

Torsion of the Gravid Uterus – Unusual Presentation

Narendra Gupta

ISHA Hospital and Fertility Clinic, Opp. Railway Station Post Office, Jaipur – 302006.

A 23 year old primigravida with term pregnancy was admitted with pain in abdomen and retention of urine for the last 24 hours. She was in labour for the last 36 hours and came to the hospital after all local dais failed to deliver her. Fetal heart was not audible. Ultrasound facilities were not available at that hour.

Foley's catheter was put in and 1800 CC of blood stained urine drained. Her general condition was satisfactory, pulse 96/minute, blood pressure 110/70 mm Hg. She was anaemic, hence 2 units of blood were arranged. Abdominal examination revealed abnormal abdominal contour, fundal height of 36 weeks of pregnancy, a transverse groove at umbilicus separating upper abdomen from lower half. Abdomen was tense, fetal parts were not distinctly palpable, fetal heart sound was absent. Per vaginal examination cervix felt much higher anteriorly, os tightly closed, and a globular soft swelling was felt in anterior fornix. It decided to do exploratory laparotomy.

Abdomen was opened by subumbilical midline vertical incision. There was an axial torsion of the uterus by 180°-200° to right with posterior surface of the uterus facing anteriorly. This twist took place at the neck of the fetus i.e. junction of the upper uterine segment with lower uterine segment thus the fetal neck was also twisted by 180°. An inverted T shaped incision was made in the uterus and a fresh stillborn male child delivered. Placenta and membranes were removed completely. There was no rent in the bladder. Still the position of the uterus was abnormal. A search was made and to our surprise we found another nongravid uterus lying posterior to the present one. A diagnosis of uterus didelphys was made. Uterus was closed in layers after achieving complete haemostasis and subsequently abdomen was closed after correcting the torsion.

Patient had uneventful postoperative recovery and was discharged on 7th postoperative day.