Abruptio placentae or splenic vein rupture? A case report

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ABSTRACT

Introduction: Spontaneous spleen vessel rupture in pregnancy is a very rare and carries a very high maternal and fetal mortality rate. This report presents a case of spontaneous splenic vein rupture in a pregnant woman with underlying thrombocytopenia and splenomegaly. Case Description: A 30-year-old, gravida 4 at 29 weeks gestation was admitted complaining of dull left-sided abdominal pain. She was not in labour and was haemodynamically stable. Her platelet count was low, and her spleen enlarged. Arrays of haematological investigations were performed but did not reveal any abnormality. A few days later, she complained of tense and tender abdomen, and went into hypovolaemic shock with fetal bradycardia. An emergency laparotomy and Caesarean Section was done for possible abruptio plenta. There was massive hemoperitoneum but no abruptio placenta found. Exploration of the abdomen revealed an enlarged spleen with some ruptured tortuous and dilated splenic veins. She had a total splenectomy and recovered fully following the correction of anaemia and coagulopathy. Her baby succumbed the next day due to severe prematurity and perinatal asphyxia. Histopathological examination showed splenomegaly with splenic vein thrombosis. Eighteen months later, she conceived again with an expected due date at the end of June 2022. Discussion: Spenic vessel rupture in pregnancy is uncommon but a life-threatening complication. Aetiology remains vague; hence, making timely diagnosis difficult. Training of medical personnel to recognise early clinical manifestation, usage of medical advances and aggressive surgical intervention may be the key to improve maternal and perinatal outcomes.