

# Title: Silent Presentation of Uterine Rupture: A Case Report

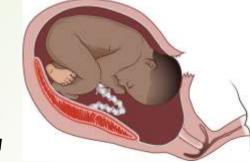
Dr. Niranjan Chavan, Dr. Darshana Ajmera, Dr. Deepali Kapote, Dr. Swara Patel, Dr. Pushpa Gowda, Dr. Monika Dhauchak Dr. Vaibhavi Iyer





### INTRODUCTION

- A uterine rupture is the complete division of all three layers of the uterine muscle:
- the endometrium, myometrium, and perimetrium.
- Uterine rupture is by far the most dangerous possible complication that can occur during trial of labour after cesarean section (TOLAC).



**INVESTIGATIONS** 

CTG SHOWS, Fetal distress **DIMINISHED BASELINE UTERINE PRESSURE LOSS OF UTERINE CONTRACTILTY** 

- •USG
- ·MRI

Warning signs of an impending uterine rupture

- ·fetal bradycardia
- Abdominal pain, acute onset scar
- tenderness
- Abnormal progress in labour
- Vaginal bleeding
- Cessation of uterine activity
- Loss of station of the presenting part
- Maternal tachycardia, hypotension, or shock

# CONCLUSION

- •Even though uterine rupture is rare, its accompanying complications like peritonitis canbe fatal if not recognized and managed promptly.
- •It is necessary to consider the risk of rupture when attempting VBAC and to follow up on the patient to prevent complications, even when the symptoms indicative of either rupture or infection are observed to be mild.

## CASE REPORT

A 28 y/o G2P1L1 with 38.2 weeks gestation, with a previous LSCS 4 years back, came with an ultrasound suggestive of an intrauterine fetal demise in a transverse lie with the placenta completely covering the os. The patient complained of pain Since 12 hours, not associated with any vaginal bleeding. O/E: patient was afebrile, heart rate of 84 beats per minute and blood pressure of 120/80 mmHq. Per abdomen examination, uterus contour was not palpable, and fetal parts were felt (? uterine rupture). FHS was not recorded on a handheld doppler. Abdomen was soft, and nontender without peritoneal signs. Per speculum examination revealed altered discharge not associated with any bleeding.

The patient was sent for an ultrasound examination which was suggestive of an empty uterine cavity and the fetus expulsed to the left side of the uterus.

### **EXAMINATION AND FINDINGS**

- •Her abdomen was soft, and non-tender without peritoneal signs
- Per speculum examination revealed altered discharge not associated with any bleeding.
- ·Ultrasound examination which was suggestive of an empty uterine cavity and the fetus (F) expulsed to the left side of the uterus



