The Congenital Uterine or Vaginal Anomalies (39 cases) and Obstetrical Problems

Kyung Sook Jung, M.D., Jung Ock Yoo, M.D., Hyun Sil Cho, M.D., Bock Hi Woo, M.D., Shin Myung Kang, M.D.

Dept. of Obstetrics and Gynecology, Ewha Womans University Hospital, Seoul

The congenital uterine anomalies depend on the degrees seem quite often cause serious obstetrical problems including the uneasy diagnosis, complicated pregnancy or increased fatal loss.

The data presented are based on 34 cases of uterine anomalies and 5 cases of vaginal anomalies seen in Ewha Woman's University Hospital, Seoul, Korea during the period of 8.5 years starting January 1973 to May 1981.

1. The incidence of uterine anomalies accounted for 0.21%, 1:471 or 34 cases among 16,018 cases of deliveries. The varieties of uterine anomalies commonly seen are bicornuate uterus (17 cases, 0.11%, 1:942 deliveries), septate uterus (10 cases or 1:1602), uterine didelphys (5 cases or 1:3204) and unicorneate uterus (2 cases or 1:800).

There were 5 cases of vaginal anomalies which accounted for 1:3204 deliveries. These include 3 cases of longitudinal vaginal septum (1:5339) and 2 cases of transverse vaginal septum (1:8009).

2. The past history among the patients with uterine anomalies revealed very high frequency of abortion, particularly in those patients with didelphys (80%, 4/5) and unicorneate uterus (100%, 2/2), then somewhat less in bicornuate uterus (47%, 8/17) and septate uterus (60%, 6/10).

However, after preceding 1〜4 times abortions the most of the patients with uterine anomalies usually able to carry to term pregnancy except some incidence of prematurity.

3. The incidence of overall fetal wastage (abortions) or perinatal loss in 84 pregnancies among the uterine anomaly cases was extremely high; 80% in uterine didel-
phys cases (8/10), 50% (2/4) in unicornuate uterus, 42% (15/36) in bicornuate uterus and 47% (16/34) in septate uterus.

There was 1 case of neonatal death due to difficult breech vaginal delivery in the mother with longitudinal vaginal septum.

4. Risk delivery: Cesarean section required in all cases (100%) with both uterine didelphys (3/3) and unicornuate uterus (2/2), and in 54% (7/13) with bicornuate uterus, and 56% (5/9) with septate uterus.

One case with transverse vaginal septum associated with boarderline CPD was also delivered by cesarean section.

5. The incidence of placental tissue retention following the initial curretage for spontaneous abortion or even after vaginal deliveries was considered very high, some 35% in the average among the patients with didelphys, bicornuate uterus and septate uterus, and all of the cases were required the unnecessary repeated procedures of dilatation and curettage.

6. There were 4 (12%) congenitally malformed, or lethal infants born to mother with uterine anomalies (34 cases). Such figure seemed to be fairly high.

I. 서론

자궁 및 질의 선천성기형은 산과적으로 유산, 조산, 난산등의 여러가지 문제가 일으킨다. 또한 여기에 탄생되며 이환율(예방저지기형)과 유산 및 주산기암율이 높은세도 불구하고 일반적으로 발견이 용이하지 않으므로 임상기준은 적절하다. 따라서 본연구에서는 과거 약 8년간(1973년 1월~1981년 5월)동안 이화여자대학교 의과대학 산부인과에 입원한 일부 16018예정 자궁 및 질의 기형을 동반한 일부 39예(자궁기형 34예, 질기형 5예)에 대하여 그 발생빈도, 유산 및 산행유산의 위험도 및 생후사망을 본격 판찰하여 자궁 및 질의 기형에 의한 불필요한 베아손실을 감소시키는데 기여하고자 하였으며.

II. 재료 및 방법

과거 8년간(1973년 1월~1981년 5월)동안 이화여자대학교 의과대학 산부인과에 입원한 일부 16018예정 39예에서 자궁 및 질의 기형을 볼 수 있었다. 그중 자궁기형이 34예(중복자궁 5예, 단자궁 2예, 상자궁 17예, 중격자궁 10예)였는데 이들중에는 질증격을 동반한 경우도 적었다(32%). 질의 기형은 5예(종결증격 3예, 절결증격 2예)였다.