

BLIND VAGINA , A RARE CASE REPORT ON TRANSVERSE VAGINAL SEPTUM DIAGNOSED INCIDENTALLY
BY DR NIHARIKA R (JUNIOR RESIDENT) DEPARTMENT OF OBG
UNDER THE GUIDANCE OF DR M P A SAILAKSHMI (PROFESSOR AND HOD) RRMCH.



INTRODUCTION

Transverse vaginal septum a rare developmental disorder of vagina leading to genital outflow tract obstruction. It results from incomplete recanalization between vaginal components of Mullerian duct and urogenital sinus , a disorder of transverse fusion. Its most common locations being the upper part of the vagina .

OBJECTIVES

1. Timely diagnosis of the patients presenting with symptoms suggestive of transverse vaginal septum.
2. Instituting appropriate management to restore the anatomy and physiology of the patient .

CASE OPERATION PROCEDURE

A case of 21 year old female patient with history of spontaneous abortion who came to our hospital for further management . On examination , patient was found to have a blind vagina later diagnosed as transverse vaginal septum with a pinhole opening .
PROCEDURE – Successful transverse vaginal septal resection done followed by which approximately 6 cm vaginal canal length was created. Interrupted sutures put for approximation. Vaginal foam was kept to maintain the patency and avoid the stenosis later in time. Dilators were given for dilatation of vagina.



REFERENCES

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- Williams CE, Nakhal RS, Hall-Craggs MA, Wood D, Cutner A, Pattison SH, Creighton SM. Transverse vaginal septae: management and long-term outcomes. BJOG: An International Journal of Obstetrics & Gynaecology. 2014 Dec;121(13):1653-8.

DISCUSSION

Transverse vaginal septum is a rare congenital anomaly , leading to uterovaginal outflow tract obstruction . Often , the anomaly is undetected until adolescence , when primary amenorrhea or cyclic , pelvic pain and suprapubic tender mass prompt a diagnostic evaluation . Ultrasound aids in localization and characterization of the lesion while MRI helps to determine the thickness and depth of the septum .

CONCLUSION

Timely diagnosis and institution of appropriate management is essential for prevention of short term and long term complications of transverse vaginal septum such as dysmenorrhea , dyspareunia , endometriosis, infertility , hematometra , pyometra, hydronephrosis , possible pyelonephritis and superinfection causing sepsis etc.