Intra-Uterine Stab Wound of Foetus

BY

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CASE HISTORY

A primigravida African female, aged about 25 years, was admitted to Harare Hospital on the night of 22nd March, 1959. She gave the history of having been stabbed in the abdomen whilst involved in an argument at a dance.

On admission, her general condition was good. There was no clinical anaemia and her pulse was 80 and of good volume. Examination of her abdomen showed a piece of omentum protruding from an abdominal wound just to the left of the umbilicus, and by the height of the fundus she was estimated to be 32 weeks pregnant. The foctal heart was heard.

Under general anaesthesia the protruding omentum was excised. There was a $\frac{3}{4}$ -in. incised wound just to the left of the umbilicus (see Fig. 1). This wound was extended superiorly and inferiorly. The peritoneal cavity



Fig. 1—Abdominal wound of the mother.

Note oblique part of the wound in
the middle third, which is the site
of the stab wound.

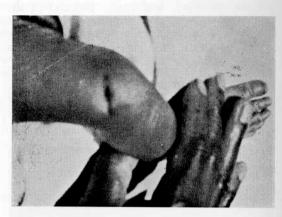


Fig. 2—Stab wound of toetus situated above right knee. Photo taken a few days after delivery, with healing starting at both ends.

was opened and free blood found. There was no evidence of any free liquor. Examination of the bowel revealed no puncture wound, but on the anterior surface of the uterus there was a ½-in. stab wound. By probing the uterine wound it appeared to be limited in depth to the thickness of the uterine wall. This wound was sutured and the abdominal wound closed in layers.

Her post-operative course was normal. There were no signs of her going into premature labour, but she was transferred to the maternity unit for observation. On 7th April she was discharged from the unit fit.

The patient paid two subsequent visits to the ante-natal clinic on 16th and 23rd April, 1959, and at the last visit she was estimated to be 36 weeks pregnant with her pregnancy progressing normally. At both these visits the position of the foetus was vertex left occipito-anterior.

At 1.45 a.m. on 7th May she was admitted to the maternity unit in labour. Her labour progressed normally and she was delivered of a live male infant weighing 6 lb. 4 oz. at 2.35 p.m. on 7th May, 1959. It was immediately noticed that the infant had a gaping laceration above the right knee, exposing the lower end of the quadriceps (see Fig. 2). There was no apparent impairment of function of this limb. The ends of the wound showed some healing, but at its centre it measured a quarter of an inch across. The total length of the wound was five-eighths of an inch. Seven days after delivery the wound was healing spontaneously with some keloid formation and was healed in 14 days. The puerperium of the mother was normal.

CONCLUSION

A case of a foetus sustaining a stab wound while in utero is reported.

It is suggested-

- (1) That the wound had little chance to heal whilst the foetus lay in utero bathed in liquor and with its knees flexed, thus causing the wound to gape more. The total time from the date the wound was inflicted to the date the baby was delivered was 46 days.
- (2) That, as twice recorded in the ante-natal clinic, the position of the foetus was vertex left occipito-anterior; the limb most likely to suffer injury would be the right one.

A review of limited literature reports no such injury to a foetus.

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