

COEXISTING EXTRAUTERINE AND INTRAUTERINE PREGNANCY, WITH THE REPORT OF A CASE AND A STUDY OF THIRTY-FIVE CASES PUBLISHED SINCE 1913

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THE coexistence of extrauterine and intrauterine gestation, or "compound pregnancy" as Simpson called it, occurs more frequently than is commonly supposed. Simpson in 1904 collected a series of 113 cases, including one of his own. He found fifty-six cases reported prior to 1893 and a similar number between that year and 1903. Neugebauer in 1907 published a monograph which included a series of 170 cases. In 1913, he presented a new series of seventy-three cases, bringing the total of recorded instances up to 243.

I have collected a group of thirty-five cases published since 1913, to which I have added one of my own. For obvious reasons, this tabulation is not complete. Since the literature on ectopic gestation is now so voluminous and many articles are necessarily indexed under misleading titles that do not give a clue to the true nature of the case reported, it would require a most exhaustive research to make a complete survey of this subject.

The subject of compound pregnancy presents an interesting study in superfetation. With regard to the priority of the extrauterine and the intrauterine pregnancy, respectively, various combinations may

TABLE I. AGE OF MOTHER IN 165 CASES

YEARS	CASES	PERCENT (G)
20-25	22	13
26-30	52	32
31-35	55	33
36-40	30	18
41-45	5	3
46-50	0	0
51-55	1	1

N.B. Percentages adjusted to nearest fraction.

TABLE II. PARA OF MOTHER IN 117 CASES

Nullipara	10
I para	19
II para	25
III para	18
IV para	9
V para	10
VI para	4
VII para	3
VIII para	2
IX para	2
X para	2
XII para	1
XIX para	1
Multipara (figure not stated)	11

exist. The two pregnancies may take origin at the same time; the uterine conception may antedate the extrauterine, or vice versa; and again the woman may become pregnant in the uterus while carrying the dead products of an ectopic gestation.

From an analysis of the seventy-three additional cases published by Neugebauer, Simpson's series of 113 cases, and my own additional

TABLE III. DURATION OF INTRAUTERINE PREGNANCY IN 196 CASES

MONTHS	CASES	PER CENT
$\frac{1}{2}$	0	0
1	1	1
$1\frac{1}{2}$	14	7
2	25	13
$2\frac{1}{2}$	9	5
3	35	17
$3\frac{1}{2}$	7	4
4	8	4
$4\frac{1}{2}$	3	1
5	2	1
$5\frac{1}{2}$	2	1
6	6	3
$6\frac{1}{2}$	1	1
7	8	4
$7\frac{1}{2}$	0	0
8	2	1
$8\frac{1}{2}$	0	0
Term	73	37

N.B. Percentages adjusted to nearest fraction.

TABLE IV. DURATION OF EXTRAUTERINE PREGNANCY IN 164 CASES

MONTHS	CASES	PER CENT
$\frac{1}{2}$	1	1
1	1	1
$1\frac{1}{2}$	11	7
2	37	23
$2\frac{1}{2}$	8	5
3	26	16
$3\frac{1}{2}$	7	4
4	9	5
$4\frac{1}{2}$	4	2
5	5	3
$5\frac{1}{2}$	1	1
6	5	2
$6\frac{1}{2}$	1	1
7	7	4
$7\frac{1}{2}$	1	1
8	2	1
$8\frac{1}{2}$	0	0
Term	38	23

N.B. Percentages adjusted to nearest fraction.

TABLE V. END-RESULT TO MOTHER, INTRAUTERINE FETUS, AND EXTRAUTERINE FETUS

	CASES	RECOVERED	DIED	PERCENTAGE DEATHS
Mother	202	158	44	21
Intra Fetus	202	79	123	61
Extra Fetus	191	6	185	96

group of thirty-six cases, we can tabulate some statistical data concerning coexisting extrauterine and intrauterine pregnancy.

The youngest mothers were twenty years old (Pernice, Bryndza); the oldest, fifty-four (Bainbridge).

In Mann's case, a nullipara, aged thirty-three, was delivered of living triplets from the uterus; the fourth, or extrauterine child, grew to term but died and was retained for thirteen years. Cases of living intrauterine twins associated with an ectopic gestation were reported by Geoffrey in 1722, Mathewson and others.

Cases of a living extrauterine child delivered in association with intrauterine pregnancy were reported by Moore and Sale in 1870,

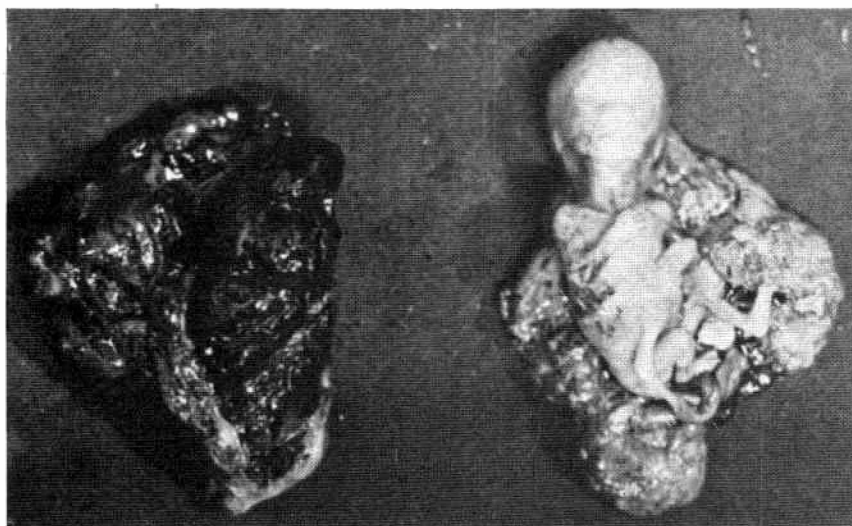


Fig. 1.—Coexisting extrauterine and intrauterine pregnancies. Left, extrauterine pregnancy, showing large, distorted fallopian tube containing massive blood clot (also chorionic villi). Right, intrauterine pregnancy, showing placenta and embryo measuring 6 cm. in length, which were spontaneously expelled through the hysterotomy opening.

Wilson in 1880, Ludwig in 1896, Miller in 1908, and Du Bose in 1915. Nebesky, in 1911, delivered a living extrauterine child, but it survived only fifteen minutes.

REPORT OF CASE

Mrs. C. T., aged twenty-nine, married three years, was seen by me on Dec. 28, 1926, complaining of constant pain in the left lower abdomen and vaginal bleeding. She had had two spontaneous miscarriages but no confinements. Her previous menstrual history was regular and of the twenty-eight day type. The last regular period occurred April 21, 1926. During May she failed to menstruate but the flow started again June 6 and lasted about twelve days. Thereafter regular periods followed on July 10, August 7, September 4, and October 2, respectively. October 2 was the date of the last menstruation.

TABLE OF CASES NOTED IN THE LITERATURE SINCE 1913

AUTHOR	YEAR	AGE OF MOTHER	PARA	DURATION OF PREGNANCY		RESULT TO			SEAT OF EXTRA-UTERINE OVUM	REMARKS
				EXTRA-UTERINE	INTRA-UTERINE	MOTHER	EXTRA-UTERINE	INTRA-UTERINE		
Brackett	1913	40	II	Early	Early	R.	D.	D.	Right tube	Ruptured
Bogdanovics	1914	—	IV	Term	Term	R.	D.	R.	—	Intra normal; extra removed by abdominal section and lived a few moments.
Primsar	1914	31	VII	2 mo.	4 mo.	R.	D.	D.	Left tube	Not ruptured
Primsar	1914	26	III	2+ mo.	3 mo.	R.	D.	D.	Right isthmus	Ruptured
Rouvier	1914	37	VII	3 mo.	3 mo.	R.	D.	D.	Left Side, abdominal abortion?	No operation for rupture
Smyly	1914	36	X	2 mo.	2 mo.	R.	D.	D.	Right tube	Tube removed by abdominal section; spontaneous expulsion of intra.
Du Bose	1915	35	VIII	Term	Term	R.	R.	R.	Right tube	Extra child removed by abdominal section.
Heyman	1915	31	IV	2 wk.	—	R.	D.	—	“High” uterine tube	Extra found ruptured on abdominal section; intra pregnancy reported progressing.
MacFarlane	1915	29	I	6 wk. ?	Term	R.	D.	R.	Right tube	Incomplete tubal abortion
Tandberg	1915	29	III	3 mo. ?	Term	R.	D.	R.	Left tube	Ruptured
Boldt	1917	33	II	3 mo.	3 mo.	D.	D.	D.	Right tube and broad ligament	Ruptured
Oastler	1917			No data						
Sullivan	1917	42	III	—	Term	R.	D.	R.	—	Ruptured
Unterberger	1917	42	II	4 mo.	Term	R.	D.	R.	Right tube	Ruptured
Curtis	1918	33	III	2 mo.	2 mo.	R.	D.	D.	Left tube	Ruptured
Fenger	1919	38	X	2 mo.	2 mo.	R.	D.	—	Right tube	Laparotomy
Nijhoff	1920	35	VII	3 wk.	Term	R.	D.	R.	Right tube	Abdominal section for extra
Lukins	1921	27	II	6 wk.	Term	R.	D.	R.	Right tube	Ruptured