Abstract

Objectives: There were no precise diagnostic criteria for uterine rupture during pregnancy and labour as the clinical presentation varies on case to case basis. According to literature review by WHO report 2005, the incidence of uterine rupture is 5.3 per 10000 deliveries. Here we are reporting one rare case of early second trimester spontaneous uterine rupture with successful outcome. The main objective of this case report is to create awareness. Case Report 22 year G2P1L0 lady with post LSCS pregnancy at 19 week period of gestation presented to accident and emergency department with lower pain abdomen and vomiting of two episode in last 5 hour. On admission she was conscious, afebrile, pulse (P) – 82/min, BP – 112/72 mm of Hg, diffuse lower abdominal tenderness. Ultrasonography (USG) – single live intrauterine fetus, fetal cardiac activity (FCA) present, placenta was posterior, not previa. Six hour after admission she developed tachycardia (P121, BP – 110/68 mm of Hg). Bedside USG shows single fetus with no FCA with evidence of blood /Fluid in abdomen. Patient was taken for emergency laparotomy and intra op showed haemo-peritoneum with uterine rupture. Fetus with entire sac was lying in abdominal cavity. Uterine repair in layer was done and patient was resuscitated with blood and blood products. Post op period was uneventful and got discharged from hospital on tenth post op day.

Discussion: Uterine rupture during labour and third trimester were reported in several literature but same during first and second trimester is extremely rare. The maternal mortality due to uterine rupture is 30 percent in rural India. Early diagnosis is challenging but is key factor for successful outcome.

Conclusion: High degree of suspicion for uterine rupture should be made if lady with post caesarean pregnancy presented to accident and emergency department with pain lower abdomen even if it is in early second trimester

Biography

Shikha Aggarwal has her expertise in labour management and obstetrics and gynaecology and passion in improving the health and wellbeing. She has completed her MRCOG in year 2019 and presently working at Altnagelvin Hospital, Northern Ireland. Her area of interest are high risk obstetrics and minimal invasive gyna endoscopic surgery.

Publications:

1. Need of classical caesarean delivery in today’s era - a rare case of large uterine fibroid with pregnancy
2. Can The Abruption Be Chronic?