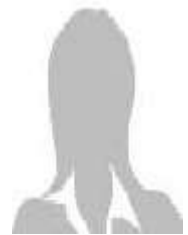


A rare case report of transverse vaginal septum with hematocolpus at CKM hospital

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Abstract

Premenarchial transvers vaginal septum is a benign condition. The incomplete vertical fusion or failure of canalization of urogenital sinus and Mullerian duct results in a transverse vaginal septum that varies in thickness and can be located at almost any level in the vagina with prevalence in superior vagina - 46%, mid vagina - 40% and inferior vagina - 13%, usual presentation as primary amenorrhoea and cyclic pelvic pain. The incidence varies from 1:2100 to 1:70,000.

Case Report: A case report of 14-year-old female came to hospital in December 2018 with complain of acute lower abdominal pain, severe in intensity along with difficulty in passing urine since 2 days. She had similar complain 2 months back for which urine was drained with catheter and history of not yet attend menarche and cyclical lower abdominal pain since 8 months was obtained from her mother. On general examination she had normal secondary sexual characteristics with normal development of breast and pubic hair. On abdominal examination abdominal mass of 12 weeks with suprapubic tenderness found. Urine was drained with foleys catheter of around 1500ml. External genitalia are normal. In vagina approximately 1 to 2cms deep, transverse vaginal septum with no bulging seen. On per rectal examination vagina was bulky tender, tense cystic mass felt over vagina. USG revealed hematocolpos with normal kidneys and ureters. An excision of vaginal septum done, 400ml dark chocolate liquid collected, marsupialization of the edges done. Cervical catheter and vaginal stent left in situ and removed on 14 post op day and discharged by instructing how to use vaginal dilator for 3 months to keep vagina patent and on OCP. She had resumed normal menstruation and no other complaints.

Conclusion: Transverse vaginal septum is a developmental failure of vertical fusion of female genital tract, the incidence of which is rare with unknown aetiology. The usual presentation of the condition is either in neonatal period with mucocolpus, or at are after puberty with pain - amenorrhea and hematocolpus difficulty in micturition for which surgery is the mode of treatment.



Biography:

She is Assistant Professor in CKM Hospital.

Speaker Publications:

1. "A rare case report of transverse vaginal septum with hematocolpus at CKM hospital"; Asian J. Mid. / 2018 / 30(8) / pp 1731-1735
2. "A rare case report of transverse vaginal septum with hematocolpus at CKM hospital/ Vol 151 (2019) 199-211
3. "A rare case report of transverse vaginal septum with hematocolpus at CKM hospital"; Journal of gynecology/ Vol 271, 2020, 110961.

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