

A HIGH RISK CASE - MULTIPLE HUGE UTERINE FIBROIDS WITH SEVERE ANEMIA

A 40 y/o female was admitted in VishwaRaj Hospital under C/O Dr. Yogini Patil, with a huge mass in abdomen and severe anaemia with PV Bleeding.

She had history of growing mass in abdomen since 2 years with heavy menses, her obstetric history showed 2 previous LSCS.

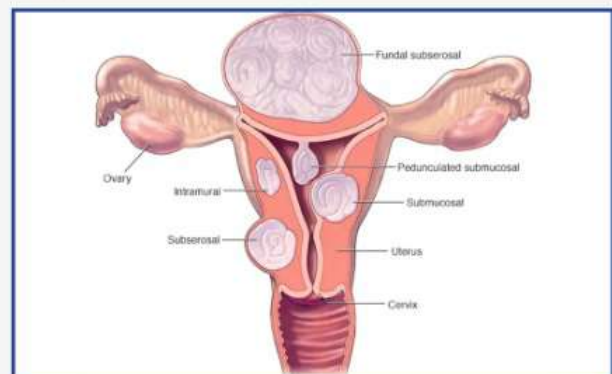
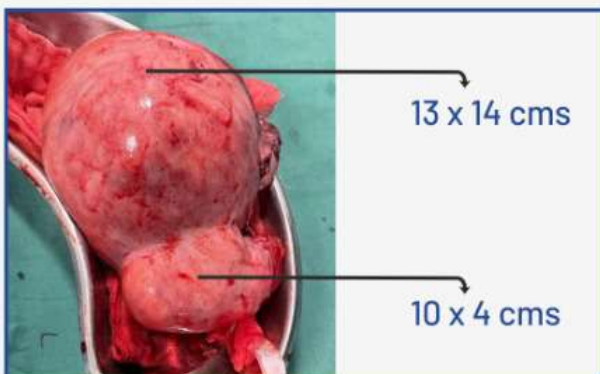
Patient was investigated thoroughly involving ICU & Physicians and found to have multiple fibroids in uterus, largest measuring 13x10x14 cms. Her haemoglobin was found to be 2.3 gms along with deranged coagulation profile with minimal pleural and pericardial effusion.

Patient was given blood and FFP transfusions, stabilized and started with progesterone and tranaxamic acid to stop PV bleeding. Patient was sent home for recovery and called for follow up every week.

After two weeks, patients Hb was found to be 7gms and other blood parameters were found to be within normal limits. Along with blood transfusions, high risk consents, patient was posted for TAH with BSO with adhesiolysis under GA+ epidural anaesthesia.

Intra-op Findings: Bladder was found to be adherent to lower uterine segment. Uterine and adneaxal anatomy was completely distorted with two huge fibroids, one fundal and another on the lower segment.

The surgery, a Total Abdominal Hysterectomy (TAH) with Bilateral Salpingo-Oophorectomy (BSO) with adhesiolysis, was carried out successfully, and the patient tolerated the procedure well. Following her recovery, the patient was discharged with a healthy haemoglobin level of 12gms. She made a full and smooth recovery without any complications. This was a team effort by Obs & Gynaec, Medicine & Anaesthesia Dept.



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