Prior uterine perforation resulting in intestinal obstruction in a subsequent pregnancy

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A 30-year-old woman in the 30th week of her second pregnancy presented with intestinal obstruction that was confirmed by abdominal ultrasound examination.

In the patient's first pregnancy 2 years previously, a dilatation and curettage had been performed 4 weeks after delivery, to remove the retained placenta. She had developed intestinal obstruction the same night but had recovered within 48 h, and since then had been in good health.

Due to recurrent intestinal obstruction during the patient's second pregnancy, an elective caesarean was performed at 34 weeks. A loop of bowel found herniated into a perforation in the anterior wall of the uterus was reduced, the opening in the uterine wall was closed, and she made a complete recovery (Figs. 1, 2, and 3).

Fig. 1 The loop of small intestine herniating into the uterine perforation

Fig. 2 The uterine perforation can be clearly seen. The dilated afferent loop is pulled aside to reveal the depth of the uterine perforation

Fig. 3 The uterine perforation after the loop of bowel was cleared of adhesions and reduced

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