

A Rare Case Report of Microperforate Hymen with Difficulty in Penetration

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ABSTRACT

A rare case of 26-year-old women with microperforate hymen reported a difficulty in intercourse. Hymenectomy is the surgical treatment for imperforate hymen and microperforate hymen. A knife or electrocautery can be used to excise hymenal tissue.

Keywords: Microperforate hymen, Pin-hole hymen, Vaginismus, Electrocautery.

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CASE REPORT

A 26-year-old woman presented to the Department of Obstetrics and Gynecology at Dr BR Ambedkar Medical College, Bengaluru, India, in April 2013 with complaint of difficulty in intercourse. She was married since 1 year and had regular monthly menstrual cycle lasting for 5 days. Her husband had given the history of difficulty in penetration. He had also reported that there were several attempts of intercourse which had gone futile and she further developed vaginismus and erectile disorder.

On self examination, she had noticed a thick membrane at the opening of vagina which can allow only tip of the finger. General examination and secondary sexual characters appeared normal. The visual inspection of external genitalia had revealed a light pink color membrane covering the vagina at the introitus with a

small opening described as pin hole (microperforate) hymen (Fig. 1). Ultrasonography had revealed normal uterus and adnexa. Hematological and biochemical test reports were within the normal limits.

Under spinal anesthesia the excess redundant fragment of hymen tissue was cut to form adequate introitus. An electrocautery was used to resect the hymenal tissue. Adequate opening was obtained and edges were checked for bleeding and cauterized wherever necessary and edges sutured to prevent stenosis. Vagina and cervix appeared normal. Patient was advised to have intercourse after 3 months. Follow-up of the case done at 1st month and at 4th month, appeared normal with adequate introitus (Fig. 2). She had normal intercourse after 3 months.

DISCUSSION

Hymen marks the distal most extent of the vagina and the most proximal boundary of the vulvar vestibule. Hymenal anomalies occur if the genital tubercle fails to breakdown or rupture.^{1,2} A microperforate hymen is a thin tissue, which almost covers the introitus except a very small hole. It will not stop menstrual blood to flow out completely but may make it slow, difficult and painful. Rare case reports demonstrated pregnancies with intact hymen.³ Vaginismus is a psychophysiologic genital reaction of women, characterized by intense contraction of the perineal and paravaginal musculature, tightly closing the vaginal introitus in addition to the patient's anatomical problem.⁴ In the present case, patient presented with vaginismus and unsuccessful intercourse due to closed vaginal orifice. Patient did not report immediately as she was staying away from husband and sexual intercourse was tried once in a while. Rarely pin-hole hymen can be secondary, following sexual child abuse or by following surgical incision of the hymen at an early age or closed spontaneously during pregnancy.³

Due to pooling of urine in urogenital sinus and invasion into the urethra, urinary tract infections arise frequently.³ However, there was no history of recurrent urinary tract infections or ascending pelvic infections in our case that might be one of the reasons of late diagnosis.

Hymenectomy is the surgical treatment for imperforate hymen and microperforate hymen. Excision, not incision, should be performed. A knife or electrocautery

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Fig. 1: Woman represent pin-hole hymen (microperforated hymen)



Fig. 2: After resection, follow-up examination showed normal vagina

can be used to excise hymenal tissue close to the vaginal wall. A perineoplasty can be performed by undermining the posterior vaginal wall and suturing the edges to the introitus to prevent introital stenosis. The redundant portions of the membrane may then be cut away or sutured to allow drainage and adequate coitus.

The clinicians should be aware of this rare case of microperforate hymen because it can lead to nonfulfillment of marriage, dyspareunia and infertility. Proper management of microperforate hymen can avoid long-term psychological, sexual and reproductive health problems.³ All the surgical treatments for this type of cases will demonstrate similar results. All surgical

centers can prefer their own technique of surgery for microperforate hymen which is effective.³

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