Herlyn-Werner-Wunderlich syndrome (HWWS) – An anomaly of mullerian and mesonephric duct handled at a low resource setting

Kaveena Amirthalingam, Shasindran Ramanujam

Obstetrics and Gynaecology Unit, Hospital Teluk Intan, Perak, Malaysia

ABSTRACT

Introduction: Herlyn-Werner-Wunderlich syndrome (HWWS), commonly known as OHVIRA syndrome, is a characteristic triad of obstructed hemivagina, uterus didelphys, and ipsilateral renal agenesis. The condition was first described in 1922, with a reported incidence of 0.1 to 3.8% throughout the world. Case Description: We report a case of a 14-year-old girl who attained menarche at 12 years and presented with severe abdominal pain, urinary retention, and amenorrhea. Pelvic ultrasound scan revealed a didelphic uterus with a vague mass within the vagina. CT Urogram revealed ipsilateral renal agenesis with normal bladder. MRI pelvic performed revealed a didelphic uterus with obstructed hemivagina. The patient underwent a diagnostic vaginoscopy, whereby the hemivagina septum was incised and the opening was made for the flow of menses. A cystoscopy was performed to rule out vesicovaginal bulge or fistula. A diagnostic laparoscopy was performed to confirm the uterine didelphys and rule out other anomalies.

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Delivery outcome with intrapartum epidural analgesia – 3 years review in a tertiary district hospital in Sabah

M Azizan MR, Fay N, Siti Aishah T

Department of Obstetrics and Gynaecology, Keningau Cluster Hospital, Keningau, Sabah, Malaysia

ABSTRACT

Introduction: Epidural analgesia is considered one of the most effective methods for pain relief during labor. However, there is high-level evidence that epidural analgesia is associated with a prolonged second stage of labor and increased instrumental delivery rates, therefore the outcome remains debatable. We aim to audit an association of epidural analgesia during the intrapartum period on the mode of delivery and neonatal outcome. Method: This was a retrospective case study of women enrolled in epidural service delivered in Hospital Keningau from 2019 to 2021. We aim to study the relationship between epidural analgesia on the mode of delivery and neonatal outcome. Result: In our study, we found no significant increment risk of instrumental vaginal delivery and cesarean delivery following epidural analgesia. A total of 10,814 terms, vaginal deliveries at Hospital Keningau from January 2019 to December 2021 were included. 528 patients (4.88%) received epidural analgesia as the preferred mode of analgesia during labor. The majority of parturient who received epidural delivered vaginally. Meanwhile, 100 parturient (18.93%) requiring vacuum-assisted deliveries and 171 parturient (32.39%) delivered via emergency cesarean section, mainly for fetal distress. 5.3% of newborns delivered were admitted to NICU for various reasons. Fetal morbidity namely hypoxic-ischemic encephalopathy incident is very low. Conclusion: Labor epidural analgesia is a preferred option for pain management in labor as it neither increases the incidence of instrumental assisted delivery nor cesarean section and it does not influence the neonatal outcome.