

Twin pregnancy with both complete hydatid form mole and coexistent alive fetus: Management and prognosis

Achour Radhouane

El-Manar University Tunis, Tunisia

Twin pregnancy consisting of a complete hydatid form mole coexisting with a live fetus (CHMCF) is a rare condition with an incidence of 1 in 22000 to 1 in 100000 pregnancies. In 2015, we reported a case of complete hydatid form mole with a healthy female neonate weighing 2270 g born by a normal spontaneous vaginal delivery. Although a CHMCF is described in the literature, clinical information is limited and is associated with a high risk of many serious complications such as preeclampsia, antepartum hemorrhage, trophoblastic embolism, fetal death and even a malignant change of this trophoblastic tissue. Management of multiple pregnancies with a CHMCF still remains uncertain. In the past, most CHMF gestations were terminated immediately following diagnosis because of poor information concerning clinical features and natural history. But from the results of our case, we carefully suggest that in a CHMCF with a normal karyotype and no gross abnormalities on sonography, pregnancy may be continued as long as maternal complications are absent or, if present, controllable.

Biography

Achour Radhouane is associate professor at faculty of medicine of Tunis-Tunisia; He has published many basic and clinical articles in relation to gynecology and obstetrics, his research interests include Rare Diseases in gynecology and prenatal diagnosis. He serves as associate professor, Emergency Department of Gynecology and Obstetrics in maternity and neonatology center Tunis ; Faculty of Medicine of Tunis- El Manar University of Tunis-Tunisia. He also serves as member of the editorial team for: Asian Pacific Journal of Reproduction, the Global Journal of Rare Diseases, Journal of Neonatal Biology, Current pediatric research, Obstetrics and Gynecology: Open access, Pediatrics and Health Research and Member of the Science Advisory Board.

Radhouane.A@live.com

Notes: