

A RARE COMPLICATION OF TWIN PREGNANCY: IMPACTION OF TWINS

(Case Report)

by

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Introduction

Impaction of twins is a rather rare complication of twin pregnancy. Both Lister (1960) and Mac Donald (1962) feel that it is not so rare as the impression one gets from the often quoted text-book incidence of 1:90,000 deliveries or 1:1000 twin births (Von Braun).

CASE REPORT

A. age 20 years, primigravida, was admitted as an emergency case with a history of full term pregnancy with mild labour pains for 24 hours.

General condition good, pulse 80/minute, B.P. 120/80 mm. of Hg. Heart and Lungs n.a.d. No oedema feet. Hb. 10 Gms.% urine—sugar and albumin nil.

Per Abdomen: uterus full term, extended breech presenting, free: one vertex felt in the right hypochondrium: F.H.S. good, 140/minute. As the uterus felt full of foetus a suspicion of twin pregnancy was aroused and a plain x-ray abdomen was taken. It showed two foetuses both presenting as breech.

Pelvic Examination: Cervix hanging loose, admits one finger, extended breech felt at the brim, pelvis gynaecoid. Pelvic examination repeated 24 hours later showed the cervix to be 2/5th dilated, absent membranes with a footling presentation.

Since the X-Ray showed twin pregnancy (both presenting as breech) patient was sedated, and allowed to labour. Vaginal examination repeated approximately 12 hours later as the abdominal examination failed to reveal any progress of labour, showed the cervix to be fully dilated with intact bag of membranes and one

extended breech at—station 2. Physiological syntocinon drip was given for 5 hours without any progress of labour, lower segment now seemed stretched. Hence Caesarean Section was decided as it was thought that impaction of twins has most probably occurred. At Caesarean Section the lower segment was stretched to about 2 inches below the umbilicus. Both the breeches were impacted just below the brim, leading breech was extended and 2nd breech was fully flexed. First extended breech was delivered, male baby weight 1900 grams. Second breech also delivered with comparative ease, female baby weight 1600 grams. Two separate placentae with two cords present. There was practically no liquor. Binovular Twins.

Discussion

The case presented here has many of the predisposing aetiological factors responsible for impaction, i.e. primiparity, small foetuses, adequate pelvis and premature rupture of the membranes. It is said to be least common where both foetuses present as breech. Nissen (1958) found only 2 cases in his collected series of 69 cases. In the above case both foetuses presented as breech. Many authors ascribe the preponderance of various types of interlocking in primiparous patients to higher uterine tone and strong contractions. According to Guttmacher, lower uterine segment in primipara possesses so much tone that it prevents the twins from extricating themselves from their unhappy physical intimacy. Guttmacher and Kohl (1958) reported the median weight of twins to be 2,377 gms.

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Twins that interlock are usually small. Scanty liquor has the effect of bringing the co-twin together and thus predisposing to interlocking. Interlocking is said to occur with equal frequency in bircvular and uniovular twins, although Stenstrom (1951) found it to be commoner in uniovular twins.

Early diagnosis is established by a combination of clinical and radiological examinations. Lateral x-ray helps to predict the path of descent of foetal poles (Anjaneyulu 1969). Cohen and Rosenthal (1965) advise lateral view, if the A.P. view shows parallel lies and opposite poles. In the case presented above, both foetuses were parallel and presented as breech—one extended and the other flexed. X-Rays also differentiate it from a double headed monster and hydrocephalus. Caesarean section has been regarded as the best mode of delivery in cases discovered early in labour. In the

present case caesarean section with a transverse incision on the lower segment was done.

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