HEMATOMETRA

An accumulation or retention of blood in the uterus.

♀ Symptom  ♂ Female

About Hematometra

Hematometra is a retention of blood in the uterine cavity caused by obstruction to menstrual flow at the level of the uterus, cervix, or vagina. In older women, the obstruction is usually acquired and occurs at the level of the cervix. In young women, hematometra may be due to congenital anomalies such as an imperforate hymen (a congenital disorder where a hymen without an opening completely obstructs the vagina) or a noncommunicating Müllerian duct (paired ducts of the embryo).

Hematometra typically presents as cyclic, cramping pain in the midline of the pelvis or lower abdomen. Patients may also report urinary frequency and urinary retention. Premenopausal women with hematometra often experience abnormal vaginal bleeding, including dysmenorrhea (pain during menstruation) or amenorrhea (lack of menstruation), while postmenopausal women are more likely to be asymptomatic. Due to the accumulation of blood in the uterus, patients may develop low blood pressure or a vasovagal response. When palpated, the uterus will typically feel firm and enlarged.

Transabdominal sonography is a noninvasive imaging modality useful for examining occlusions of the genital tract. Transvaginal sonography is important in the evaluation of hematometra because it affords clear visualization of the endometrial cavity (Pic. 1).

Unicornuate uterus
A unicornuate uterus accounts for 2.4 to 13% of all Müllerian anomalies. A unicornuate uterus with a non-communicating rudimentary horn may be associated with gynecological and obstetric complications such as infertility, endometriosis (a disease in which tissue that normally grows inside the uterus grows outside it), urinary tract anomalies, abortions, and preterm deliveries. It has a poor reproductive outcome and pregnancy management is still unclear.

Due to absence of communication between the rudimentary horn and major horn (unicornuate uterus), and retention of menstrual blood leads to hematometra, causing intense menstrual pain as the blood volume increases.

**Cervical stenosis**

Cervical stenosis means that the opening in the cervix (the endocervical canal) is more narrow than is typical. In some cases, the endocervical canal may be completely closed.

Symptoms depend on whether the cervical canal is partially or completely obstructed and on the patient’s menopausal status. Pre-menopausal patients may have a build up of blood inside the uterus which may cause infection, sporadic bleeding, or pelvic pain. Patients also have an increased risk of infertility and endometriosis.

**Find more about related issues**

**Diagnoses**

**Unicornuate uterus**

Congenital uterine anomaly (one of the Müllerian duct anomalies) usually associated with communicating or non-communicating rudimentary horn.

Learn more at: [www.fertilitypedia.org/therapy/diag/unicornuate-uterus](http://www.fertilitypedia.org/therapy/diag/unicornuate-uterus)

**Cervical stenosis**

Narrowing of cervix - the opening to the uterus.

Learn more at: [www.fertilitypedia.org/therapy/diag/cervical-stenosis](http://www.fertilitypedia.org/therapy/diag/cervical-stenosis)
The cervix is located to the left in the image, and the fundus is located to the right.

Sources

“Pregnancy in a unicornuate uterus: a case report” — by Caserta et al. licensed under CC BY 2.0

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