

LOCKING OF TUBE AND PRONGS OF BAND APPLICATOR WITH SILASTIC BAND

(A Case Report)

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Introduction

A case report of locking of the fallopian tube and the prongs of the silastic band applicator by the silastic band is presented. To the best of our knowledge, this is the first case in the world literature of this complication, managed as described by us.

Case Report

Mrs. R. S., a 28 years old woman, presented for removal of Cu-T, with laparoscopic sterilization in the postmenstrual period. She had 3 full term normal deliveries in the past.

Laparoscopic sterilization was performed on 10th October 1985 through Storz 11 mm diameter operative laparoscope using silastic bands. Application of the silastic band to the right fallopian tube was uneventful. During application of the band to the left tube, the band

slipped over the prongs of the band applicator while the tube was held by the prongs, so that the tube could not be released and the prongs could not be withdrawn. The two prongs were firmly held together and resisted all attempts at their separation by manipulation. One alternative was to perform a minilaparotomy and divide the tube to release the prongs, followed by tubal ligation. Another alternative was to divide the fallopian tube with scissors through second puncture using bipolar cautery and release the prongs. However, we decided to attempt to slip the band off the prongs and the tube using second puncture manipulator. A long verres needle was introduced into the peritoneal cavity in midline in the suprapubic area. The silastic band was stretched with the needle tip so that its luminal diameter increased. Then with the tip of the needle, it was slipped down the prongs such that it slipped off one of the prongs. The fallopian tube was then released and the band was withdrawn along with the prongs and the laparoscope. The fallopian tube was not injured at any site during this manoeuvre. A new silastic band was then applied to the left fallopian tube. The patient made an uneventful recovery.

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