Torsion of Gravid Uterus in Third Trimester: A Case Report

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ABSTRACT

Objective: Physiological rotation of a gravid uterus is normal in third trimester. However, it is considered pathological if the rotation is beyond 45 degrees, which is extremely rare. Here we report a case of gravid Uterine Torsion. Case Presentation: This 29 year-old lady, gravida 3 para 2 at 36weeks gestation with singleton pregnancy, presented to the obstetrical unit with uterine cramping and severe abdominal pain. Obstetrical issue includes two previous lower segment caesarean section (CS) for placenta previa major. Current pregnancy was uneventful till the date of presentation. Upon examination, uterine tenderness was elicited, accompanied with prolonged fetal bradycardia. Preoperative diagnosis was concealed abruption placenta. Since the patient was not in labour, an emergency caesarean section (CS) was carried out. Diagnosis of Uterine torsion was made intraoperatively with torsion up to 360 degree dextrotation. Manual correction and delineation of proper anatomy followed by incision at lower segment for delivery. Baby sustained severe hypoxia and passed away .The patient recovered and was discharged home well on day three post operative day. Conclusion: Uterine torsion is extremely rare and make the preoperative diagnosis difficult. Prompt recognition of this condition is necessary for better maternal and neonatal outcome.

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Peripartum Hysterectomy in Hospital Miri, Sarawak, Malaysia: A 3 Years Exhaustive Review

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ABSTRACT

Introduction: Peripartum hysterectomy (PH) is an unceasingly uncommon but important treatment for severe major obstetric haemorrhage (MOH). Mean of prevalence from international reports were 1.2/1000 deliveries. There is a lack of national data regarding PH in Malaysia. Objectives: To determine the incidence, indications, operative details and associated morbidities as well as maternal and neonatal characteristics. Methodology: Record review of peripartum hysterectomy cases from COTDS and delivery data at Miri Hospital, Sarawak from 2015 to 2017. Results: Fifteen cases of PH were identified with incidence of 1.02 per 1000 lives birth. Predominant indications were uterine atony (46.7%), and abnormal placentation. Half of the cases had no risk factors beforehand. Significant risk factors included non-nulliparous, uterine fibroid in pregnancy, previous caesarean scars and uterine manipulation procedure(s). Ethnicities comprised of mostly Malay (46.7%), followed by Iban, Melanau, and Kenyah. Patients were young with mean age 31.8 and mean BMI of 27.9 kg/m⁻². The decision for types of hysterectomy were multifactorial with half done as total hysterectomy and 40.0% had internal iliac artery ligation done as an adjunct. There were no maternal mortalities and significant maternal morbidities following PH throughout the study. Youngest baby in the group was born at 33 weeks POA and majority of babies were born term with mean birthweight of 2730 grams. (135). Conclusion: The incidence rate for PH in Miri Hospital, Sarawak, Malaysia from 2015-2017 remains comparable to the international incidence rate. There were no maternal mortality or significant maternal and neonatal morbidities following PH. The positive repercussions are multifactorial including young and generally healthy population, adequate expertise and good logistic support.