

Poster 673: Retrieving a lost suturing needle from the vagina.

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Objective: Raise awareness of the risk of suturing needle loss and how to locate and retrieve them safely and quickly as a primary procedure. To consider the possible birth trauma and effect on birth partners.

Case report: A case of a 39 year old primip delivered by forceps in a labour room for failure to progress in labour with epidural anaesthesia. Whilst suturing the vaginal tear and episiotomy the suture needle detached from the suture and got lodged in the vaginal side wall. The doctor was unable to feel it or see it vaginally. The bleeding from the vagina was ongoing. The initial sutures were left in tact and a pack was placed in the vagina. The patient was moved to theatre for an Examination under Anaesthesia and suture removal. The labour room was carefully searched for the needle. An x-ray was requested which confirmed the needle was in the right lateral, deep vagina. The initial sutures were opened and ultrasound was attempted and abandoned. Xray was used with a needle holder to locate it 2 dimensionally. However it was not until live fluoroscopy was used that we were able to pick the needle out of the deep tissue of the vagina/pelvis and retrieve it whole. We then proceeded to re-repair the tears and perineum. A catheter and vaginal pack were left. She was administered iv antibiotics. She lost a total of 2.1L of blood but did not require a blood transfusion and she went home on day 2 postnatally. She was reviewed at ten weeks post natal where she reported no pain, urinary or bowel symptoms and vulva and vagina were well healed. There are potential significant consequences of psychological birth trauma to patient and birth partner due to the emergency surgery and obstetric haemorrhage. Debrief was offered and psychological referral considered.

Discussion: Using Live fluoroscopy and a needle holder we were able to locate and retrieve the lost needle. We were able to remove it whole in the acute primary surgery.

Conclusions: Lost suturing needles are described in the literature and a method similar to this has been reported as a secondary procedure. Leaving foreign objects in the body has been reported to cause chronic pain and could lead to other complications. Raising awareness of this complication and how to quickly and safely manage it will reduce morbidity for the patients and decrease resulting psychological birth trauma

References: Hösli I, Tercanli S, Holzgreve W. Complications of lost needle after suture of vaginal tear following delivery. Arch Gynecol Obstet. 2000 Nov;264(3):159-61. doi: 10.1007/s004040000086. PMID: 11129518. LAKATOS I. SCHWANGERSCHAFT UND ENTBINDUNG BEI EINER IN DER GEBÄRMUTTER ABGEBROCHENEN WUNDNAEHNADEN [PREGNANCY AND DELIVERY COMPLICATED BY A BROKEN SUTURE NEEDLE IN THE UTERUS]. Zentralbl Gynakol. 1963 Oct 12;85:1484-8. German. PMID: 14097206.

