RECURRENT POLYHYDRAMNIOS

by

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SUMMARY

Outlined below is the obstetrical history of a patient in whom acute or subacute polyhydramnios developed in the second half of three successive pregnancies. Detailed investigations showed no maternal disease, and an X-ray of the abdomen ruled out gross congenital anomaly. Multiple amniocenteses allowed two of the pregnancies to reach viability, and these babies are alive and healthy today.

Introduction

Polyhydramnios of varying degrees is seen commonly enough in obstetrical practice (0.5 to 1%), but it is severe enough to cause symptoms in only 0.1% pregnancies. Acute polyhydramnios is even rarer, very few cases being recorded.

Case Report

The patient, aged 26 years, para 3+2. She was given supportive treatment and advised weekly reviews for incompetent os. She remained well till at 20 weeks the uterus was suddenly found to be of 24 weeks size, with a weight gain of 1.5 kg in one week. At 28 weeks the uterus reached the costal margin. Amniocentesis was done for symptomatic relief and 1000 ml of fluid was removed. Another litre was removed on the second day, and a plain X-ray of the abdomen was done to rule gross

congenital anomalies. A third tap was done two days later. However, she went into labour that day following spontaneous rupture of the membranes and delivered a premature female infant.

In the fourth pregnancy the uterus corresponded to the period of amenorrhoea till 22 weeks, when a discrepancy of 4 weeks was recorded. At 28 weeks the size was 36 weeks. Over the next 7 weeks, under ampicillin cover, 16 amniocenteses were done, removing about 1000 ml of fluid each time. X-ray abdomen showed a normal fetal head. She delivered normally a female child weighing 1.7 kg with a one-minute Apgar Score of 7 and a five-minute Apgar of 9. The placenta was oedematous and weighed 600 gm. The baby had no congenital anomalies.

In the fifth pregnancy trouble started at 24 weeks gestation, when the height of the uterus was found to be of 30 weeks size. The uterine height continued to increase disproportionately.

A total of 8 amniocenteses were done over 22 days. At 35½ weeks labour ensured. The baby was female, weighed 1.75 Kg. and had a good Apgar Score. There were no congenital anomalies, the placenta and cord were oedematous and weighed 620 gm.

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