

A RARE CASE OF COLPORRHEXIS SIMULATING RUPTURED UTERUS

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Introduction

A case of transverse tear in posterior vaginal fornix with escape of fetal parts into abdominal cavity is reported.

Case Report

Smt. D.D. 2nd gravida with 1st normal delivery came in emergency at 1.20 A.M. on 13-2-84 with a history of cessation of labour pain and in distress condition. She was in labour pain since last 24 hours and she was handled by village Chaimain.

After vigorous abdominal massage by Chaimain in an attempt to deliver the baby per vaginum she felt something gave way into the abdomen and the labour pain stopped. She started feeling distress and distension of abdomen and was hospitalised.

On examination: She was conscious, dehydrated, pulse 110 per minute, B.P. 120/70.

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Abdominal examination

There was marked distension, fetal parts could be felt superficially and there was fullness in flanks. Uterine outline was not distinct. Fetal heart sound was absent.

Pelvic examination

There was a transverse rent about 3" high up in posterior vaginal fornix through which fetal parts could be felt.

Cervix was felt high up. Blood mixed watery discharge was present. It was diagnosed as colporrhexis. After resuscitative measures immediate laparotomy was done. Fetus along with placenta was lying free into the peritoneal cavity, a male dead fetus was taken out. On thorough inspection, the uterus and cervix were intact and there was only transverse tear in posterior fornix 3" in length extending between two uterosacral ligament. The rent in posterior fornix was stitched with chromic catgut No. 2 interrupted stitches. She was discharged on 12th day with an advice to report after 6 weeks in gynaecology Out Patient Department.