

## LIPPES LOOP MIGRATION TO FALLOPIAN TUBE

by

KUNTAL RAO,\* M.D.

A. N. GUPTA,\*\* M.D.

and

AJIT S. KULKARNI,\*\*\* M.D.

### Abstract

An unusual case of Lippes loop migration into a fallopian tube is reported with a history of its insertion 12 years before. The peculiarity observed was in its cephalic end getting impacted into the fimbriated portion of the tube with its caudal end projecting into the peritoneal cavity. The factors which may have been responsible for this are discussed.

### Introduction

Only two cases are reported where the loop was found in the fallopian tube (Rao, 1972). We are reporting the first case where it was found lying in the left fallopian tube impacted at its fimbriated end with the nylon threads hanging in the peritoneal cavity.

### CASE REPORT

Mrs. A. K. 45 years, para 5 came with the complaints of irregular excessive vaginal bleeding for 2 years and pain in the lower abdomen for 2 months. There were no bowel or urinary complaints nor did she have amenorrhoea. She had D & C done in another hospital 8 months previously without any relief. No histopathology report was available. Her previous menstrual cycles were normal. For the last 2

years she had been having vaginal bleeding for 7 to 8 days after every 20 days and had been passing clots with pain. She had all full term normal home deliveries. Last child birth was 8 years ago. She gave retrospective history of a Lippes loop being inserted 12 years back in a district hospital by a midwife. The loop is said to have been removed when she developed excessive vaginal bleeding 2 months later. Subsequently, she had a 2 full term home deliveries without any intrapartum or postpartum complications. There was no acute pain either at the time of loop insertion or its removal.

Bimanual pelvic examination revealed anteverted uterus, irregularly enlarged to 10 weeks size, irregularity more evident on its anterior wall, fornices normal. Patient was advised abdominal hysterectomy on a clinical diagnosis of uterine fibroids. At operation, 2 fibroids measuring 4 cms. each were found at the right cornual region. The right tube and ovary were normal. The left tube was adherent to the ovary and a loop of ileum. These adhesions could be separated easily. The distal half of the tube was seen to be congested, thickened and dilated. The cephalic end of the Lippes loop was now discovered to be located along with its one turn within the lumen of the fallopian tube at its fimbriated end. The caudal end along with the nylon threads was projecting freely into the peritoneal cavity (Fig. I & II). The fimbriae were seen to have intussuscepted into the lumen of the tube. Total abdominal hysterectomy with left salpingo-oophorectomy was performed followed by an uneventful postoperative period.

### References

1. Rao, KPR: J. Obstet. Gynec. India. 22: 268, 1972.

\*Lecturer.

\*\*Professor and Head.

\*\*\*Senior Resident.

Department of Obstetrics and Gynaecology,  
Postgraduate Institute of Medical Education and  
Research, CHANDIGARH, INDIA.

See Figs. on Art Paper VII