

Unilateral Twin Tubal Pregnancy

By MAX THOREK, M. D.,

Chicago,

Surgeon in Chief to the American Hospital.

The extreme rarity of twin tubal gestation renders it interesting, and an added element of interest is present when, as in this case, the well advanced stage of the pregnancy is considered. Twin, or multiple, tubal pregnancy may be divided into three general types of groups: unilateral, in which there are two or more embryos in one tube; bilateral, or pregnancy of both tubes, and those cases in which tubal gestation accompanies an otherwise normal uterine gestation. The latter is not, strictly speaking, true twin tubal except when there are more than one embryo extrauterine. In my study of this subject only those cases in which there was a multiple pregnancy of one tube were considered.

Pool and Robbins (1) give an interesting review of the cases reported prior to 1910, including one of their own. Their study included twenty-nine authentic cases, with more or less complete data on each. They also mention the findings of Pulcher, McCalla, Schauta and Costa, who reported, respectively, eighteen, twenty-five, nineteen and eleven positive cases, although Costa considers fifteen other cases as presumably authentic unilateral twin tubal pregnancy.

J. F. Baldwin (2) reported a case which had been diagnosed as procidentia. Upon opening the abdomen there was found a twin pregnancy of one tube and a single embryo in the opposite tube. The embryos were very early, being about the size of peas. This case was reported in 1913.

Gordon Taylor (3) in 1918 reported finding one

complete embryo and part of another in a single gestation sac outside a ruptured right tube. Contrary to the rule, his case was in a young nullipara.

Noel Braham (4) reported a twin tubal pregnancy, with tubal abortion of one fetus, in 1914. In this case the patient gave a history of a six months' pregnancy, although the fetuses found measured but seven inches in length, and the fetus, which was extruded from the tube, showed signs of degeneration.

J. H. Carstens (5), of Detroit, had a case of triple tubal gestation in 1919. One of the features worthy of note was the finding of a single pregnancy of the right tube at about six weeks' development, while a twin pregnancy of the left tube was estimated as being that of three weeks. His patient also was a nullipara.

Of the cases reviewed there is one instance of multiple pregnancy of the tube in which there were five embryos of three or probably four months' development. This case was reported by Professor Treube (6) and verified by an anatomical specimen. Saenger (7), Krusen (8) and Barbat (9) each reported the occurrence of triple tubal gestation of one tube, or unilateral. The cases of Carstens and Baldwin were instances of bilateral tubal pregnancy.

Collating the data in these cases, it is found that the left tube is involved eight times to the right tube five, or almost twice as frequently. As to the duration of pregnancy, fifteen per cent. terminated before the middle of the second month. Twenty-five per

cent. reached three months or more. The remainder, or sixty per cent., terminated between the sixth and tenth weeks. For the same reason that ectopic pregnancy in general fails to develop beyond a certain period—except in rare instances—so must twin tubal pregnancy fail, because of the poor nourishment and the cramped surroundings afforded by its unnatural environment.

Of my case, the duration of which is estimated as being four months or more, a brief report is given.

CASE.—Mrs. N. S., hospital number 5439; white, female, married, aged twenty-nine. Family history: Parents living and well; one brother and two sisters, all in normal health. Personal history: Patient had had the usual diseases of childhood, but no other serious illness. Menstrual history: Patient began menstruating at the age of fourteen, periods regular, and of the twenty-eight day type, lasting four days; no unusual pain after the first day. Pregnancies: Patient is a parvipara, both children living and well; normal deliveries.

Present illness: After a siege of irregular menstruation for the past three or four months the patient was seized by a sudden attack of severe pain starting low down in the left side and becoming more general over the entire lower left abdominal quadrant. This was attended by faintness. She had menstruated normally five months ago. Of late there had been a periodical vaginal discharge of brownish, foul fluid, lasting two or three days. She had been constipated and easily nauseated during the past four months. Physical condition on admission to hospital: Brought

the left and above the uterus. The mass was only slightly movable, firm in consistence, and seemingly attached to the uterus.

A diagnosis of ruptured ectopic pregnancy was made and hurried preparations were made for opera-

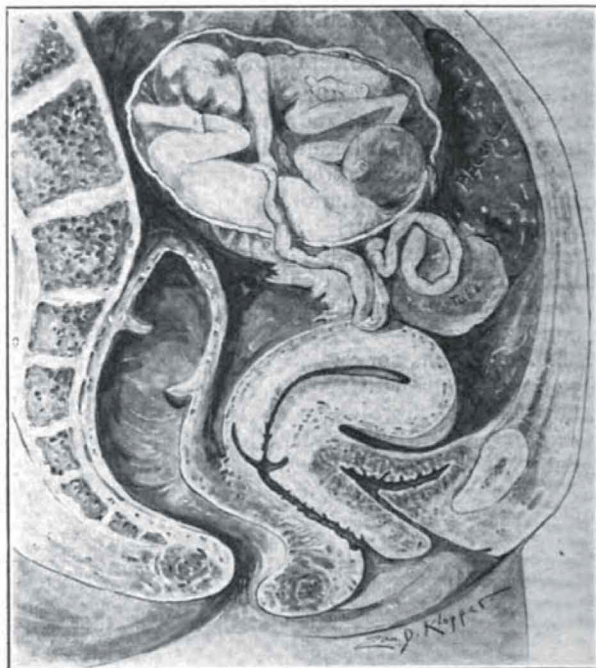


FIG. 2.—Schematic appearance of lower abdominal contents at time of operation.



FIG. 1.—Fetuses removed in ruptured ectopic pregnancy of four months duration; actual length of fetuses six and a quarter inches.

to the hospital in ambulance in a condition of impending collapse; head, neck, chest and extremities normal; abdomen distended, more apparent on the left side. A bimanual examination showed the uterus to be enlarged and soft. A large mass, some six or seven inches in diameter, was present, lying to

tion. The operation was performed under gas ether anesthesia. Left parametrian incision was made for celiotomy. On opening the abdomen a considerable quantity of dark, clotted blood was found free in the peritoneal cavity. The right tube was normal, the uterus enlarged and soft. The left tube, which was enormously enlarged, was found to be ruptured, and the fetuses which it had contained were lying free within the abdominal cavity. The left tube, together with the products of conception, were removed and the toilet of the peritoneum looked after. The abdomen was closed, one cigarette drain being used. The patient made an uneventful recovery.

Examination of the specimen removed (which consisted of the two fetuses, the left tube, placenta, and membranes) showed two male fetuses of about four months' development. They were attached to a common placenta. The gestation sac and tube were found ruptured.

A photograph of the embryos and a schematic drawing of the abdomen and its contents give a very definite idea of the entire findings and their relations.

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