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Puerperal Uterine Inversion

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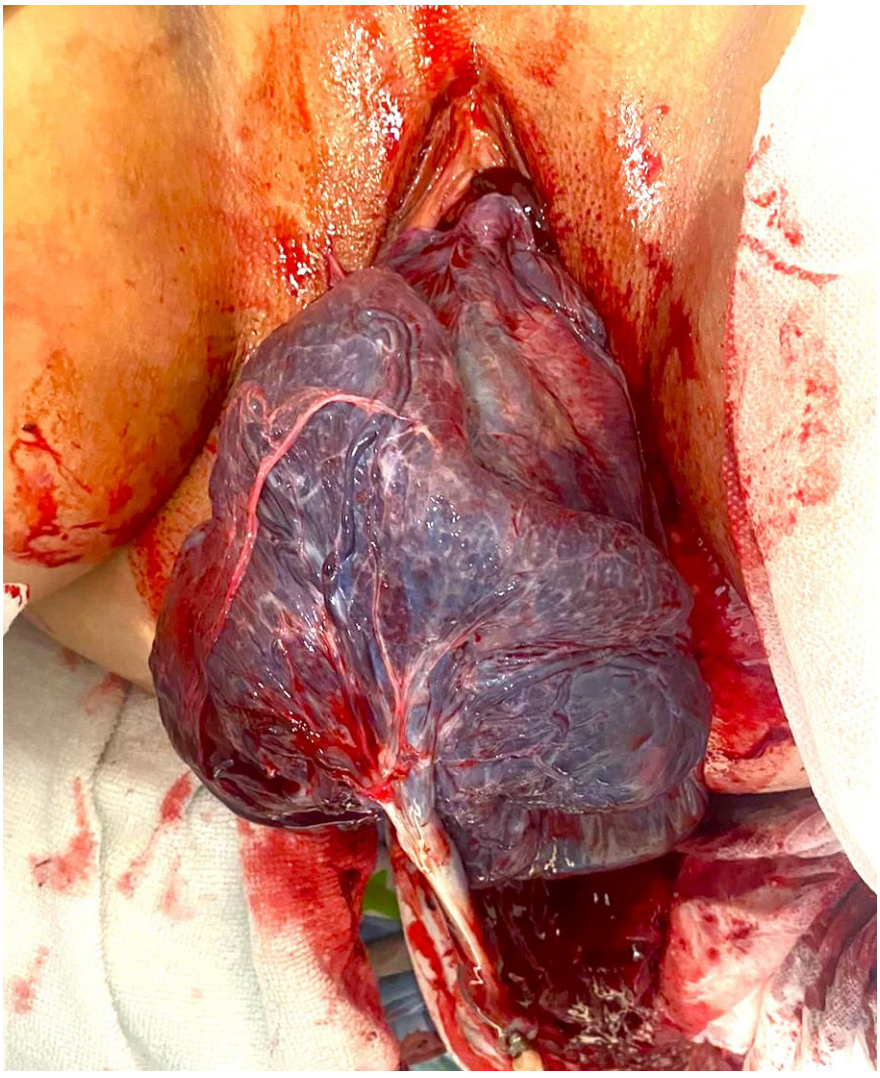

Case Description

A 30-year-old woman, in her fourth pregnancy, at 39+1 weeks gestational age, experienced a precipitous vaginal delivery. Following delivery, the placenta remained attached and did not spontaneously separate after 20 minutes. Gentle umbilical cord traction was applied, resulting in acute stage 3 uterine inversion **(Figure 1)** and post-partum hemorrhage. Subsequently, the patient exhibited symptoms of hypotension and confusion.

Management: Immediate measures were taken to manually revert the uterus to its correct position while the placenta was still attached. The patient received intravenous fluid resuscitation and was promptly transferred to the operating room for further management. Under general anesthesia, the placenta was carefully detached from the uterus by hand. Uterotonic medications (oxytocin and misoprostol) were administered, and a massive blood transfusion was performed to stabilize the patient's hemodynamic status. Following the successful intervention, both mother and newborn were discharged home in stable condition on the fourth postpartum day.

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