

Fetus Papyraceus - A Case Report

Abhijit S. Deodhar, Lalita S. Deodhar, Ashwini Deodhar, Aditi A. Deodhar.

Dr. Deodhar's Hospital, Opposite Ice Factory, Gokhale Road, Naupada, Thane - 400602.

Fetus papyraceus is a mummified compressed fetus occurring in association with a viable twin. The death of the fetus usually occurs early in the second trimester. A co-twin dying earlier may be absorbed completely while later fetal death usually results in macerated but not compressed fetus. The incidence of this condition is 1 in 12500 cases of twins. We report such a case of fetus papyraceus which was managed successfully.

A 25 year primigravida, married since 3½ years, who conceived while on treatment with clomiphene citrate, came to us with 7 months amenorrhoea with complaints of pain in abdomen and bleeding per vaginum.



On examination, she was pale & had bilateral edema of feet. The respiratory and cardiovascular system examination was normal. On per abdominal examination, there was a single live fetus of 28-30 weeks gestation in cephalic presentation and the uterus was irritable. On per vaginum examination the os was closed.

On investigating, she was found to have hypochromic microcytic anemia. A trans abdominal ultra sound scan showed twin gestation. One of the fetuses was in a cephalic presentation. The fetal cardiac activity was regular. The fetal movements were well visualised. On fetal biometry, expected gestational age was 29 weeks 5 days. The expected fetal weight was 1.42 kg. The other fetus was nonviable. It was seen inferior to the live fetus, near the internal os. The fetal cardiac activity and fetal movements were absent. On fetal biometry the expected gestational age was 17 weeks. The placenta was fundal, anterior Grade I maturity. The liquor amnii was adequate. The cervical canal was closed.

This was a case of twin gestation with antepartum demise

of one twin.

A Coagulation profile of the patient was normal.

The patient was admitted and responded to conservative treatment with bed rest and injectable tocolytics which were changed to oral tocolytics for maintenance.

After 12 days she again complained of pain in abdomen. On per abdominal examination there was mild uterine activity. On per vaginum examination the os was closed. The patient was shifted back to injectable tocolytics and a conservative line of treatment was given.

After 4 days of this treatment, the patient started draining liquor. On per abdominal examination the live fetus was in a transverse lie and the uterus was acting well. A decision for an emergency Caesarean section was taken. Indication was transverse lie in labour.

A female baby of wt 1.4 kg was delivered. The other twin a macerated still birth, female fetus wt 500 gm was delivered with the sac intact. This was the fetus papyraceus. The placenta was diamniotic dichorionic.

Today the surviving twin is 1 year 3 months old and doing well.