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LETTER TO THE EDITOR

Rupture of Gravid Non-Communicating Horn with 18 Weeks Pregnancy

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We have read with interest the article titled "Rupture of a Gravid Non-Communicating Horn with 18-weeks Pregnancy" by Mithil M. Patil, Girija Wagh, and Y. S. Kulkarni in J Obstet Gynaecol India [1]. It is an interesting case report about how a patient suspected as suffering from ruptured spleen actually turned out to be ruptured non-communicating horn pregnancy. However, the article has raised few concerns in our mind, which are as follows.

Firstly, what was the reason to suspect spleen rupture in a pregnant female presenting with shock, when most common differential diagnosis would be ruptured ectopic or abruptio placenta. Was there any reason to suspect spontaneous spleen rupture without any antecedent trauma?

Secondly, it would be of great academic value to add ultrasound scan images to publication, since it is interesting to note that ultrasound scan could report fetal bradycardia, normal uterine contour, and no visceral injury in gross hemoperitoneum but missed the fetus lying outside the uterus. How would such images appear.

Was it not sufficient to suggest abdominal pregnancy when uterus was looking normal in contour and fetus was not lying in the confines of uterine walls?

Thirdly, tachycardia sets in much before fall in blood pressure and in the present case patient has a pulse rate of hundred which is almost the higher side of normal pulse rate in pregnancy. With systolic BP of 70 mmHg we would expect a pulse rate shooting to something like 150 or even beyond. What would be the reason of relative bradycardia in a patient in shock with systolic BP of 70 mm of Hg.

In addition, it will be interesting to know what methods were used to achieve homeostasis during the repair of uterus at the site of excision of ruptured non-communicating horn in a highly vascular status of pregnant uterus further complicated with deranged coagulation profile.

Reference

1. Patil MM, Girija Wagh, Kulkarni YS. Rupture of a gravid non-communicating horn with 18-weeks pregnancy. J Obstet Gynaecol India. 2013;63:347–9.

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