

PLACENTA INCRETA

(A Case Report)

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While accreta of few cotyledons may occur from time to time, total placenta accreta is an extremely rare condition. A case of total placenta increta diagnosed during Caesarean Section is reported.

CASE REPORT

Mrs. Kamalam, 30 years old, 6th gravida had reported for the first time on 24-3-1980 with the history of 8 months amenorrhoea and draining of liquor since 12 hours. She had 4 natural deliveries—2 at term and 2 premature at 8th month, both died during neonatal period. She had 1 abortion at third month for which curettage was done. (1st and 5th term deliveries—2nd and 3rd premature deliveries and 4th abortion). Abortion was followed by 5th delivery where manual removal of placenta was done.

On examination, uterus was 34 weeks, acting mildly, presenting part was mobile, foetal heart sounds were heard. Vaginal examination revealed a long uneffaced cervix admitting a finger, membranes were absent and breech presenting high up which was confirmed by X-ray. She was put on prophylactic antibiotic cover and syntocinon drip was given for acceleration of labour. Since the response to the drip was not satisfactory, the case was taken for caesarean section on 24-4-1980 (i.e. 32 hours after admission). Abdomen was opened by a right para median incision. Large blood vessels were

seen coursing through the upper half of the uterus. L.S.C.S. was done and a live male baby delivered. The placenta could not be removed since there was no plane of cleavage. The myometrium was very much thinned out in the upper segment and the placental border could not be visualised clearly as it was diffusely merging with the myometrium and hence diagnosed provisionally as placenta increta. Total hysterectomy with right salpingo-oophorectomy was done. Post operative period was uneventful and the patient was discharged on twelfth day.

Specimen-placenta—Placenta was infiltrating the whole thickness of the musculature leaving only the serosa free. Tortuous blood vessels were coarsing through upper part of uterus. Placental margins could not be identified. Placenta was spreading over the whole of uterine cavity. Cotyledons about eight in number were discrete and seen as bluish projections on the myometrium.

Histopathological Report: of the uterus with placenta-occasional areas of thin rim of gestational myometrium separating the placenta and serosal surface.

Summary

A case report of total placenta increta has been presented with a short discussion.

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