

CO-EXISTENT INTRA AND EXTRA UTERINE PREGNANCY AT TERM

By

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SUMMARY

The simultaneous occurrence of extra and intra uterine pregnancy is rare phenomenon and it is extremely rare to find intra and extra uterine growing till term.

Introduction

The simultaneous occurrence of extra and intra uterine pregnancy is a rare phenomenon. The first reported case of simultaneous extra and intra uterine pregnancy was by Duverney in 1708. Novak (1926) was first to review cases reported in literature. Mitra reviewed 304 cases in 1940 and added 2 of his own. Case reports have been published by Gemmell and Murray (1933), Zarco and Si (1952), Lawson and Chouler (1955), Viviaro (1956), Winer *et al* (1957) and various others.

CASE REPORT

Jaldeis, aged 30 years, was admitted on 28th of June, 1983 with the history of full term normal delivery at home on the same day 4 hrs earlier and complaint of retained placenta.

Her previous menstrual cycles were regular, last menstrual period was 9 months previously. She had previous 3 full term normal deliveries.

On examination, her general condition was poor, pulse was 124/min blood pressure was 100/84 mm. of Hg, she was anaemic, other system were normal.

There was distension of abdomen, pelvic examination revealed a uterus of 16-18 weeks. Size cord was lying outside the vulva, but there was no external vaginal bleeding Haemoglobin was 50%, urine examination was normal. Antibiotics were started and she was given 300 C.C. of blood.

Under general anaesthesia, manual removal of placenta was carried out. A syntocinon drip was set up. The uterus contracted well and no rent in uterus, there was no undue bleeding.

Immediately post-operatively her general condition improved. Routine post-operative was given.

On 29th of June, 83, her abdomen continued to remain distended. Although bowel sounds were present. Ryles tube suction was done. From 1st of July '83, she started having diarrhoea and fever ranging between 101-102°F.

A mass was felt per abdomen upto the level of umbilicus, but P/v examination revealed 14-16 weeks size of uterus and no fullness in the fornices.

X-ray chest and abdomen were taken. Abdominal X-ray revealed a full term macerated foetus.

On 5th of July '83, a laparotomy was performed. A full term macerated foetus was seen lying in the peritoneal cavity. The placenta was attached to the anterior abdominal wall from 3" below the umbilicus. The uterus was 14 weeks size and was lying lower down. There was no rent in the uterus. Both tubes and ovaries were adherent to intestines, and hence could not be examined. Foetus and placenta were removed and abdomen was closed.

Crown rump length of this foetus was 48 cms. Circumference of head was 20 cm. Weight of foetus was 2.1 kg. Weight of placenta was ½ Lb.

Post-operative period was smooth and patient was discharged on 10th day.

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See Figs. on Art Paper II