

Expect The Unexpected - Spontaneous Haemoperitoneum From A Uterine Fibroid

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BACKGROUND

Gynaecological causes of haemoperitoneum are commonly linked with ruptured ectopic pregnancies and ovarian cysts¹. Spontaneous haemorrhage from a uterine fibroid is an uncommon event, with less than 100 cases reported in the literature².

CASE

We report a case of a 47 year old Caucasian lady who presented with an acute abdomen and hypovolemic shock. There were no precipitating factors to her presentation, and she did not have any significant medical or surgical history. Her haemoglobin on arrival was 81g/L with a negative bHCG. A CT angiogram of her abdomen/pelvis revealed large volume haemoperitoneum with apparent arterial phase contrast extravasation from a fibroid uterus.

A laparotomy performed confirmed active haemorrhage from a feeding artery to a fundal uterine fibroid. A myomectomy was performed and she received 4 units of packed red cells as well as fresh frozen plasma. Her post-operative care in high dependency unit was unremarkable and histopathology of the fibroid confirmed a benign leiomyoma measuring 7x5x5cm weighing 110grams.

IMAGING FROM CASE



DISCUSSION

Uterine leiomyoma are common tumours in women of reproductive age, however its association with spontaneous intra-abdominal haemorrhage is a rare phenomenon.

A high index of suspicion and access to imaging modalities are paramount for accurate diagnosis.

Definitive management includes prompt resuscitative measures and surgery with a multidisciplinary approach to optimise outcome.

REFERENCES

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