EP.0176.Encountering placenta accreta in first trimester missed miscarriage- A case report

OBJECTIVE: **To emphasize the rare encounter of morbidly adherent placenta in first trimester surgical evacuation for missed miscarriage that can risk life of patient.**

CASE REPORT: **A 33 years old G2P1+0 with previous history of LSCS one year back due to symptomatic placenta previa at 36 wks presented in O&G clinic with ultrasound diagnosis of missed miscarriage at 8 wks.**

- **She underwent medical T.O.P but as had no response to misoprostol, she was booked for suction evacuation under G.A.**
- **With the introduction of plastic suction catheter tube , the visible deterioration of pulse and blood pressure was noticed.**

An intra operative scan revealed massive intra peritoneal hemorrhage.

- **An emergency laparotomy and code blue instituted with initiation of massive obstetric hemorrhage protocol from O.T.**
- **Per operative 2 to 3 L of blood was removed,uterus and adnexal areas snugly packed with surgical packs and aortic compression with the fist of operating surgeon done.**
- **When patient's vitals stabilized with blood transfusion and i.v fluid resuscitation and she recovered from hypovolemic hemorrhagic shock ,the abdominal packs removed.**
- **A bluish discolored area of 1.5x2cm cm over uterine isthmus at the site of previous scar was noticed. The uterine walls were intact .A small incision was given over the bluish area on the anteior uterine wall and placental tissue scooped out digitally. From same incision uterine cavity was sucked out for any RPOCs.**
- **Uterine incision was closed in 2 layers with vicryl no 2/0.**