Diagnosis and management of conjoined thoraco-onphalopagus twins
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Objective
To evaluate the incidence, epidemiological factors, duration of gestation and postnatal outcome of cases of conjoined thoraco-onphalopagus twins.

Methods
A systematic review of clinical records of patients attending the Fetal Medicine Unit of Hospital San Jose between 2012 and 2017 was carried out to identify conjoined twins. Date of diagnosis, ultrasound findings, intrauterine evolution and perinatal outcomes were analysed. Because in Chile termination of pregnancy is not permitted by law, all these cases are only followed.

Results
We identified 5 conjoined twins pregnancies, 4 of which were thoraco-onphalopagus; the local incidence was 1 in 10,000 live births which reflects the referral nature of our centre. When assessing the overall incidence at the country level the incidence was 1 in 90,000, which is similar to that in the literature. For the thoraco-onphalopagus type, in all pregnancies the method of conception was spontaneous. The maternal age ranged from 26 to 35 years. The patients had no associated pathology. The mean gestational age at diagnosis was 14 weeks. Anatomically, all had a single heart and liver. Gestational age at delivery ranged from 26 to 37 weeks. The fetal sex in the 4 cases was female, and the neonatal survival time was between 20 and 120 min.

Conclusion
Management and follow-up of the conjoined twins pregnancies, and, in particular of thoraco-onphalopagus, is a challenge for obstetrician in a country where termination of pregnancy is not an option. A multidisciplinary team involving the obstetrician, pediatric cardiologist, neonatologist and psychologist is necessary to decide the correct post-natal management, which in most cases is only palliative. In our series no surgery was undertaken and survival beyond the first 2 hours was not possible. The sharing of a single heart makes the survival of both fetuses practically impossible.