Prenatal diagnosis of fetal cystic hygroma, and successful abortion by prostaglandin E2 gel in failed midtrimester termination of pregnancy with intra-amniotic Prostagladin F2:

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A 24 years old primigravida was detected on routine ultrasound scan at 18 weeks of gestation to have fetus with cystic hygroma and multiple congenital



Fig 1. Fetal Cystic Hygroma on Ultrasound

malformations (Fig 1). Cord Blood sampling (cordocentesis) for fetal karyotype was performed, and at the same sitting 2.5 mgm, 15 methyl PGF2 was instilled into the amniotic cavity. The patient was then monitored,



Fig 2. Aborted fetus with cystic hygroma & Multiple congenital abnormalities.

but even after 24 hours of PG instillation there were no uterine contractions. Re-instillation of PGF2 intraamniotically was considered, but the patient was very apprehensive. It was decided to try prostaglandin E2 gel (Cerviprime) instillation intracervically. After 15 mins, of PGE2 gel instillation, the patient started having regular uterine contractions, and she aborted a malformed fetus after 7 hours. The placenta was expelled after 5 mins. There were no intra or post abortal complications.

Fetal Karyotype was normal. The aborted fetus has a large cystic hygroma, bent upper and lower limbs and abnormal face (Fig.2).