## OBSTRUCTED LABOUR DUE TO BLADDER STONE

(A Case Report)

by

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## Case Report

Mrs. P. aged 23 years gravida 4, para 1 came as an emergency as a case of 37 weeks pregnancy with obstructed labour. The membranes had been ruptured for 12 hours following which the pains diminished and she stopped feeling the faetal movements. Her first pregnancy resulted in still birth at 8 months. She aborted twice at 6 months. Last abortion was 1½ year back.

Lower segment was stretched with the formation of Bandle's ring just below the umbilicus. Head was fixed in pelvis, F.H.S. were not heard.

Cervix was fully dilated, membranes absent, caput +++, A hard mass 3" in diameter appeared to be a bony tumour, was felt arising from right pelvic wall and extending upto right pubic ramus. It was lying below the head and obstructing the delivery. The available space between the tumour and left ischial spine was about 2".

## Investigations

Blood—Hb—10 gms.%, TLC—15,000/cmm. DLC—P—74%, L—18%, M—4%, E—4%, Urine, Sugar—Nil, alb.—Nil, ME—Innumerable, RBC, Innumerable bacilli, 20-25 pus cells/HPF.

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Blood urea—80 mg/100 ml. on 30-12-83. Blood urea—80 mg/100 ml. on 5-1-84, 40 mg/ 100 ml. on 10-1-84.

Serum creatinine 2 mg./100 ml. on 10-1-84. B.T.—1 mt. 15 sec.

C.T.-5 mt. 15 sec.

L.S.C.S. was done under G.A. A still born male weighing 2.5 Kg. was delivered. Post operatively she was in shock. Her BP was 80 mm systolic Pulse 140/mt. Resp. laboured 40/ mt. Subnormal temp. 96.4°F, urine was high coloured. She developed chest pain following 100 cc. blood transfusion and hence the blood discontinued. Haematuria and bleeding from gums were noted, 38 hours post operatively. She remained critically ill for 48 hours. Dyspnoea persisted for a week with rales and ronchi all over the chest and gradually improved. She was treated with chloromycetin 500 mg. B.D., crystalline Penecillin 20 Lakh 6 hourly, unimezole 1 gm. B.D., aminophylline, lasix etc. Haematuria lasted for 5 days catheter removed after 7 days.

X-ray pelvis showed laminated radioopaque shadow in the bladder region. The diagnosis was now obvious. Fig. 1.

P/V on discharge—Uterus well involuted about 10 weeks size deviated to left side. In anterolateral fornix on right side the stone was felt. P/S Cervix was healthy, one bruished area about 1.5 cm. in diameter was seen in anterior vaginal wall on right side.

Patient refused operation and promised to come later for surgery.