



ORIGINAL RESEARCH PAPER

Obstetrics & Gynaecology

DICEPHALUS PARAPAGUS CONJOINED TWINS

KEY WORDS:

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INTRODUCTION

- Conjoined twins represent one of the rarest forms of twin gestation.
- They occur in roughly 1 in every 200 identical twin pregnancies and are always identical.
- The incidence ranges from 1 in 50000 to 1 in 100000 live births. The prognosis is not good, with 60% of conjoined twin gestation resulting in miscarriage or stillbirth.
- As this situation carries high risk, early diagnosis and management of delivery is extremely important.

CASE REPORT

- A 31-year-old G2P1L1 woman was referred to our hospital at 18-week gestation age due to conjoined twin (parapagus) diagnosed by ultrasonography.
- Her marital life is 4 years which is a non consanguinous marriage.
- Her last menstrual date was unknown.
- She had no personal or family history of twins and no exposure to radiation, infection or medication.
- Sonography was performed and two fetuses with 2 arms, 2 legs and 2 heads with a single trunk and single heart were visualized along with a single umbilical cord.
- The placenta was localized anteriorly, and one artery and one vein were seen in the umbilical cord.
- On the basis of these findings, the diagnosis of parapagus conjoined twins was made.
- The parents were informed about the malformation and the twins' poor chance for survival. The parents decided to terminate the pregnancy.
- After taking a written informed consent from the family the termination of pregnancy was done.
- After induction of labor with foleys along with tablet misoprostol, a vaginal delivery of the conjoined twins was achieved without complication after two days.

DISCUSSION

- Conjoined twins are a rare occurrence, with a female predominance as high as 3 : 1.
- Ultrasound is very useful for diagnosis; various clues are observed such as unusually close fetal apposition, spinal extension, and a single heart.
- Once the diagnosis of conjoined twins is made, it is necessary to characterize the type and severity of the abnormality in order to estimate the chances for the infants' survival after delivery.
- Conjoined twins are classified according to the most prominent part of interconnection.
- There are many possible sites of fusion: cephalopagus, thoracopagus, omphalopagus, ischiopagus, parapagus, craniopagus, rachipagus, and pyopagus.
- Our patient's twins were dicephalus parapagus, sharing a conjoined pelvis, a single symphysis pubis, and a single trunk with 2 heads.
- Unfortunately, our patient's twins shared a single heart, making surgical separation incompatible with life.
- We informed the patient and her partner about the poor prognosis.
- In the present study the family has chosen for termination of pregnancy.

CONCLUSION

- Conjoined twins are associated with a high perinatal mortality; therefore, making an early diagnosis with ultrasonographic examination of conjoined twins gives the parents a chance to elect pregnancy termination.



Figure (a): usg Showing A Conjoined Twin With Two Heads, Two Upper Limbs, And Two Lower Limbs



Figure(b): photograph Showing A Conjoined Twin With Two Heads, Two Upper Limbs, And Two Lower Limbs

REFERENCES

1. Knopman J, Krey LC, Lee J, Fino ME, Novetsky AP, Noyes N. Monozygotic twinning: an eight-year experience at a large IVF center. *Fertil Steril* 2010;94:
2. Mutchinick OM, Luna Muñoz L, Amar E, et al. Conjoined twins: a worldwide collaborative epidemiological study of the International Clearinghouse for Birth Defects Surveillance and Research. *Am J Med Genet Part C Semin Med Genet*. 2011;157(4):274-287. 10.1002/ajmg.c.30321
3. Baken L, Rousian M, Kompanje EJO, et al. Diagnostic techniques and criteria for first trimester conjoined twin documentation: a review of the literature illustrated by three recent cases. *Obstet Gynecol Surv*. 2013;68(11):743-752. 10.1097/OGX.0000000000000000