

INTRODUCTION-Uterine didelphys is a mullerian duct anomaly which occurs due to complete lack of fusion of the mullerian ducts causing duplication of the female reproductive structures,resulting in two entirely separate hemiuteri and two cervices.It is also known as double uterus.It may be isolated or sometimes may be a part of OHVIRA(obstructed hemivagina with ipsilateral renal agenesis) also known as Herlyn Werner Wunderlich syndrome.It occurs in about 0.5 to 1% of population.

AIMS AND OBJECTIVES-To identify the congenital anomaly,expected history and to describe maternal and perinatal outcome.

CASE REPORT-A study on a case admitted in GMH,Hanamkonda.A 20 year old primigravida with 39 weeks 1 day of gestational age,unbooked case at GMH,presented with breech in labor.Her lab investigations were within normal limits.

RESULTS-She was taken up for an emergency cesarean section in view of breech presentation in labor,and incidentally she was found to have uterine didelphys,fetus was found in the right horn,left horn was empty.Both of them had adjoining normal looking fallopian tube and ovary.She delivered a term male baby without any complications.

DISCUSSION-Uterine didelphys belongs to class III of mullerian duct anomalies according to ASRM classification.

Uterine anomalies are usually associated with poorer pregnancy outcomes like spontaneous abortion,preterm labor,cesarean delivery due to malpresentations compared to a normal uterus.However,the degree of these outcomes varies among different types of uterine anomalies.Unicornuate and didelphys uterus have term delivery rates of approximately 45%,untreated bicornuate and septate uterus have approximately 40% term delivery rates,arcuate uterus has approximately 65%term delivery rates.

CONCLUSION-Pregnancy in cases of uterine malformations requires early diagnosis of the anomaly, meticulous care in pregnancy and delivery to avoid adverse outcomes.

Good antenatal care with adequate obstetric facility for surgical intervention can prevent complications.

REFERENCE-

Boehnke M, et al. Uterine didelphys with concomitant renal anomalies in both mother and fetus.
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