

A RARE CASE OF TWINNING: NON-JANICEPS CEPHALOPAGUS CONJOINED TWINS

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INTRODUCTION

Conjoined twins affect less than 1% of monozygotic twin pairs.¹

Non-janiceps type of cephalopagus twin is the rarest type of conjoined twins.²

CASE REPORT

33-year-old, multigravid, with conjoined twins

Congenital anomaly scan

- Two fetuses in breech presentation with fused cranium and fused face
- Twin A : midline intracranial structures
- Twin B : holoprosencephaly
- Fused thorax and abdomen
- Shared stomach and liver
- Two separate spines
- Two separate hearts
- Two separate urinary bladders
- Single umbilical cord insertion
- Two male external genitalia
- Two pairs of lower and upper extremities

Fetal echocardiogram

- Two separate hearts identified
- Good gross contractility
- Common descending aorta



Figure 1. 2D image of 2 hearts with shared stomach and shared liver



Figure 2. 3D image of fetal head with one head and single face

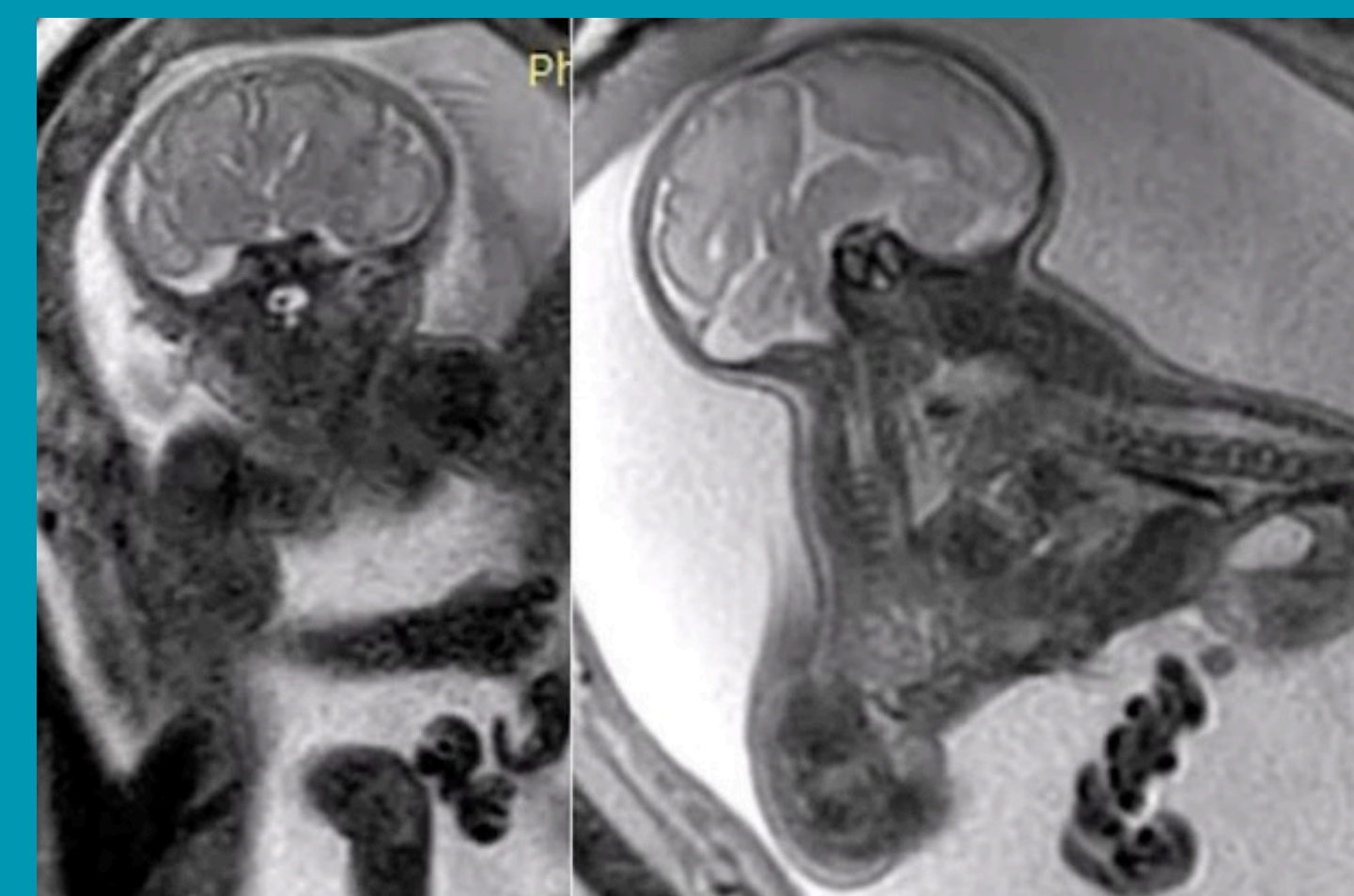


Figure 3. Fetal MRI image showing cephalo-thoraco-omphalopagus conjoined twins

CASE REPORT

Fetal magnetic resonance imaging

Non-janiceps rostral cephalo-thoraco-omphalopagus conjoined twinning

Multidisciplinary conference

Surgical separation of the twins was not feasible.

Delivery

Via primary classical cesarean section at 30 weeks and 2 days age of gestation due to uncontrolled preterm labor

Outcome

Cephalo-thoraco-omphalopagus, non-janiceps type conjoined twins

Expired on the 46th minute of life

DISCUSSION

Prenatal diagnosis is of utmost importance to detect the type of the conjoined twins. The initial ultrasound is used to define the site and extent of the conjoined area. Three dimensional ultrasound, fetal echocardiogram and fetal MRI are adjunct imaging modalities for a more detailed anatomical information.

Multidisciplinary team approach is warranted for possible neonatal surgical planning despite the poor prognosis.³

Non-janiceps type cephalopagus twins are technically impossible to separate and incompatible with life.

Conjoined twins are associated with a dismal outcome. It was predicted that 40% of them are stillborn while 35% die within the first 24 hours.⁴



Figure 4. Non-janiceps type of Cephalo-thoraco-omphalopagus conjoined twins (anterior)



Figure 5. Non-janiceps type of Cephalo-thoraco-omphalopagus conjoined twins (posterior)

CONCLUSION

An extremely rare case of non-janiceps cephalo-thoraco-omphalopagus conjoined twinning was detected via antenatal ultrasound at 22 weeks age of gestation. Early antenatal diagnosis is extremely important for appropriate and timely management as the prognosis is very poor in such twins. Ethical management and counseling by a team of specialists will improve the quality and safety of patient care.

REFERENCES

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