taggart and Walker, 1942; Tridon, 1959). If they persist as large midline cysts, they are considered to be abnormalities in the development of the septum pellucidum (Basu, 1935; Hughes et al., 1955; Mosberg and Voris, 1954; Peters, 1974; Schwidde, 1952; Taggart and Walker, 1942; Tridon, 1959; Wolf and Bamford, 1935).

Marginal Heterotopies ("brain warts", Jacob, 1940). This refers to the marginal glio-neuronal heterotopies, particularly to the hyperplastic and polypoid forms

(Brun, 1965). They are continuous with the molecular layer, and it is believed that they represent a persistence of the subpial granular layer (Bertrand and Gruner, 1955; Brun, 1965). The teratogenetic period will be found in the stages of regression of this layer. This involution begins after the 24th week, although there are certain differences in the different cortical areas (Bertrand and Gruner, 1955; Brun, 1965; Grcevic and Robert, 1961).

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