

Objective

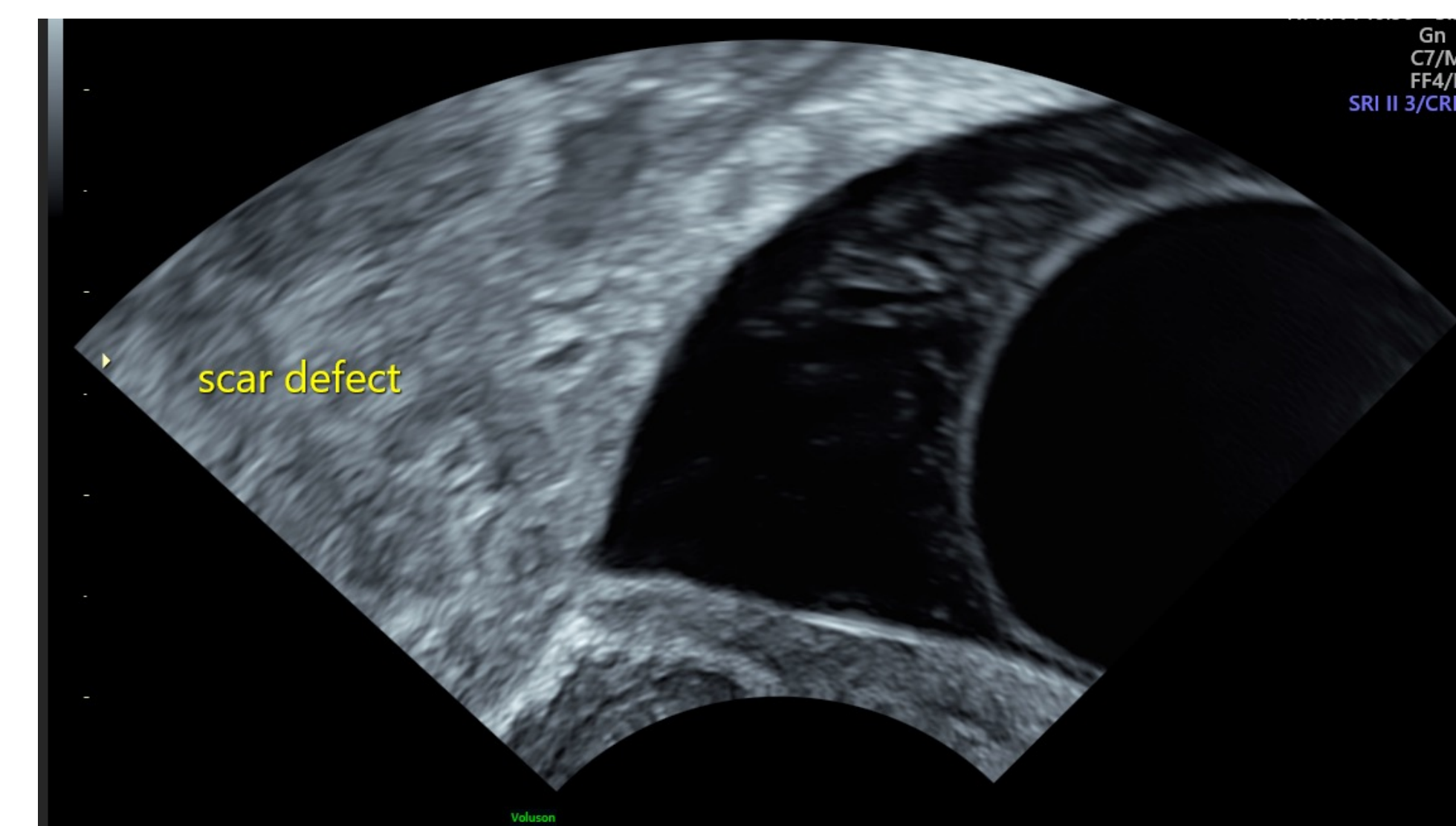
This describes a case of a uterine rupture in the first trimester of pregnancy. This was reported as the presentation and management of such cases is rare and such cases infrequently have accompanying ultrasound and surgical images.

Case report

A 35-year-old women self- presented to ED with an 8-hour history of sudden onset lower abdominal pain and a positive PT. She had a prior scan abroad which showed a live IUP at 7 weeks and 1 day gestation with CRL 10mm. She had previously had 3 live births (1 SVD, 1 emergency CS and 1 VBAC). Her observations were normal and clinical examination showed a markedly distended abdomen.

A TVUS scan was performed and demonstrated a live IUP with posterior implantation extending into a defect within the myometrium in the place of a previous CS scar with overlying blood clot.

At laparoscopy, a uterine rupture was noted within the sac protruding through the defect and a >1L haemoperitoneum and a laparotomy was performed. The pregnancy was removed intact and the transverse defect was closed.



Images demonstrating static B mode US images of the scar defect and an image taken at laparotomy of the gestation sac protruding through the uterine defect.



Discussion

Uterine rupture in the first trimester of pregnancy is a rare and life – threatening event with no reported known incidence. Uterine rupture contributes largely to maternal morbidity and is most common in patients with a previously scarred uterus¹ This case provides further literature on the successful management of such cases and increases awareness.

Conclusion

Uterine rupture in the first trimester is a diagnostic challenge with other diagnosis among the differentials for such presentations. With improved US techniques and further review regarding management of cases, the mortality and morbidity of uterine rupture can be reduced.

References

Abbas, A. M., Hussein, R. S., Ali, M. N., Shahat, M. A., & Mahmoud, A. R. (2018). Spontaneous first trimester posterior uterine rupture in a multiparous woman with scarred uterus: A case report. *Middle East Fertility Society Journal*, 23(1), 81–83. <https://doi.org/10.1016/J.MEFS.2017.07.007>