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CASE REPORT

Outcome of Gender Bias: Isolated Bilateral Upper Limb Amelia

Singhal Savita Rani · Agrawal Umber · Sharma Damyanti

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Introduction

Amelia is complete absence of a limb that presents as an isolated defect or with associated malformations. Different causal factors like thalidomide, alcohol, amniotic band syndrome, maternal diabetes and autosomal recessive mutations have been proposed.

We report a case of isolated bilateral upper limb amelia in a woman on antituberculous therapy (ATT) who consumed an unidentified drug for sex selection during pre conceptional period and first trimester.

Case Report

Thirty-two year old para 4 was admitted with severe anaemia and puerperal pyrexia following home delivery of a live born male infant conducted by trained birth attendant in a village 12 days back. Except for absence of both upper limbs, baby was otherwise healthy with no other congenital dysmorphic features (Fig. 1). She had healthy living three

daughters, all born by uneventful vaginal deliveries. Patient gave history of having taken two courses of AKT for 6 months each, one 3 years back when she was not pregnant and the other was started from sixth week of gestation during this pregnancy. The patient received the combination of rifampin, isoniazid and ethambutol. Desirous of having a male baby, she consulted a quack who gave her some medications in powder form. She took them in the month preceding the one with missed period and also in the first trimester. She did not take any antenatal care and gave birth to an infant with absent both upper limbs. X-ray examination of baby's whole body did not reveal any other bony anomalies (Fig. 2). Ultrasound examination for ruling out internal organ malformations was reported to be normal. Mother was investigated for puerperal pyrexia. She received four units of packed red cells. At the time of discharge, all her biochemical investigations including blood sugar examination were normal.

Discussion

Amelia is an extremely rare congenital anomaly with an incidence of 1.5 per 100,000 live births and 7.9 per 10,000

Singhal S. R. (\boxtimes), Reader \cdot Agrawal U., Senior Resident \cdot Sharma D., Professor

Department of Obstetrics & Gynaecology, Pt. B.D. Sharma PGIMS, 14/8FM, Medical Enclave, Rohtak 124001, Haryana, India

e-mail: savita06@gmail.com





Fig. 1 Showing male infant with bilateral absent upper limb



Fig. 2 Normal whole body X-ray of male infant (Absent upper limb shadows)

still births. Upper limb amelia has an incidence of 7 per 1,000,000 live births. Usually bilateral branchial amelia is associated with other malformations such as facial clefts, renal anomalies, ear anomalies and central nervous system malformations. Such infants have a very poor prognosis and usually die within first year of life.

In Indian sub-continent desire for having a male baby dominates fertility and population statistics. Consumption of unknown drugs for having a male child is very common in this part of the world, especially among illiterate women from rural areas. We did not know the exact nature of the drug taken for sex selection. But we feel that it had a definite role to play in this malformation as AKT is relatively safe in pregnancy with negligible risk of teratogenicity. This report also highlights the existing malpractices by quacks who continue to flourish thanks to ignorance and gender bias amongst the uneducated strata of society.

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