Maternal and perinatal outcomes of twin pregnancies in a tertiary care centre in north india

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Objective
To reviewed the maternal and fetal outcomes of twin pregnancies delivered in a single unit over a period of three years in a tertiary care centre in North India.

Methods
A retrospective review of the data of maternal and fetal outcomes of twin pregnancies delivered in a single unit over a period of three years was conducted and analysed.

Results
A total of 156 twins were managed and delivered over a period of three years of which 113 were diamniotic dichorionic twins (DADC) and 41 were diamniotic monochorionic twins (DAMC) pregnancies and there were two monoamniotic twin pregnancies. The mean age of the women was 28.9 ± 3.5 yrs. While the mean parity was 0.48 ± 0.12. Of the DADC twins 36 were IVF conceptions, while 1 each were IVF out of DAMC and MAMC twins. Around 18 of the DADC twins were IUI conceptions. Out of all the twin pregnancies, 31 women developed hypertensive disorders while 20 developed gestational diabetes. Of the DAMC twins, 21 were diagnosed with twin twin transfusion syndrome, 4 had twin reversed arterial perfusion, 9 developed selective fetal growth restriction. A higher proportion of complicated monochorionic twins is reflective of the referred population of twins to the tertiary care centre. Mean period of gestation at delivery was 34.5 weeks for the DADC twins, 32.6 for the DAMC twins and 30.4 for the MAMC twin pregnancies. The pregnancy outcome was good in the DADC twins with twin baby survival being 108/113 while 3 pregnancies ended in still births of both twins and two had a single fetal demise. Among the DAMC both twin survived in 28 women while one twin survived while one twin survived in 9 women.

Conclusion
Monochorionic twins are at higher risk of complications and preterm delivery while DADC twins have a good outcome when managed appropriately.