

Spontaneous Urinary Bladder Rupture Due to Late Postoperative Urinary Retention After a Total Abdominal Hysterectomy – Case Report

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Abstract

Introduction: Spontaneous urinary bladder rupture due to late postoperative neurogenic bladder is a rare but serious condition that can lead to significant complications such as sepsis and renal impairment. This case underscores the necessity for timely recognition and intervention in post-surgical patients.

Case Presentation: A 42-year-old female, with a history of total abdominal hysterectomy performed seven weeks before, presented to the emergency department with generalized abdominal pain, nausea, vomiting, and absence of urination for two days. Initial imaging revealed free fluid in the abdomen and abnormal renal function. Despite conservative measures, her condition necessitated surgical exploration,

during which a 2.5 cm rupture of the urinary bladder was discovered.

Surgical Procedure: The bladder rupture was repaired successfully with a two-layer closure and drainage was established. The patient’s postoperative course was uneventful, with significant urine output and recovery of bowel function.

Discussion: Spontaneous bladder rupture is exceedingly uncommon, particularly following hysterectomy, and is often misdiagnosed. The role of anesthesia and postoperative medication in bladder function impairment is critical, as well as the need for vigilant monitoring of voiding function after pelvic surgeries.

Conclusions: Intraperitoneal bladder rupture

presents a grave risk following pelvic surgeries. This case emphasizes the importance of considering bladder integrity in differential diagnoses for postoperative patients exhibiting urinary retention and ascitic fluid, along with the essential role of voiding assessments in postoperative protocols. Early recognition of this complication is vital for preventing severe morbidity.

Keywords: urinary retention, neurogenic bladder, bladder rupture, urinary peritonitis.