

## INTRODUCTION

A hydatiform mole is a part of group of disorders called Gestational trophoblastic neoplasm originating from placenta with potential to invade the uterus leading to rupture and hemoperitoneum.

## OBJECTIVE

Report a case of perforating mole in a 30 year old female who presented with shock and hemoperitoneum.

## CASE OPERATION PROCEDURE

A 30 year old female G5P3L3A1 was referred to SCBMCH, Cuttack for management of bleeding P/V, hypovolemic shock and severe anaemia. With a history of oral abortifacient intake 1 month back at 2 MOA. No history of bleeding P/V or passage of fleshy mass after intake of oral abortifacient. She had now presented with bleeding P/V and pain abdomen for 1 day.

Her UPT and paracentesis is positive with no significant medical history. She had cold clammy extremities with PR 168 bpm, BP-60 mm hg systolic, RR-24/min, P/A-guarding, rigidity +, uterus approx. 20 weeks size, tense tender abdomen. P/V- os closed, b/l fornices full, no active bleeding, no cervical motion tenderness. No blood investigations and ultrasound were available. Her B-HCG was 88000 and patient was taken for emergency exploratory laparotomy. Obs. Hysterectomy was done for perforation present over posterior aspect of uterus by a molar pregnancy. She was transfused with 5 units of PRBC. Post op patient was hemodynamically stable.

## DISCUSSION

Occurrence of invasive mole is 1 in 15000 pregnancies with local invasions in 15% cases.

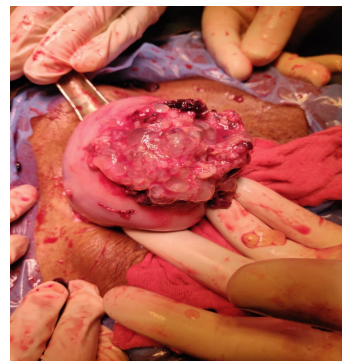
Metastasis most commonly occurs in lungs then to vagina, cervix, genital tissue ,brain. Hysterectomy was the reasonable management for this patient to prevent life threatening hemoperitoneum and per vaginal bleeding with no metastasis

## CONCLUSION

In Molar pregnancy suction evacuation is the 1<sup>st</sup> line of management but Surgical intervention may become necessary to deal with hemoperitoneum. Follow up after evacuation > Weekly  $\beta$ -hCG estimation to undetectable level.

## $\beta$ -hCG values

80000 outside	3/2/2023 47900	8/2/2023 8000
25/2/2023 20	4/3/2023 <5	17/3/2023 <1



## REFERENCE

Novak gynecology 17<sup>th</sup> edition  
 No conflict of interest