



A case of a live-born infant by a patient with molar pregnancy

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Objective

To present a rare case of a live-born infant by a patient diagnosed with molar pregnancy, who decided to carry on with the pregnancy, despite the warnings of the doctors.

Methods

The methods used were the Ultrasound , the MRI, the measurements of free B-HCG and amniocentesis.

Results

During the ultrasound and later with the MRI the placenta was noticed hypoechogenic with large defects, indicating a molar pregnancy. In the second trimester scans, the fetus was growing well with normal dopplers in ductus venosus and umbilical artery. The results of amniocentesis were normal. In 33 weeks of gestation we hospitalised the patient because of high blood pressure. An emergency caesarean section was performed because of fetal distress. We monitored the levels of beta HCG before and after delivery. Before delivery Beta HCG was 50,000ie while after delivery 4000ie. HPDG of the placenta suggested that this was a molar pregnancy. The mother and the infant were discharged home, both in a good condition.

Conclusion

It is rare case of molar pregnancy in which an infant, without structural or chromosomal defects, was born.