

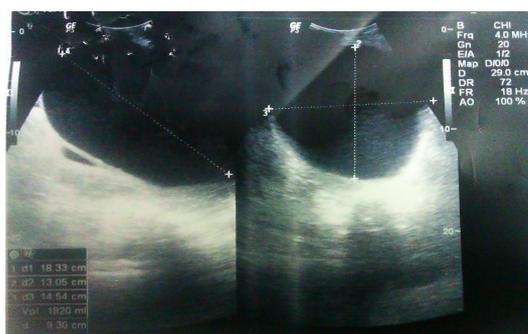
## Spontaneous Puerperal Bladder Perforation Presenting with Urinary Retention

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A 22-years old woman presented to our hospital on the 9<sup>th</sup> postpartum day with history of difficulty in passing urine, pain and distension of abdomen for 2 days. She had anemia and tachycardia. Lower abdomen was distended with mild tenderness and sluggish bowel sound. Ultrasonography showed distended urinary bladder, bilateral mild hydronephrosis and minimal ascites (**Figure 1**). Catheterization drained 1500 mL of mildly blood stained urine. Serum creatinine was 1.6 mg/dL. Total leucocyte count was 16000/cu mm with 80% neutrophils. Abdominal X-ray showed dilated bowel loops (**Figure 2**). She was diagnosed as “puerperal sepsis with paralytic ileus” and treated conservatively for 5 days. Repeat ultrasonography showed worsening of ascites with septations and urinary bladder perforation was then suspected. Emergency laparotomy showed a 3 cm perforation of the bladder dome, sealed by omentum with signs of peritonitis and purulent urine (**Figure 3**). The perforation was closed after a suprapubic cystostomy and peritoneal toilet and abdomen closed with a drain. She died of urosepsis on the 3rd postoperative day. Spontaneous puerperal bladder perforation is a rare and life-threatening condition. Very few cases have been reported.<sup>(1,2)</sup> Png and colleagues reported 2 cases and reviewed 2 other published cases.<sup>(1)</sup> Out of the 4 cases, two cases were diagnosed only during laparotomy. This case illustrates the importance of keeping bladder perforation as one of the differential diagnoses in puerperal patients presenting with sepsis and ileus, even in patients who present with urinary retention to avoid untimely death.



**Figure 1.** Abdominal X-ray shows distended bowel loops.



**Figure 2.** Ultrasonography demonstrates distended urinary bladder, bilateral mild hydronephrosis and minimal ascites.



**Figure 3.** Emergency laparotomy showed a 3 cm perforation of the bladder dome, sealed by omentum.

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Received March 2014  
Accepted June 2014

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