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RESEARCH ARTICLE

RESCUE CERVICAL CERCLAGE WITH VAGINAL PESSARY SUPPORT AND ALTERNATIVE TOCOLYTICS IN CORONA POSITIVE , DCDA TWIN WITH HIGH LEAKING AND 16 WEEKS OF HOSPITALISATION LEADING TO SUCCESSFUL OUTCOME - A CASE REPORT

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Abstract

A twin gestation invariably leads to a certain extent of cervical length shortening . If this reduction is also associated with gradual dilatation of internal os and various biochemical , mechanical changes in cervical matrix , this can lead to mid trimester pregnancy loss or preterm labour. This is a case report on Dichorionic , Diamniotic twin pregnancy with cervical incompetence in which rescue cerclage was performed along with judicious use of tocolysis and vaginal pessary.

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Introduction:-

Case Report:-

A primigravida , 33 yrs old , who conceived through in vitro fertilisation presented with per vaginal bleeding at around 6 weeks of amenorrhea , on transvaginal scan it was revealed to be twin live Dichorionic , Diamniotic gestation with subchorionic hematoma approx. . 8 *6 mms in one sac . Woman was advised to take rest , given micronized progesterone , explained about scan and advised for follow up . Her routine antenatal investigations were also performed.

On subsequent visits , at around 18 weeks when a detailed fetal scan was advised , it showed normal fetal growth , cardiac activity but cervical length was only 1.2 cms with funneling of internal os and subsequent bulge of membranes through it . She also had complain of watery discharge per vaginum . After explaining her situation and performing her routine blood investigations , normal vaginal swab reports she was planned for rescue McDonald cervical cerclage which was done in steep tredelenberg position after inflating bladder with 300ml of saline to aid pushing up of bulging membranes with mersilene tape , reinforced by vicryl no. 1 suture as her cervix was papery thin . She was hospitalised for further care and tocolytics . We administered her Atosiban , Nifedipine , Ritodrine , Terbutaline respectively in weeks alternatively and a vaginal silicone pessary was also inserted with the idea of strengthening burden on pivotal cervical suture . She also was given bed rest , catheterised for a long time , low molecular weight heparin with continuous monitoring of her vitals , antenatal fetal growth . At around 28 wks she acquired Covid – 19 infection which was diligently treated . Her next scheduled scan at 32 wks showed fetal growth discrepancy , following which she was given rescue steroids for fetal lung maturation , a cesarean section was performed at 36 weeks delivering two healthy male fetuses and cervical stitches were removed subsequently.

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Ref. By: Dr. Mrs. Kalpana Jain	Date: 06.10.2020
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OBSTETRIC SONOGRAPHY / BIOMETRIC SCAN

L.M.P:- 24.08.2020 GA BY LMP: 6 week 1days

Uterus is enlarged and gravid.

Twin well formed intrauterine gestational sac seen.

Yolk sac & Fetal pole is seen in each gestation sac

Both fetal cardiac activities seen .

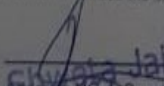
Fetus -1-C R L:- 0.27 cm – corresponding to 5 weeks 6 days.
 Fetus -2-CRL- 0.28 cm - corresponding to 5 weeks 6 days.

Trophoblastic reaction- Small SCH app 8mmx6mm size seen at lower pole of lower pole gestation sac.

Both Adnexa clear.
 Corpus luteal cyst seen .
 Internal os closed. Cervical length—4 cm .

- **IMPRESSION: Twin live Dichorionic /Diamniotic intrauterine pregnancy of mean gestational age of 5 wks 6 days & 5 wks 6 days respectively.**
- **Small SCH app 8mmx6mm size seen at lower pole of lower pole gestation sac.**
- **Right fallopian tube is thickened app 2.7cmx7mm in size.**
- **Bilateral enlarged hyperstimulated ovaries with mild to moderate free fluid in POD, Normal intraovarian arterial & venous flow is seen .**

(This is not an anomaly scan)
 (I Dr. Shweta Jain declare that while conducting ultrasonography of above mentioned patient have neither detected nor disclosed the sex of her fetus to anybody in any manner.)


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first trimester dating scan

Age & Sex	33 Y/Female	Report Date	07/01/2021
Consultant	DR. JAIN KALPANA (MBBS, MS-(OBST.&GYNAE))		
Referred by	Dr. Jain Kalpana (MBBS, MS-(OBST.&GYNAE))	Lab No.	6

USG OBSTETRIC

Known case of Di-amniotic, Di chorionic Twin pregnancy

L.M.P.-24/08/2020 G Age : 19 wks 3 days EDD By LMP : 31/05/2021

Uterus is enlarged in size & gravid .There is Twin pregnancy .Both the foetii are changing position. The movements & cardiac pulsations of both the foetii are normal.

Growth parameters are :

Fetus I :-
(BPD 46 mms,HC 172 mms, FL 27 mms,AC 115 mms)

Fetus II :
(BPD 44 mms,HC 158 mms, FL 29 mms,AC 132 mms)

The amount of liquor is normal around both the foetii .
The Placenta is anterior and posterior, away from internal os . No visible separation of placentae or membranes.
The cervical length is less (2.6 cm)with McDonald's stitches in place.
No Gross anomaly could be seen in both.

IMPRESSION:
Dichorionic diamniotic (DCDA) twin pregnancy of about 18-19 wks (+/- 2 weeks)with reduced cervical length.

Follow up will be help

This is a routine growth scan ,which tells about the number & size of foetus major obvious anomalies ,location & maturity of the placenta and amount of liquor.For congenital anomalies, detailed targeted study is require in second trimester b 22-24 wks of gestation age.
(It must be noted that detailed fetal anatomy may not be visible due to technical difficulties related to fetal position ,amniotic fluid volume ,fetal movements ,maternal abdominal wall thickness and tissue echogenicity.Therefore all fetal anomalies may not necessarily be detected) .The facial and minor structural anomalies can be seen by 4D exam.The fetal cardiac anomalies are detected by fetal echo.

I, Dr. Sunita Sullere, declare that while conduction sonography I have neither detected nor disclosed the sex of the fetus to anybody in any manner

Dr. Sunita Sullere
(MBBS, DMRD)
Consultant Radiologist

07/01/2021 15:59
Typed by rnh/c
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Scan After Mcdonalds Cervical Cerclage In Situ

Conclusion:-

This case of a rescue cervical cerclage and pessary used simultaneously can be an example of an effective method of cervical incompetence treatment in twin pregnancies .

References:-

Effective treatment of cervical incompetence in a monochorionic monoamniotic twin pregnancy with a rescue cervical cerclage and pessary--a case report and review of literature by

- GinekologiaPolska 83(12):946-9

Authors ;Katarzyna Kosinska-Kaczynska , Iwona Szymusik , et al.

2. Cervical insufficiency and cervical rescue cerclage – by Ricard Brown , Robert Gagnon , et al.