

Interlocking Twins – A Rare Case Report

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Twins is not an uncommon gestation but interlocking of twin is a rare condition, occurring in approximately one in every 817 twin gestation with an associated fetal mortality of 40-50% and 80% mortality of 1st twin. It is usually not recognised. It should be suspected if there is unexpected delay in the IInd stage or difficulty in extracting a 1st breech. It usually occurs in breech – cephalic twin presentation, incidence being 1 in 88. Here, we are presenting one such case of interlocking twins.



Fig. 1: Locked twins

A 24 yr. old (I.P. No. 21992 / 2000), gravida2, para 1 was brought on 6-11-2000 at 6.00 a.m. with h/o amenorrhoea – 9 lunar months, c/o PV leak and labour pains since 6 hours, associated with weakness of right lower limb since one day. O/E pulse: 86/m. BP = 140/80 mmHg. CNS examination : monoparesis of right lower limb. P/A : uterus – 34 weeks, acting, vertex lower pole, FHR – not localized. Local examination revealed delivery of the 1st twin upto the shoulders with after coming head stuck inside the uterus. FHR absent. PV examination head of the 1st baby high up. Head of the IInd baby at + 1 station. Ultrasound examination revealed no hydrocephalus of 1st twin. Head of the IInd twin at the lower pole and FHS absent.

Delivery Notes : Locking of twins was broken up by decapitating the first twin and its head pushed up into the uterus. The IInd twin delivered after doing craniotomy. Five units syntocinon started. Head of the 1st twin delivered later by hooking the base of the skull with fingers. Both babies were female weighing 1.2 k.g. Placenta – diamniotic monochorionic. Later patient threw 2 convulsions 7 hrs. after the delivery, BP : 150 /110 mmHg. She was started on MgSO₄ regime & tablet nifedepine 10 mg. BD. As per physician's advice patient was treated with injection. heparin 5000 units sc for 21 days and tablet eptoin 100 mg 1-0-2. Physiotherapy was advised.

Patient was discharged on 28th postnatal day. Case has been reported for its rarity.