Conclusion AcNES is an uncommon cause of abdominal pain in the pregnant patient.

The fibrous ring in the rectus muscle, through which the medial cutaneous nerve travels, causes nerve ischemia when compressed. Risk factors include abdominal distension, subcutaneous oedema, and previous surgery especially pfannensteil incision. The syndrome, commonly affecting the 7th–12th intercostal nerves, causes unilateral pain, hypoesthesia/hyperesthesia and a positive Carnett’s sign. Management with local anaesthetic injection relieves symptoms and confirms the diagnosis.

This diagnosis should be considered in cases of severe abdominal pain when investigations are normal. The advantages of early diagnosis are relief of maternal pain and avoidance of delivering a preterm fetus.

Introduction Placental abruption secondary to pancreatitis is rare. There are two cases in the literature. There are no previous reported cases of placental abruption secondary to pancreatitis caused by hypertyriglyceridaemia.

Case We present the case of a 30 year old low risk primagravida who presented at 39 weeks and 6 days gestation with severe epigastric pain. Her bedside observations revealed tachypynea but were otherwise normal. Urinalysis revealed proteinuria (+ +). Vaginal examination was consistent with early labour. Initial differential diagnosis included a surgical emergency, pre-ecampsia, labour and placental abruption. Initial CTG was normal but became pathological and she went on to have emergency caesarean section within two hours of arrival. Operative findings included milky white ascitic fluid on opening the abdomen and a retroplacental clot. Chemical pathology telephoned to inform the team that her blood tests appeared lipaemic and she had an amylase of 1043 U/L (20–120 U/L) and triglycerides of 134 mmol/L (<1.70 mmol/L). She was transferred to intensive care and has had a complicated recovery, whereupon a particular LMWH may be successfully replaced with another one. However if the skin symptoms do not improve an alternative must be sought.

Conclusion Accuracy of home metres and diary logs needs to be confirmed at regular intervals, and SMBG values should not be the only criterion for diabetes management during pregnancy.

Venous thromboembolism (VTE) is amongst the leading causes of maternal death in developed countries. Several series have confirmed the safety and efficacy of LMWHs in pregnancy and it has become the favoured anticoagulant. Adverse skin reactions to LMWHs are rare but recognised events, whereupon a particular LMWH may be successfully replaced with another one. However if the skin symptoms do not improve an alternative must be sought.

Fondaparinux is a synthetic pentasaccharide. Whilst it has been extensively studied for use both in surgical prophylaxis and treatment of thromboembolic diseases; its use in pregnancy is less well documented.

We report 4 pregnancies in 3 women using Fondaparinux which adds to the available literature. All required thromboprophylaxis because of previous pregnancy associated VTE when they demonstrated broad cross-reactivity between several heparins and/or heparinoids.

In 3 pregnancies Fondaparinux was commenced in the first trimester and continued until 6 weeks postpartum. All continued without event resulting in vaginal delivery of well grown babies at term. There was no minor or major maternal bleeding (mean blood loss 250 mls) or thromboembolic event reported during the pregnancy or post-partum period. All babies were breastfed without effect. There was no congenital abnormality or neonatal bleeding. In a 4th pregnancy LMWH was initially deferred until 20 weeks gestation whereupon recurrent allergic skin reaction led to the change to Fondaparinux. Review at 37 weeks gestation was preempted by a complaint of reduced fetal movements with pathological CTG necessitating emergency caesarean section at her base hospital.

Conclusion Accuracy of home metres and diary logs needs to be confirmed at regular intervals, and SMBG values should not be the only criterion for diabetes management during pregnancy.