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Case Presentation

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[Newly Modified Posterior Axilla Maneuver: Tilt and Kristeller Procedure](#)

Shoulder dystocia is a rare but severe complication of vaginal delivery with possibly serious consequences. Certain risk factors are associated with shoulder dystocia, but a general forecasting model is lacking. We present a Case report using a newly modified Posterior Axilla Maneuver technique that saved a 5.140 g (11 lbs. 5 oz.) newborn from shoulder dystocia. The child was born with Apgar 7/9, pH 7.17. Currently, there are no signs of any long-term sequelae.

Our procedure comprised the following steps: 1. First, we pulled the posterior shoulder downwards - in the direction and to the outer surface of the perineum. 2. Then we pulled the posterior shoulder backward - toward the maternal spine - when it was already outside the perineum and finished extracting the posterior shoulder. 3. By completing the first two steps, a Tilt of the shoulder girdle was reached in the midsagittal plane, resulting in a backward slope for the shoulder girdle so that the anterior shoulder touched the symphysis slightly from the back in a skewed manner, freeing it from the initial impacted position. 4. We applied the Kristeller procedure only after dislodging the anterior shoulder from its initial impacted position. 5. We also applied the McRoberts Maneuver at the end of the process to increase the diameter of the birth canal.

Research Article

Published Date:- 2024-11-27

[Expression of Cholinesterase in Bone Tumors, Blood and Cord Blood](#)

The present study aimed to analyze Cholinesterase (CE) levels in cord blood from preeclamptic women and to evaluate cholinesterase status in patients with osteosarcoma. Serum cholinesterase levels were assessed in 30 cases of osteosarcoma and 30 controls suffering from musculoskeletal pain. Additionally, maternal and cord blood samples were collected from 25 women with preeclampsia and compared with those from 25 normotensive pregnant women and 25 normal, healthy controls. The results indicated that serum cholinesterase levels were significantly lower in osteosarcoma patients (Group I) compared to those with musculoskeletal pain (Group II, $p < 0.05$). Similarly, cholinesterase levels were reduced in the maternal blood of women with preeclampsia when compared to normotensive controls. Cord blood cholinesterase levels were lower in the infants of normotensive mothers, with levels reaching 88.65% of the maternal levels. Furthermore, cord blood cholinesterase levels were significantly lower in preeclamptic women compared to normotensive pregnant women. When comparing cholinesterase levels to those of normal controls, it was observed that CE levels were significantly elevated in both normotensive and preeclamptic women. The findings of low serum cholinesterase levels in this study suggest that cholinesterase secreted by osteoblasts is utilized in bone formation and tumorigenesis. Additionally, the decrease in cholinesterase levels associated with preeclampsia may be linked to the loss of muscarinic cholinergic receptors that occur in this condition.

Case Report

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[Fibrothecal Tumors of the Ovary - Case Report](#)

Fibrothelial tumors of the ovary are rare neoplasms, comprising less than 4% of all ovarian tumors and primarily affecting post-menopausal women. These benign tumors arise from the stromal tissue of the ovary and may produce hormones, particularly estrogen. Their diagnosis presents considerable challenges, frequently leading to misclassification as malignant ovarian tumors or uterine myomas. This report describes the case of a 59-year-old woman who presented with abdominal distension and pelvic pain. Clinical examination revealed a large, lobulated mass and imaging studies classified the right ovarian mass as ORADS 4. An exploratory laparotomy confirmed the absence of metastasis, resulting in total hysterectomy, bilateral adnexectomy, and omentectomy. The anatomopathological analysis identified the latero-ovarian mass as a fibrothecoma. Generally, fibrothelial tumors are benign with a favorable prognosis following surgical intervention. Common symptoms include pelvic pain and abdominal distension, and diagnosis typically relies on imaging techniques such as ultrasound and CT, with definitive confirmation achieved through histopathological examination. Given their potential to mimic malignant ovarian cancer, accurate diagnosis is critical and necessitates a multidisciplinary approach.

Case Series

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[Understanding and Managing Caesarean Scar Ectopic Pregnancy: A Retrospective Analysis of Risk Factors, Strategies, and Outcomes](#)

Objective: Caesarean Scar Ectopic Pregnancies (CSEP) pose distinct diagnostic and management challenges. This study investigates the risk factors, treatment options, and outcomes for CSEP cases treated at Prince Sultan Medical Military City, Riyadh.

Methods: Over a two-year period, medical records of 28 patients with CSEP were reviewed, collecting data on patient demographics, obstetric history, and treatment outcomes. This analysis aimed to identify influential risk factors and assess the effectiveness of various management strategies.

Results: Treatment success was achieved in 85.7% of cases, with Methotrexate (MTX) proving effective in over half of the cases. The findings suggest significant risk factors and best practices for managing this rare condition.

Conclusion: Early detection, risk factor awareness, and tailored treatment strategies are key to optimizing outcomes in patients with CSEP.

Case Report

Published Date:- 2024-10-22

[The Clinical Pregnancy and Live Birth Following Transfer of One Arrested Embryo: A Case Report](#)

Background: One of the problems in vitro fertilization (IVF) treatment for infertility is the high frequency of embryo developmental arrest in the preimplantation stages. Arrested embryos were not selected for transfer and were usually discarded.

Case report: We present a case of clinical pregnancy and live birth following IVF treatment and transfer of one arrested embryo. A 31-year-old woman with unexplained infertility underwent IVF treatment. Using the IVF procedure, 7 embryos were produced which were frozen on day 3. In order to embryo transfer in the blastocyst stage, two embryos were thawed and cultured for 2 days. After thawing, one of them was not suitable for transfer and another embryo was arrested at the 10-12 cell stage.

Discussion: The Clinical pregnancy and live birth happened after the transfer of an arrested embryo on day 5.

Conclusion: This case showed that arrested embryos may resume growth after the transfer to the uterus and result in a successful pregnancy and live birth.

Case Report

Published Date:- 2024-10-18

[Prolonged Latency in Previale PPRM in Twin Pregnancies: A Case Series](#)

Previale Preterm Premature Rupture of Membranes (PPROM) before 24 weeks of gestation in dichorionic diamniotic (DCDA) twin pregnancies is a rare and challenging obstetric complication. Three cases are presented in this case series, all involving prolonged latency periods of 74, 98, and 158 days following membrane rupture. The management strategy employed was expectant, utilizing antibiotic prophylaxis and close monitoring to prevent infection. Neonatal outcomes varied, with pulmonary hypoplasia and respiratory distress observed in some cases. One twin from Case 2 died due to sepsis, while the remaining twins in all three instances survived after extended neonatal intensive care. This series highlights the potential for extended latency and favorable outcomes in select cases, though neonatal morbidity remains a significant risk, underscoring the need for individualized counseling and vigilant care.

[An Appraisal of Recurrent Miscarriage in Sub-Saharan Africa: Occurrence and Possible Solution](#)

A recurrent miscarriage may be defined in the African context as the foetal demise of two or more successive pregnancies before the attainment of the age of viability. A literature review was done to assess the trend of recurrent miscarriage in sub-Saharan Africa. Identifying the main causes, considering the population at risk, and the availability of accurate diagnostic utilities to effectively ensure good management of recurrent miscarriage is an important gynaecologic issue. Over the years, studies have identified several etiologies and yet there's been no tangible implementation of therapeutic strategies. Routine modifications should also be employed to develop new approaches to reproductive prognosis. There is notably scanty information on the cases of spontaneous abortion due to chromosomal abnormalities. Genetic and immunological factors should be considered in the work-up plan for women with RM. About 70% of the cases of RM are considered unexplained, and this may be due to limited resources. We concluded that there is relatively poor management of miscarriage and cases of missed and inaccurate diagnosis of the causes of spontaneous abortion in sub-Saharan Africa. More studies are needed in order to assess the extent of genetic induced miscarriage, where resources are limited, folic acid supplements should be provided for pregnant women.

Mini Review**Published Date:- 2024-09-09**[Cessation of Menstruation during Pregnancy: Overview](#)

Vaginal bleeding during pregnancy can often be frightening for women. However, such bleeding does not always indicate a serious problem. This type of bleeding occurs routinely, especially in the first 12 weeks of pregnancy. A significant proportion of women who experience bleeding during pregnancy go on to give birth to healthy babies. Despite this, women who frequently experience bleeding problems at different stages of pregnancy may need to take this situation seriously. A critical approach is important both from the gynecologist and from the pregnant woman.
