

A Rare case of haemoperitoneum following spontaneous abortion

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Collection of blood in peritoneal cavity due to retrograde menstruation is well recognized. But production of haemoperitoneum due to spillage of blood through the tube, following spontaneous abortion without an ectopic pregnancy is quite a rare event. The available literature did not report any such case. The following case documents haemoperitoneum following spontaneous abortion.

Mrs L aged 20 years, third gravida with history of 2 previous abortions was admitted with a complaint of bleeding per vaginum following amenorrhoea to K.H., MGIMS, Sevagram on 7-2-96 at 11.45 p.m. in emergency hours. She had one and a half months amenorrhoea with bleeding per vaginum of 17 hours duration. On examination she was afebrile, pulse was 72/min regular with mild pallor, B.P. of 90/60 mm Hg. Per abdominal examination revealed mild tenderness in lower abdomen. Per speculum examination showed cervix and vagina to be healthy and bleeding through the os was evident. On per vaginal examination, the uterus was bulky and soft, tenderness was present in the right fornix. Blood investigations were within normal limits, except for mild anemia. Pelvic ultrasonography revealed an amorphous

echogenic mass in the cavity of the uterus and a tubo-ovarian mass on the right side of 3.9cm x 2.5 cm. Laparoscopy was undertaken considering her previous obstetric problem and USG report. Diagnostic laparoscopy revealed a bulky uterus with normal ovaries with corpus luteum on the left side. The fallopian tubes of both sides on their fimbrial ends showed trickling of blood which collected in the pouch of douglas and peritoneal cavity. So, with a diagnosis of tubal abortion, an immediate laparotomy was performed. Approximately 500ml of blood collected in the peritoneal cavity and Pouch of Douglas was removed. Inspeccion of ovary and tubes on both the sides, specifically on the right side as USG report suggested right sided tuboovarian mass, revealed no pregnancy changes in the fallopian tube nor any products of conception.

Evacuation of the uterus was done by suction evacuation and fresh products of conceptus were obtained which was sent for histopathology. HPR revealed products of conceptus. The abdomen was closed after the procedure of uterine evacuation.