

## **A case of incarceration of the retroverted uterus**

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### **Objective**

Incarceration of the gravid uterus is a rare obstetric disorder that contributes to pregnancy-related complications.

### **Methods**

A 29-year-old primigravida was admitted to our hospital because of urine retention and lower abdominal pain in the early second trimester, at 14 week of gestation. She was healthy and became pregnant through natural conception. The gynecological exam was normal except for the retroversion of the uterus. At the beginning of pregnancy, we could not see her pregnancy till nine weeks.

### **Results**

Uterine incarceration was diagnosed based on pelvic examination and abdominal ultrasound. A Foley catheter was placed and manual repositioning was successful at the 16<sup>th</sup> week of gestation. No episode of retention was experienced after the further enlargement of the uterus and its ascent. A healthy boy infant was delivered vaginally on the 40<sup>th</sup> week of pregnancy. No episode of retention was experienced after the further enlargement of the uterus and its ascent.

### **Conclusion**

Gravid uterine incarceration is rare but serious late gestational complications or poor obstetric outcomes may occur. In view of the lack of specific signs or symptoms, additional physical and imaging examinations are critical to early diagnosis of this condition. The key to successful treatment is: Appropriate treatment measures should be tailored to the different gestation weeks and may improve pregnancy outcomes.