

Urinary Bladder Herniation into Pubic Ramus Fracture

Mandeep Singh Ghuman,¹ Shabdeep Kaur,² Kavita Saggar¹

A young adult male was admitted after suffering polytrauma due to road traffic accident. Emergency radiography showed pelvic fracture. Computed tomography (CT) scan was performed which revealed presence of comminuted displaced fracture of left superior pubic ramus. Fracture line was extending till pubic symphysis but no symphyseal diastasis was noted. In addition, a part of urinary bladder was seen herniating in between the gaping bony margins of the fractured superior pubic ramus (**Figures 1 and 2**, arrows). In view of this unexpected CT scan finding, it was decided not to do external fixation and the patient was taken up for open reduction and internal fixation.

Although urological injuries are common in pelvic fractures, herniation or interposition of bladder into pelvic fractures is very rare phenomenon with available case reports mentioning herniation and subsequent entrapment into pubic symphyseal diastasis.⁽¹⁻³⁾ Interposition of the bladder into pubic rami fracture has not been reported before in the literature. Operative management is recommended in pelvic fractures with incorporated bladder.⁽¹⁾ High index of suspicion is required to detect any herniation of bladder, not only in cases of pubic diastasis but also in the presence of rami fractures as overlooking this significant finding will lead to subsequent incarceration of urinary bladder following external fixation.^(2,3)

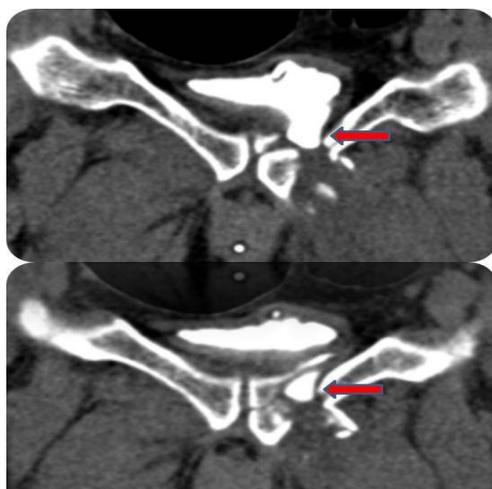


Figure 1. Pelvic computed tomography scan, coronal sections, demonstrates herniation of urinary bladder (arrows) into the left superior pubic ramus fracture.

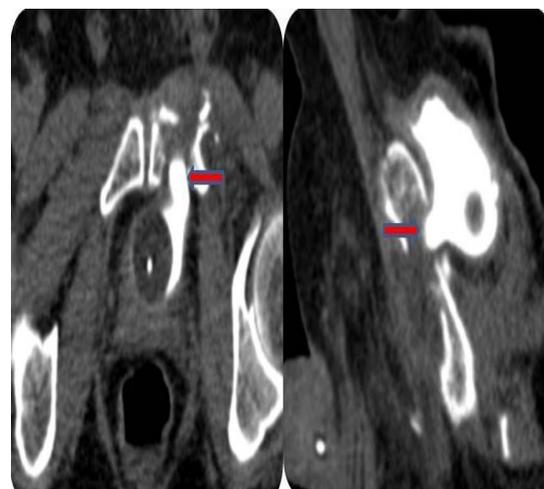


Figure 2. Pelvic computed tomography scan, axial and sagittal sections, shows herniation of urinary bladder (arrows) into the left superior pubic ramus fracture.

¹Department of Radiodiagnosis, Dayanand Medical College and Hospital, Ludhiana-141001, India.

²Department of Radiodiagnosis, Indira Gandhi Medical College, Shimla-171001, India.

Corresponding Author:

Mandeep Singh Ghuman, MD
Department of Radiodiagnosis,
Dayanand Medical College and
Hospital, Ludhiana-141001, In-
dia.
E-mail: dr.msghuman@gmail-
com

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