

## CASE IMAGE

# Prolonged labor presenting as vulvar edema during pregnancy

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## Abstract

Isolated vulvar edema is a rare complaint during pregnancy with a long list of differential diagnosis. Here, we describe a case of vulvar edema due to obstructed labor presenting to a rural primary healthcare center in Nepal.

## KEYWORDS

prolonged labor, pregnancy, vulvar edema

We present a case of a 35-year-old multigravida with prolonged second stage labor and bilateral spontaneous vulvar swelling. Examination revealed a singleton pregnancy with a fetal heart rate of 148/min, a fully dilated cervix, and a head station at position  $-1$  along with bilateral diffuse non-tender vulvar swelling (Figure 1). Her blood pressure and other baseline laboratory parameters including a urine analysis were normal. Simultaneously, four punctures were made with a 22-gauge hypodermic needle on the vulva, two on each side, but it was not of much benefit. Her contractions were of inadequate duration, so she was started on an escalating dose of oxytocin. Following this, adequate contractions were observed, and she delivered a healthy single live male baby. On her follow-up 2 days later, the vulvar edema had subsided.

Causes of isolated vulvar edema include inflammatory conditions such as contact dermatitis, crohn's disease, hidradenitis suppurativa; infections like vulvovaginal candidiasis; trauma; pregnancy and related events, etc.<sup>1</sup> Cases of vulvar edema in pregnancy has been described related to pre-eclampsia, tocolysis, severe anemia, diabetes,



FIGURE 1 Bilateral diffuse vulvar edema.

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hypoproteinemia, syphilis and prolonged labor and upright maternal position during pushing in which case, augmentation with intravenous oxytocin and amniotomy are the first-line treatment options.<sup>2-4</sup> Vulvar edema during pregnancy have also been managed by a puncture with a sterile 22-gauge hypodermic needle.<sup>5</sup>

#### AUTHOR CONTRIBUTIONS

AKS obtained information. AKS an AR wrote, reviewed, and edited the original manuscript AS, SC, and NK reviewed and edited the original manuscript.

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None.

#### CONFLICT OF INTEREST

None declared.

#### DATA AVAILABILITY STATEMENT

All required data are present on the article itself.

#### ETHICAL APPROVAL

Only observational data used.

#### CONSENT

Written informed consent was obtained from the patient to publish this report in accordance with the journal's patient consent policy.

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