



Case Report

Volume 3 - Issue 1: 12-13 / January 2020

LEFT FEMORAL GUNSHOT INJURY RESULTING A VAGINAL FOREIGN BODY: BULLET IN THE VAGINA

Volkan Burak TABAN^{1*}

¹*Necmettin Erbakan University, Meram Medical Faculty, Department of Cardiovascular Surgery, 42080, Konya, Turkey*

Received: July 23, 2019; **Accepted:** August 09, 2019; **Published:** January 01, 2020


Abstract

Vaginal foreign bodies may be represented in various group of patients with various ways. A fifteen-year-old female patient admitted to emergency department with the complaint of left femoral injury due to gunshot. In detailed examination, bullet was found in her vagina and removed surgically. Determination of the exit hole is as important as entrance hole in gunshot injuries, though probable harm or neighboring to vital structures. Bullet can be found in an unexpected area without any direct association with the injury site. To reveal the localization of the foreign body and its surgical remove is important to prevent further complications. Here we report a case of vaginal foreign body that reached the vagina indirectly from femoral region.

Keywords: Bullet, Gunshot Injury, Vaginal Foreign Body

***Corresponding author:** Necmettin Erbakan University, Meram Medical Faculty, Department of Cardiovascular Surgery, 42080, Konya, Turkey

E mail: doctorvbt@gmail.com (VB. TABAN)

Volkan Burak TABAN  <https://orcid.org/0000-0002-0865-1356>

Cite as: Taban VB. 2020. Left femoral gunshot injury resulting a vaginal foreign body: bullet in the vagina. BSJ Health Sci, 3(1): 12-13.

1. Introduction

Vaginal foreign bodies are uncommon entities but must be kept on mind in the presence of recurrent or persistent discharge, bleeding or both especially in the children or mentally retarded persons (Benjamin et al., 1994). Rarely, foreign bodies may be deposited into the body by a traumatic or iatrogenic injuries (Tim and Mihra, 2003).

In this case we report a fifteen-year-old female patient with unusual foreign body with an interesting way to reach vagina, namely the patient was exposed to gunshot injury from her mid-lateral side of left leg and interestingly bullet stopped in her left labius major.

2. Case Presentation

A fifteen-year-old female patient referred to the emergency department with the complaint of left leg injury. She was exposed to gunshot injury with a unique bullet that entered the body from mid-lateral side of left leg (Figure 1). Physical examination revealed a 3 mm x 3 mm, smooth-edged entrance hole but exit hole couldn't be detected. There was no active bleeding but in case of vascular injury, arterial and venous doppler ultrasounds were performed with a result of normal vascular structures. Direct graphy was performed to detect the location of the bullet and it was seen in the pubic region (Figure 2). After a careful investigation it was detected in

the left labius major and operation was decided. Under spinal anesthesia bullet was removed by using fluoroscopy. The patient was discharged from hospital without any problem.



Figure 1. Entrance hole of the bullet from mid-lateral site of left femoral region.



Figure 2. Bullet in the vagina as a foreign body.

Vaginal foreign bodies are uncommon entities but must be kept on mind in the presence of recurrent or persistent discharge.

3. Discussion

The majority of the foreign bodies may be found in the vagina including safety pins, hair grips, pencils and small jam jars, especially in a young or mentally retarded child. Forgotten tampons or broken portions of condoms may present as a vaginal foreign bodies in adolescent girls and they may be used as a part of sexual encounter or part of an episode of abuse or to induce abortion in adults (Chinawa et al., 2013).

The most common symptoms are bleeding and foulsmelling vaginal discharge. However they may lead to serious complications like pelvic abscess and subsequent scarring (Chopra et al., 2010). Esmaeili et al. (2008) revealed that in the girls with bleeding or brown discharge, a foreign body was found in the rate of 17.6% with vaginoscopy. Beside these, foreign bodies may be placed to vagina abruptly accidentally or with a traumatic way. In these cases most common symptom is pain. In our case, the patient had a bullet as a foreign body in the vagina although vagina wasn't targeted directly. It entered the body from left mid-lateral side of femoral region and then stopped in the vagina.

In gunshot injuries detection of entrance and exit holes are important. Because stab and gunshot wounds are the most frequent penetrating injuries those may lead to life-threatening situations (Ozgun and Omer, 2018). Careful physical examination consist of the depth and the way of bullet must be done. Sometimes exit hole couldn't be revealed. In these situations ultrasonography and direct graphies may be useful (Kihara et al., 2001).It is necessary to determine if the foreign body is near a vital structure. Metallic foreign bodies such as bullets can be moved or twisted by the strong magnetic fields encountered in MRI studies, so it is contraindicated in such situations (Tim and Mihra, 2003; Altinbas and Tanyeli, 2018). Bullet can be found in an unexpected area without any direct association with the injury site, like our case.

As a conclusion, vaginal foreign bodies can be seen in different age groups with various reasons, like gunshot injuries. Determination of the localization of the foreign body and its surgical remove is important to prevent further complications.

Conflict of interest

The author declare that there is no conflict of interest.

References

- Altinbas O, Tanyeli O. 2018. Surgically managed gunshot injury of the heart; bullet in the right coronary artery. *J Surg Med*, 2(2): 193-194.
- Benjamin C, Yaron Z, Uriel E. 1994. Sonographic detection of vaginal foreign bodies. *J Ultrasound Med*, 13: 236-237.
- Chinawa JM, Obu HA, Uwaezuoke SN. 2013. Foreign body in vagina: An uncommon cause of vaginitis in children. *Ann Med Health Sci Res*, 3(1): 102-104.
- Chopra S, Singh Y, Magon N. 2010. A case of intravaginal foreign body. *Med J Armed Forces India*, 66(3): 266-268.
- Esmaeili M, Mansouri A, Ghane F. 2008. Foreign body as a cause of vaginal discharge in childhood. *Iran J Pediatr*, 18(2):187-190.
- Kihara M, Sato N, Kimura H, Kamiyama M, Sekiya S, Takano H. 2001. Magnetic resonance imaging in the evaluation of vaginal foreign bodies in a young girl. *Arch Gynecol Obstet*, 265: 221-222.
- Tim H, Mihra T. 2003. Foreign bodies. *Radio Graphics*, 23: 731-757.