Case Report

Spontaneous Rupture of the Urinary Bladder in the Puerperium.

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Key words: spontaneous bladder rupture, puerperium

Introduction:

Cases of spontaneous rupture of the bladder in postpartum period have been rarely reported. Here we report one interesting case of spontaneous rupture of the bladder in a primipara in the immediate postpartum period.

Case report:

Mrs. S.L. a 21-year-old primipara was admitted from the outpatient department with complaints of urinary retention and pain in the abdomen since four days.

She had delivered a full term female child 18 days back at home conducted by a mid wife. On examination the patient looked unwell, was significantly pale with P-120/m, BP-130/70 RR 26/m. On examination of the abdomen there was gross distention, no rigidity, uterus – not palpable.

Per speculum examination showed lochia with foul smell. Small partially healed perineal tear was seen. On per vaginal examination os was open. Few products were felt and uterine size could not be assessed.

USG showed free fluid in the peritoneal cavity and findings suggestive of uterine rent in fundal region with bilateral hydronephrosis. Other reports were Hb-7.8g% BUN-127mg%, S. Creat- 5.1 mg%, S. Elect-WNL; platelets normal, urine showed plenty of pus cells with 40-50 R.B.C.s/h.p.f.

A provisional diagnosis of rupture uterus with peritonitis and septicemia was made. The patient was posted for laparotomy. At laparotomy, the bladder was found to be ruptured. There was pus collection in the flanks. The uterus was found to be intact and involuting.

Bladder edges were refreshed and the bladder repaired with vicryl 1-0 with a suprapubic catheter. Abdominal drains were kept.

The patient recovered well postoperatively. The suprapubic drain was removed on the 17th postoperative day. Foley's catheter was removed after a month. The patient recovered with full bladder function.

Discussion:

Spontaneous rupture of the urinary bladder in the puerperium is extremely rare. Rupture of the bladder in

Paper received on : 25/10/2008 accepted on : 26/12/2009

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Figure 1 – Laparotomy findings: Bladder rupture with intact uterus

Figure 2 – Bladder appearance after repair

the postpartum period has been reported with a history of fall in the antenatal period with a possible rent or contusion on the bladder wall¹.

There has also been a case report of bladder rupture secondary to compression of the full bladder by the fetus during forceful vacuum delivery.²

In this case the mechanism of rupture maybe denervation of the bladder wall and its weakening due to compression on full bladder by the fetus during labor leading to retention, overdistention and finally giving way of the bladder wall. This is supported by the fact that the patient presented in the second week postpartum and the thickened appearance of the bladder wall at the time of laparotomy. A similar rupture has been reported in the postpartum period^{3,4}.

The most important thing to remember is that this is a

totally preventable condition by taking simple precautions like ensuring bladder emptying during labor especially during the second stage.

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