

A case of late single fetus demise in dichorionic diamniotic twin pregnancy

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Introduction - Late single fetal demise in dichorionic twin with successful outcome of co-twin is a common event. Following the death of one twin, the risk of dichorionic co-twin demise is 12%, whereas risk of neurological abnormality of the surviving co-twin is 1%.

Case report - A 22-year-old primigravida with dichorionic diamniotic twin (DCDA) presented at 28+ weeks of gestation with demise of one fetus. Ultrasound revealed that the surviving twin's biometry corresponding to 28 weeks and demised twin corresponding to 25+ weeks. Doppler flow study was normal on the survivor. Mother was asymptomatic and the hematological investigations were normal.

She developed preterm prelabour rupture of membrane at 29 weeks of demised fetus and was managed with prophylactic antibiotic.

The pregnancy continued up to 34 without any complications. At 34 weeks of gestation, she developed spontaneous onset of labour and delivered live male fetus 1700g with an Apgar of 7/10/10 and the macerated still born female fetus with the weight of 500 grams. The baby was managed at premature baby unit and was discharged on day 14 in good condition.

Conclusion - Even though there are no clear consensus with regards to timing and mode of delivery in such scenario as in our patient, in the absence of any complications such as chorioamnionitis and growth restriction, vaginal delivery after conservative management is a reasonable option.