

Identical Triplet Delivered at Dr L H Hiranandani Hospital on 17th September 2012

Mrs. S K presented to the OPD 8 months ago like any other normal patient with a missed period. On examination the Obstetrician Dr Anita Soni found that the uterus was bigger in size and she advised the patient an urgent ultrasound to confirm the gestational age and rule out multiple pregnancy. Much to everyone's surprise the ultrasound picked up a triplet pregnancy. Since the couple already had a living issue, the couple was offered a termination of pregnancy but the couple decided to continue with the pregnancy. All risks and consequences were explained to the couple and they decided to take one day at a time.

At 11 weeks of gestation we contemplated an embryo reduction but since it was a monochorionic triplet pregnancy, we had to abandon the idea of embryo reduction.

During the pregnancy the patient developed hypothyroidism, anemia, gestational diabetes mellitus, pregnancy induced hypertension with thrombocytopenia and grade III oedema. By 34.5 weeks patients had severe uncontrolled pregnancy induced hypertension and could not get around with daily activities due to over distension of abdomen and oedema feet.

Due to her uncontrolled PIH with liver affection, a decision was made to take her up for emergency caesarean section. Three healthy female babies were born weighing 2.36kg, 2.02kg and 2.31kg respectively.

Placenta itself weighed about 1 kg. Due to over distension, the uterus refused to contract intra-operatively inspite of uterotonic agents. Hence B – lynch suture was taken on the uterus. Babies were transferred to the mother. The mother was transferred 2 units of packed cells in view of her anaemia.

Mrs. S K recovered well post operation and was discharged on day like any other patient with healthy babies.

