

Respiratory system

The respiratory rate was 22 cycles per minute and the lung fields were clinically clear.

Cardiovascular system

Her pulse was 88 per minute and blood pressure was 120/80mmHg. The heart sounds were normal and there were no murmurs.

Abdomen

The abdomen was full and moved with respiration. There were no areas of tenderness. The liver and spleen were not palpably enlarged and the kidneys were not ballotable. She had no demonstrable ascites. Her bowel sounds were normal.

Pelvic examination

The patient was put in dorsal position. There was a pinkish mass bulging into the introitus from the vagina with complete eversion of the vaginal wall. There was no area of ulceration. There was no demonstrable stress incontinence on valsalva manoeuvre. The vulva and other external genitalia appeared grossly normal. The mass was easily reduced by the patient. In the left lateral position, there was an anterior vaginal wall prolapse and an apical prolapse of the uterus and cervix beyond the hymenal remnants. There was no prolapse of the posterior vaginal wall. The vaginal capacity was spacious and the uterine size was normal and non-tender. There were no adnexal masses and the pouch of Douglas was empty.

QUESTIONS ON PRACTICE CASES

1. What are the most likely diagnoses in Practice Cases 1 and 2 respectively?
2. What are the possible differentials?
3. How would you grade, stage or classify these patients with reference to your diagnoses above?

4. What are the predisposing factors to the condition in Practice Cases 1 and 2? Mention other predisposing factors.
5. What are the other symptoms that may support the most likely diagnosis in Practice Cases 1 and 2?
6. What are the aims of management in Practice Cases 1 and 2?
7. What are the conservative and definite options in the management of Practice Cases 1 and 2?

FURTHER READING

1. Ebeigbe PN. The Woman with Complaints of "Something coming down the vagina". In: Peter N Ebeigbe, editor. *Foundations of Clinical Gynaecology in the Tropics*. Fodah Global Ultimate Limited, Benin City. Pp 66-73.
2. Decherney AH, Nathan L, Naufer N, Roman AS, editors. *Current Diagnosis and Treatment in Obstetrics and Gynecology*. 11th Edition. McGraw-Hill Medical. New York; 2013
3. Mouritsen L. Classification and evaluation of prolapse. *Best Practice and Research Clinical Obstetrics and Gynaecology*. 2005;19 (6); 895-911.