

Poster Number: EP 326

Name: Dr. Shraddha Mehta, Dr.Gita Guin, Dr.Bharti Sahu, Dr.Archana Thakur, Dr.Deepika





Title: Placenta Percreta- Saviour Of Fetus in Ruptured Uterine horn

INTRODUCTION –Incidence of pregnancy in rudimentary horn is about 1,76000. It usually present in 2nd trimester with rupture of horn and catastrophic haemorrhage.

OBJECTIVE- We report a rare case of full term pregnancy in rudimentary horn (U4aC0v0) with live fetus. The degree of development of horn with respect to endometrium function, musculature shape and size is closely related to pregnancy outcome

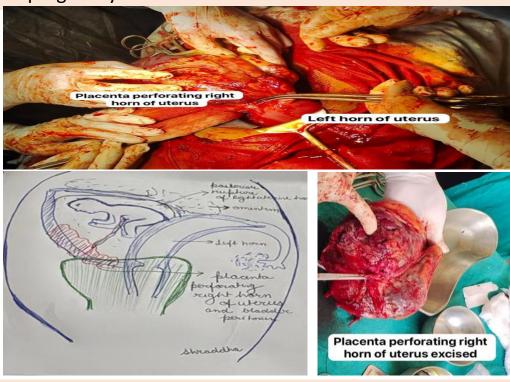
CASE REPORT

A 20 year G1PO reported to NSCBMCH with diagnosis of central placenta previa with fetal distress. On admission, vitals stable. On P/A - abdomen was tense & tender. Fetal parts felt superficially FHS -+/R

USG – Placenta previa with features s/o **PAS**. Intrauterine SLF of MGA 37 week with FCA seen severe Oligohydramnios



Intra operative findings — Mild hemoperitoneum was present. Bowel and omentum were adhered to uterus, Adhesiolysis was done. A live fetus was extracted from abdominal cavity. On inspection a left uterine horn was found which was normal and intact. There was no sign of placental separation and placenta was seen invading the right rudimentary horn and bladder peritoneum. Clamps were applied to right rudimentary horn of uterus and was excised along with adhered placenta.



Discussion – In PAS, placenta is deeply adhered to myometrium and serosa of rudimentary uterine horn. Even after rupture of the rudimentary horn, there was no separation of placenta and continuous blood flow to the growing fetus ensured its survival till term and beyond.

Conclusion – With multidisciplinary approach and intensive care a healthy mother with her newborn were discharged on post operative day 12.