Introduction
Spontaneous pregnancies with more than two foetuses are very rare with a reported incidence of 1 in 8,100 for triplets and 1 in 729,000 for quadruplets.

Case report
We present a case of 37 year old G6P3 with previous history of three full term vaginal deliveries, BMI 40 kg/m2 with a spontaneous quadruplet pregnancy. The diagnosis was made on an early pregnancy ultrasound at 10 weeks; she was reviewed by Fetal Medicine consultant and counselled comprehensively regarding the risks associated with multiple pregnancies. The option of selective foeticide to twin pregnancy was discussed, which she declined. First trimester ultrasound and screening was reported to be normal and it was identified as Dichorionic -quadramniotic pregnancy. She was given a course of corticosteroids and kept as an inpatient from 28 weeks due to abdominal tightenings. Regular fetal surveillance was done with fortnightly growth scan and weekly Doppler and liquor.

Magnesium sulphate was given for neuroprotection and an elective caesarean section was done at 32 weeks and 2 days gestation with an outcome of four male babies with birth weights of 1640 gram, 1500 grams, 1605 grams and 1655 grams respectively. All the four babies were transferred to neonatal unit. The babies remained admitted to neonatal unit for three weeks.

Discussion
Quadruplets could be multizygotic or monozygotic or combination of both. Multizygotic quadruplets occur from fertilisation of four different sets of ovum and sperm. Monozygotic multiples are a result of a fertilized egg that splits into two or more embryos. Fully monozygotic quadruplets are rare, representing only one in 13 million pregnancies.