

External cephalic version in singleton term pregnancies: A 5-years retrospective analysis

Ong YW, Siti Aishah T

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

ABSTRACT

Introduction: Breech presentation complicates 3-4% of term deliveries and is more common in nulliparous women and in preterm deliveries. External cephalic version (ECV) is the manipulation of the fetus, through the maternal abdomen, to a cephalic presentation. The outcomes of ECV performed in Keningau Cluster Hospital in Sabah were analysed to determine to what extent the caesarean section rate can be reduced by an ECV procedure, and to compare the success rate of ECV among multiparous and nulliparous women. **Methods:** All women who were referred to the Hospital Keningau with breech presentation at 37 weeks or later and underwent an attempt of ECV between 2017 and 2021 were recorded and retrospectively analysed. **Results:** Of 249 cases 80% were successful. Among these, the caesarean section rate was 13%. The caesarean section rate among the unsuccessful cases was 98% as spontaneous reversion happened in 2 % of the cases. The successful cases which remained in cephalic presentation, 92% were delivered vaginally and 15 were delivered by caesarean section mainly due to fetal distress. The success rate of ECV among nulliparous women was 58%; and among multiparous women was 85%. Neither severe maternal and fetal complications nor side effects occurred. **Conclusions:** Successful ECV beyond 37 weeks of gestation significantly decreases the incidence of caesarean section and therefore, it's sequelae. ECV also reduces the rate of vaginal breech delivery and hence, it's complications. Success rate of ECV among multiparous women is also significantly higher than nulliparous women.

Heterotopic pregnancy in spontaneous conception: A report of two cases and literature review

Nur Amirah A, Lim CS, Siti Aishah T

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

ABSTRACT

Introduction: Heterotopic pregnancy is defined as simultaneous intrauterine and ectopic gestation with at least 2 pregnancies in different implantation site. The incidence of heterotopic pregnancy has increased with the advent of assisted reproductive therapy. Heterotopic pregnancy is extremely rare among women who conceive naturally. **Case Description:** We present a report of two cases discussing heterotopic pregnancy in a spontaneous conception. The first case was a 42-year-old lady in her 6th pregnancy who was asymptomatic, and the clinical examination was unremarkable. Transabdominal scan showed thickened endometrium lining, left adnexal mass and free fluid with serum BHCG 3,006 mIU. Intraoperative confirmed left tubal pregnancy and removed, therefore proceeded with suction and curettage resulting in 30 cc product of conception evacuated. The second case was a 30-year-old lady in her 3rd pregnancy, presented with lower abdominal pain, pervaginal spotting for one day but denied passed out product of conception. Upon assessment, non-remarkable clinical findings and vital signs was stable. Transvaginal ultrasound showed an intrauterine gestational sac with CRL measuring 10.1 mm ~ 7 weeks, significant left adnexal mass with organized clot measuring 6 cm x 4 cm and free fluid at pouch of Douglas. Diagnostic laparoscopic revealed left leaking fimbriae pregnancy, therefore left salpingectomy and suction and curettage performed with 20cc product of conception evacuated. In both cases, histopathological examination confirmed heterotopic pregnancy. **Discussion:** As heterotopic pregnancy is a rare occurrence especially in spontaneous conception; thus a thorough clinical examination and radiological examination is important.