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Clinical Image

Pyometra in Infants

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A 5 month-old infant consulted in pediatric emergency with abdominal discomfort and intermittent fever for last four days. On physical examination, she presented a mild abdominal distention. During bladder catheterization in the study of unexplained fever, drainage of pus was visualized by introitus [1-3]. Abdominal ultrasound showed a heterogeneous collection located between bladder and rectum, compatible with uterine abscess (Figure 1).

On Pediatric Surgery examination normal female external genitalia and proper urethra position were visualized. Performing digital rectal examination, abundant drainage of pus was observed through vagina. She received antibiotic treatment for 7 days. Abdominal ultrasound after manual drainage showed complete disappearance of the abscess. Magnetic resonance was performed to rule out a possible urogenital or rectal malformation. She presented good outcome, currently being asymptomatic. The accumulation of purulent material in the uterine cavity is known as pyometra. Its pathogenesis is not well known, but it seems to be secondary to conditions that interfere with the natural drainage of the uterus: hypoestrogenic endometrium, cervical stenosis and bacteria exposure. Typical presentation includes recurrent urine infections, abdominal mass, obstructive uropathy findings and sometimes secondary infection. It is a rare entity in children, but it should be considered in the differential diagnosis of pelvic and abdominal abscess (Figure 2).



Figure1: Drainage of pus by introitus.



Figure 2: Heterogeneous collection of 4.1x5.6x12 cm located between bladder and rectum.



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References

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