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Laparoscopic Management of Perforated Uterus

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Sometimes it is possible to do things with your laparoscope that you have not even imagined. A case is presented where laparoscope helped perform five procedures on the same patient in the same sitting.

A 'dai' handled D & C landed in our hospital in a state of shock. Patient was a young female of 28 years age and had two children including one male child. After initial resuscitation, it was decided to put in a laparoscope to know the state of affairs. There was a moderate haemoperitoneum. There were two rents in the fundal area of the uterus, one anterior and one posterior, near insertion of right tube. Both were bleeding. Omentum going into the uterus through the anterior rent was gently pulled out with the grasping instrument. A part of the omentum that had been tightly plugged in the uterus looked devitalized. The process of D & C was completed under supervision with the scope and haemostasis achieved with bipolar coagulation. As per the wish of the couple, tubectomy with bilateral tubal coagulation and excision was done in the middle of each tube. No attempt was made to repair the rents, as there was no chance of future pregnancy. The devitalized/questionable part of the omentum was pulled out of the abdomen through the right secondary port and excision done extra-corporeally. After the excision, rest of the omentum was pushed back. Omentum has a fair deal of mobility, so it was possible to pull it out and avoid laparotomy and the morbidity associated with it. The patient was up and about on the very next day and discharged in a satisfactory state. Thus laparoscope helped achieve five processes i.e. supervised D & C, omentectomy, tubectomy, management of perforations (haemostasis) and peritoneal lavage. Earlier each of these jobs required a laparotomy. No other case of laparoscopically assisted partial omentectomy is reported.