PP065DELAYEDTRAUMATICINTRAPERITONEALBLADDERRUPTUREPRESENTINGASPSEUDO-RENAL FAILURENurul Shaliza Shamsudin1

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ABSTRACT

Around 60% to 80% of all bladder injuries result from blunt abdominal trauma, however isolated intraperitoneal urinary bladder rupture is a rare entity (1, 2). The injury has an insidious presentation and often results in delayed diagnosis and management, hence may substantially increases mortality (3,4). We present a case of middle aged male with a delayed presentation traumatic of intraperitoneal bladder rupture that was discovered more than a week after the inciting event. He initially presented to emergency department with acute retention urinary and abdominal distention 5 days after an alleged assaulted. Contrasted CT abdomen demonstrated extravasation of contrast from the dome of the bladder indicating bladder perforation. Emergency laparotomy revealed a 10cm linear tear seen at the bladder dome. Although delayed bladder injury rare, presentation is possible and there should be a high clinical suspicion of bladder injury in trauma patient with unexplained abdominal findings. This case should serve as a cautionary tale for the assessment of the pseudo-renal failure patient. In most patient with urinary ascites, there may be great disturbances in serum biochemistry mimicking renal failure such as elevated urea, creatinine as well as hyperkalaemia.