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Funicular cord, double knot and hypertorsion: A dangerous combination as cause of stillbirth

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he association of true double knot and hypertorsion of cord is a rare and unpredictable condition during pregnancy, that may cause fetal circulation damage and give a sudden Intra-Uterine Death. The incidence of true knot ranges from 0.3 to 2 % of all deliveries, though even rarer when it is double. Coils number/cm identifies Umbilical-Coiling Index (UCI). Hyper coiled cord is defined when UCIexceeds 0.3 coils/ cm. We report one case of an association of two congenital anomalies (double knots and hyper torsion of cord) occurred at Catania S. Marco's University-Hospital. A 37 years old woman, in her third pregnancy (with a previous cesarean and an abortion) came into the emergency room at 37 weeks referring absence of fetal movements for unspecified days. Routine ultrasound, carried out 10 days before admission, resulted regular together with normal values of Pulsatility Index (PI) of both Middle cerebral artery and Umbilical artery. After hospitalization, a diagnosis of fetal death was done, however the cause death was not clarified at moment. A transperitoneal caesarian section (CS) was performed and a stillborn of 2.3 kg was extracted. A double tight true knot together with hyper torsion of <u>umbilical cord</u> with two coils/ cm detected. Despite the knowledge of risk factors and modern diagnostic techniques, this condition is not possible to be prevented. Since the movements of the child and the onset of both knot and coiling cord with mechanical ischemic alterations do not depend on the clinical management, but often on fortuity, no fault can be attributed to the medical team.

Speaker Biography

Vito Leanza is a Medical Doctor in Obstetrics and Gynaecology works at "1Department of General Surgery and Medical Surgical Specialities, San Marco Policlinic University Hospital, Catania, Italy. He mainly dedicates himself to work in the delivery room and the gynecology and obstetrics emergency unit.

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