

INCOMPLETE RUPTURE OF ACCESSORY HORN OF UTERUS IN THIRD TRIMESTER

(A Case Report)

by

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Introduction

An unusual case of pregnancy in third trimester presenting as acute surgical catastrophe with frank intraperitoneal haemorrhage is reported here. Laparotomy revealed incomplete rupture of the accessory horn of the uterus. Patient was saved with blood transfusion and timely surgical intervention.

Case Report

A 25 year old primigravida with 7 months amenorrhoea was admitted.

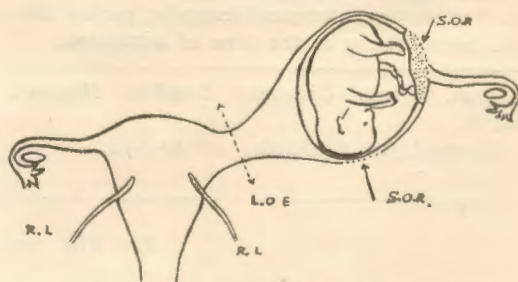
Prior to admission, she was in a private nursing home with pain for over 72 hours and distension of abdomen. She was given intravenous fluids. Plane X-ray abdomen had shown no air fluid levels ruling out intestinal obstruction. Needle aspiration done there had revealed haemoperitoneum.

During the period of amenorrhoea there was history of pain in abdomen twice during the 2nd trimester.

Flanks were full and breech presented. Foetal head was felt very superficial as if lying

just under the abdominal wall in the left hypochondrium. FHs \pm .

Angular pregnancy rupture was suspected. Three blood transfusions were given and laparotomy was done under general anaesthesia. Abdominal cavity was full of blood. Size of the uterus was 10 weeks. An accessory horn arose from left lateral uterine wall and had grown to the size of 30 weeks carrying the foetus. There was incomplete rupture of the outer layers of the uterine wall at two places i.e. at the placental implantation site and at the site of head where only decidua and amniotic membrane were present. Fresh bleeding was occurring at these sites. Foetus could be seen floating in the liquor in that still intact horn.



R.L - ROUND LIGAMENT
L.O.E - LINE OF EXCISION
S.O.R - SITE OF RUPTURE

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Accepted for publication on 23-12-85.

Accessory horn with the pregnancy ensac was excised (Fig. 1). Female baby weighed 2000 gms and was fresh still born.