

## Chorioangioma of Placenta With Hydrops Fetalis

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Chorioangioma of placenta occurs in 1% of pregnancies and is the most common placental tumour causing hydrops fetalis. It may be associated with polyhydramnios in 15-20%, preterm labour, congestive cardiac failure, or may be asymptomatic. They occur most commonly on fetal surface and prenatal diagnosis is possible with ultrasonography. Here is a case report of Chorioangioma diagnosed at Topiwala National Medical College, Mumbai.

Janali Bang, 18 year old married primigravida was admitted on 4 Mar. 1999 at 29 weeks period of gestation for rest as her sonography showed mild polyhydramnios with chorioangioma of placenta with normal live intrauterine pregnancy. Clinically gestational age was 34 weeks. Sonography was repeated weekly for fetal growth and size of angioma. She received dexamethasone to induce fetal lung maturity. She gradually developed polyhydramnios and went into spontaneous labour after 3 weeks. She developed

respiratory distress and per vaginum examination showed footling breech presentation. Emergency caesarean section was done and a 2.8 kg baby with hydrops fetalis with poor respiration and blue skin colour was delivered. During manual removal of placenta, two hen-egg sized solid firm bosselated opaque masses removed followed by removal of soft friable placenta in pieces.

The placenta weighing 950g with multiple lobulated gray-white, yellow to haemorrhagic in appearance with two 8x5x4cm and 3x3x2.5cm masses was sent for histopathological examination which showed hemangioma in various stages - cellular to angiomatous with sequestration of fetal erythrocytes. The baby was resuscitated and kept under observation. Hb haemoglobin was 11g and exchange transfusion was planned but baby expired 7 hours and 30 minutes after delivery due to congestive cardiac failure.