Septic Shock Induced by Degenerated Myoma Uteri: A Case Report

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Abstract: A 49-year-old Japanese female was admitted to our hospital due to acute abdomen. A large tumor which reached the ensiform cartilage was detected. Abdominal CT findings revealed liquidized myoma uteri and ascites. An emergency laparotomy was performed. A large myoma filled with brown pus was found in the abdominal cavity. The pus (4000 ml) erupted from a tear in the myoma uteri. We therefore performed a hysterectomy (tumor weight, 6 Kg). Postoperatively, the patient's general health required careful management. The respiratory organs exerted pressure on the tumor, which in turn exerted pressure on the diaphragm which thus led to a loosening of the diaphragm. It took 35 days for the respiratory organs to return to a normal state after surgery. Patients face a potentially life—threatening situation with the occurrence of myoma uteri-induced sepsis. Such situations necessitate the removal of the septic focus and the careful management of the general health of the patient.

Key words: Myoma Uteri, Septic Shock, Systemic Inflammatory Response Syndrome