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A cardiac Twin- A Case Report

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Mrs. M. Adhikary, 27 yrs, Hindu, PO+O was
admitted to Chittaranjan Seva Sadan, Calcutta on
16/ 10/98 w ith respiratory difficulty for 15 days with a pregnncy of 23 wks gestation. Her LM.P. was on 5.5.98
wi th regular menstrual history. On examination her height and nutrition were average. She was normotensive with mild pallor. Cardiovascular and respiratory systems were normal. Height of the fundus was 32 weeks, size more than period of amenorrhoea of 23 wks gestation, excess liqu or, foetal parts were not easily palpable and the F.HS could not be detec ted. Provisional diagnosis of hydramnios was made, U.S.G. on 17/ 10/ 98 revealed twin pregnancy, 1'

1 twin in Cephalic presentation, alive, 22
wks size, 2'"1 twin, I.U.D (without any heart bea t)) in breech presenta tion. H er routine examinations were normal and \\'eck ly Hb'X,, TC, DC, Platelet Count, fibrinogen level, BT, CT for 2"d l.U.D. twin were within normal limits. With rest, nutrition, vitamins, iroi)., calciLml etc. in the hospita l her respiratorry difficulty diminished to some exten t and the pregnancy continued.

Her size of the uterus continued to be much
bigger inspite of 2"" I.U.D. twin and a rep eat U.S.G. on 11.11.98 showed twin pregnancy, 1 '

1 one alive at 25-26

wks of maturity, cephalic presentation, 2"d twin showed no heart beat, breecl1 presentation and there was evidence offoetal hyd rops w ith h ydramnios in the 2"" twin h aving hydrops from anoxia and h ydramnios in the amniotic sac compared to the 1'

1 U.S.G. report instead of usual
maceration I m umification of the 2nd twin due to I.U.D.

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Arrangement for colour dopplar study was made
for confirmation of Acardiac 2"d twin but prterm labour started on 19-11-98 and she delivered twin babies 1 '

1 one

alive, wt 800 gms vaginally and 2"d twin by spontaneous breech deli very showing slight movement of the limbs for few minutes, wt. 700 gms. Both the babies were femal es having single placenta, 2"d twin had multiple dcformi ti c.., like absence of definite head (acephalu s), <1 bsence of anterior chest wall, absence of heart. There were only fe11 vascular communications between placenta and fol:'ti1l trunk (ventral aspect).