

An unusual case of depressed fracture skull in second twin

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Birth injuries include avoidable and unavoidable trauma sustained by the infant during the process of birth. Fractures of skull, though rare may follow forcible attempts at delivery, especially with forceps, spontaneous delivery or even caesarean section.

Mrs. T, 35 years old G₁P₁+1 at POG 33 weeks was admitted on 11-05-98 as a case of twin pregnancy. Her LMP was 18-09-97 and EDD was 25-06-98. Obstetric history showed two full term normal deliveries and one second trimester MTP.

Per abdomen findings showed large for date uterus with first twin presenting as vertex and second as breech. These findings were confirmed on ultra-sonography.

At 37 weeks and two days, the patient had spontaneous onset of labour. After six hours of labour pains, the first twin, a full term male baby of birth weight 2.5 kg was born as vertex. After two minutes the second twin, a full term female baby of birth weight 2 kg was delivered as breech. The placenta was diamniotic and dichorionic. Apgar scores of first and second twin were 7,9 and 4,8 respectively.

On examination of the second twin, a round depression of 4x4x1 cms was found over the right frontal bone just above the right eyebrow. There was no edema, redness or tenderness over the area. X-ray skull showed it to be the depressed fracture of the right frontal bone. There was no history of any instrumental or difficult delivery, neither was there any history of injury to the baby after birth. Baby was active and accepting feeds and there was no

neurological deficit or signs of cerebral compression. As there was no obvious cause of fracture skull, the new born was referred to the pediatrician for opinion. After a detailed examination of the twins, it was concluded that the fracture was due to the resistance offered by the sacral promontory of the mother to the aftercoming head of the second twin.

Baby was discharged on the fifth day. By this time the depressed area had started disappearing spontaneously. This case is being presented because of its rarity in a case of second twin presenting as breech.