

TWIN PREGNANCY IN UTERUS DIDELPHYS

(A Case Report)

by

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Congenital malformations of the uterus are generally of limited significance in clinical practice because of their rarity. But when it occurs, it may be associated with obstetric and gynaecological problems.

Case Report

A 24 years old para 1 was admitted with 7 months amenorrhoea and vague abdominal pain on 13-2-1978 at Kilpauk Medical College Hospital, Madras. Her first pregnancy ended as premature delivery at 8th month with the male baby weighing 1.6 Kg. in May 1975. The child is alive and healthy now and is 2 years 9 months old. During the pregnancy, she felt the foetal movements only on the right side of the abdomen. She attained menarche at 13th year. Her cycles were 4/30 regular, with moderate flow and associated with backache. Her last menstrual period was in July 1977.

She is the daughter of consanguinous parents. No family history of twins in her family as well as her husband's side.

On examination, patient was anaemic and uterus was irregularly enlarged and corresponded to 30 weeks pregnant uterus. Multiple foetal parts were made out. A small premature head was felt in the lower pole. Foetal heart rate was good. A diagnosis of twin pregnancy was made.

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One week after admission, patient got into labour. During labour, right half of uterus was alone contracting and relaxing and no contractions were made out on the left side. Vaginal examination revealed a well taken up cervix which was 8 cms. dilated and a vertex presentation at 0 station. Patient delivered a live female baby weighing 1.7 Kg. followed by placenta. Vaginal examination after delivery revealed two cervixes, one on the right side patulous with blood clots, another on the left side uneffaced admitting tip of one finger with a bag of membranes and a premature head. No labour contractions were detected on the left half of the uterus. An X-ray showed the foetus on the left side of the abdomen with the soft tissue shadow of involuting uterus on the right side (Fig. 1).

After delivery, the lochial discharge was scanty and lactation was not established. Patient was kept under observation in the hospital. The premature baby died after nine days.

Nineteen days after delivery, patient went into spontaneous labour and delivered a live female baby weighing 1.4 Kg. Placenta separated and expelled completely. After the completion of delivery, vaginal examination revealed two cervixes and on the right side uterus involuted to about 8 weeks pregnant uterus size and the left side about 18 weeks. A definite groove could be made out in between in the centre.

After the delivery, patient had moderate amount of lochia and lactation was established on the second postnatal day. The second child was alive and healthy after 4 months.

Intravenous pyelogram taken 15 days after delivery showed duplication of renal pelvis, on

both sides and double ureter in the upper one third of the ureters. The renal parenchymal outline was normal.

Discussion

Double uterus (Uterus didelphys) resulting from failure of fusion of lower parts of the paramesonephric ducts may be associated with a double or single vagina. Pregnancy in double uterus is not uncommon. Cope and Sharp (1954) by reviewing literature collected 400 cases of double uterus associated with pregnancy. Khandwala (1956) reported a case of term pregnancy in a uterus didelphys. Polak (1953) stated single pregnancy is more common than twin pregnancy. According to his series, the ratio between single and multiple pregnancies is 1:16.5. This clearly shows the incidence of multiple pregnancies in double uterus to be much more than that in single uterus. According to Eastman and Hellman (1966), the number of offsprings depends upon the number of horns in the uterus in any species. If a particular animal in question has got more than one uterine horn the chance of its having multiple offsprings is more.

Cases are reported with long intervals between the deliveries of twin pregnancies. The mother, whose twins are born more than 72 hours apart, usually has pregnancy in each half of double uterus (Eastman and Hellman, 1966). Bainbridge (1924) quoted an interval of 3½ months between the deliveries of

white and black infants by a white woman. William and Cummins (1953) reported twin pregnancy in double uterus with 56 days interval between the deliveries of the twins. Gupta and Gupta (1974) reported a case of double uterus with incomplete abortion on one side and premature delivery on the other side after 111 days.

Summary

A case of twin pregnancy in uterus didelphys with premature deliveries with an interval of 19 days in between deliveries is presented. She has 2 live children one 2 years 9 months old by a single pregnancy in the right horn; and another a second of twins from the left horn delivered after an interval of 19 days.

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See Fig. on Art Paper III