LOCKED TWINS

A Case Report

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Locked twins is one of the rare anomalies of twin births. The frequency of its occurrence is one in every 90,000 deliveries and one in every 1,000 twin pregnancies.[1,2] Nissen, in 1957, compiled 69 cases of locked twins. In this group, 72 per cent of the mothers were prima gravida, and 75 per cent were under 30 years of age.[3]

The following case of locked twins is presented because its occurrence is considered sufficiently rare and because of the successful outcome in this instance. Furthermore, no such case has been previously reported in the Turkish medical literature.

Case Report

The patient, a 24 year old woman, gravida 1, para 0, had been seen regularly for prenatal care at the Department of Obstetrics and Gynecology of Hacettepe Medical Center. She was admitted to the hospital in the thirty seventh week of gestation with a ruptured membrane, which had occurred five hours prior to admission, on June 8, 1966. At this time, uterine contractions were occurring every two minutes and lasting 45 seconds. Vaginal examination revealed three cm dilatation of the cervix which was 60 per cent effaced. The presenting part was at the level of station -3. Two hours later, contractions came once a minute and lasted 50 seconds. Dilatation was complete but no further progress was obtained. The x-rays taken at this time showed the twins to be interlocked with the head of the breech baby above the pelvic inlet (Figures 1 and 2).

A cesarean section was performed and when the uterus was opened, Baby A was found to be in breech position and the head of Baby B was deflected by the neck of Baby A at the level of the linea innominata. Baby B was delivered first. The lower segment of the uterus was quite thin. The fused placenta with two uniovular cords was expressed with no difficulty. Both of the babies were girls; Baby A weighed 2,680 grams and Baby B weighed 1,880 grams. There was no sign of fetal stress inmediately after birth or later.

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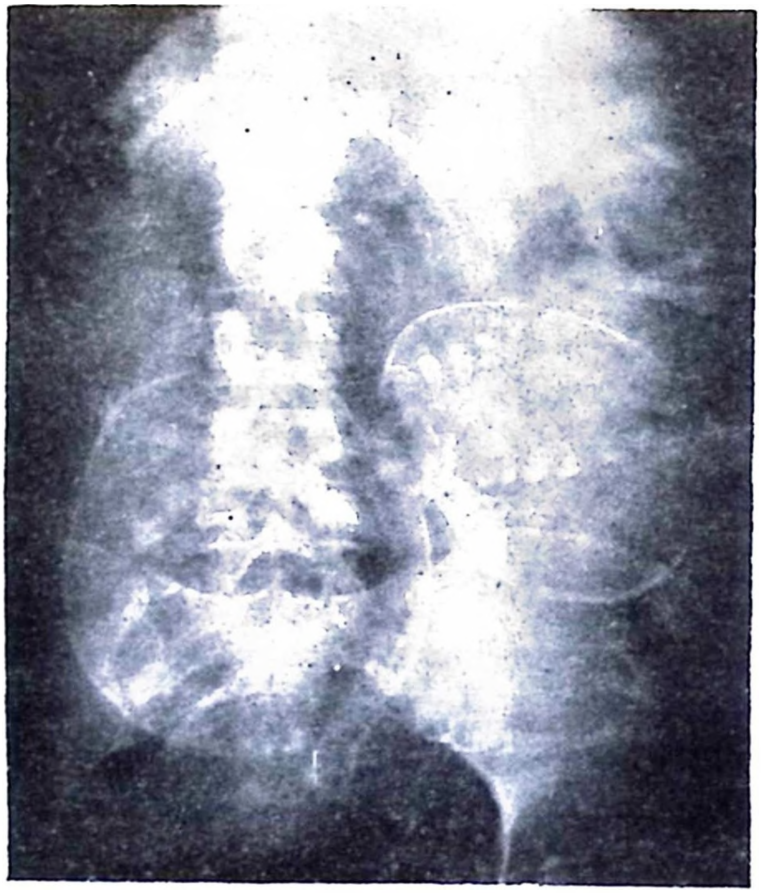

Figure 1. Anteroposterior view.

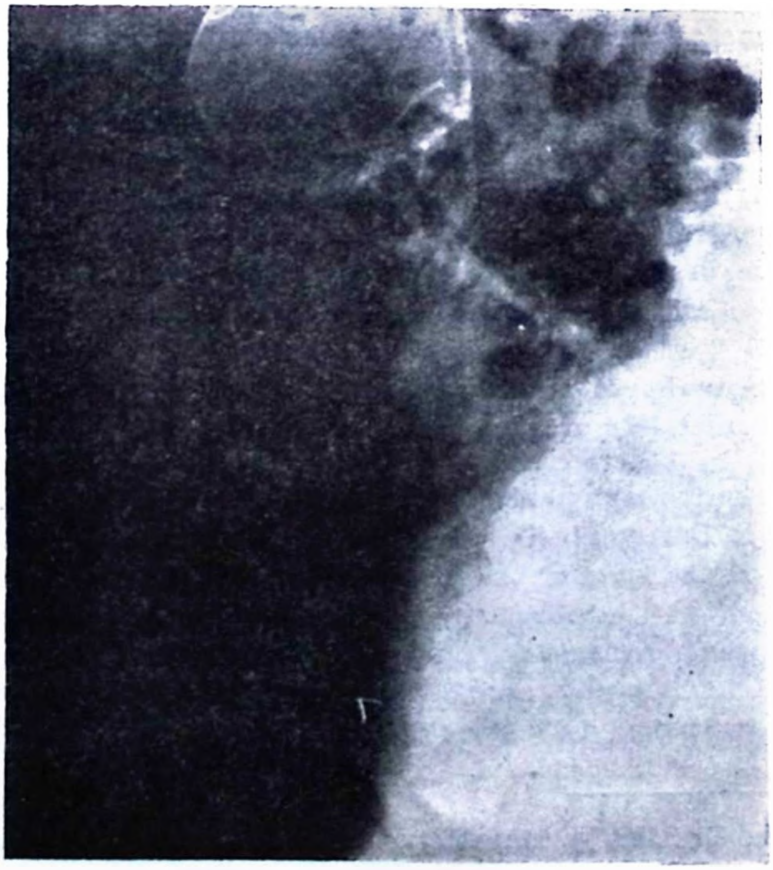

Figure 2. Lateral view.

Discussion

In the most common type of interlocking twin pregnancies, Baby A is in breech position and Baby B in a vertex presentation in the pelvis. The chin of the baby in breech position usually impinges on the chin of the second baby. Half of these locked infants are stillborn and 72 per cent of the stillborns are Baby A. According to the investigations of Nissen, of the 138 infants delivered from locked twin pregnancies, only 78 babies survived. Of the 60 infants who died or were stillborn, 44 were Baby A. Embryotomy was responsible for the death of 28 infants. The overall prenatal mortality was 43 per cent. There was no maternal mortality or uterine rupture in Nissen's entire series.

The cause of infant death and prolonged labor is failure to diagnose locked twins. For this reason all twin pregnancies should be carefully studied roentgenologically to determine whether or not the twins are interlocked.

REFERENCES

1. Kimball, A. P. and Rand, P. R. : Maneuver for simultaneous delivery of chin-to-chin locked twins, Am. J. Obst. and Gynec. 29 : 1167, 1950.
2. Nissen, E. D. : Twins : collision, impaction, compaction and interlocking, Obst. and Gynec. 11 : 514, 1958.
3. German, L. J. and Taylor, E. : Locked twins, J. Int. Coll. Surg. 43 : 155, 1965.