

Beyond a Miscarriage: A Case of Septic Abortion Presenting with Persistent Vaginal Bleeding (Poster)

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Abstract

Published 03/31/2026

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Categories: Obstetrics/Gynecology, Internal Medicine

Keywords: abnormal uterine bleeding, dilation and curettage, early pregnancy loss, escherichia coli bacteremia, first trimester bleeding, maternal sepsis, retained products of conception, septic abortion

How to cite this abstract

Pinnamaneni P, Bhatnagar N A, Faraj Z, et al. (March 31, 2026) Beyond a Miscarriage: A Case of Septic Abortion Presenting with Persistent Vaginal Bleeding (Poster) . Cureus 18(3): a1724

Abstract

Introduction

Abnormal uterine bleeding in early pregnancy is common and may indicate serious conditions such as early pregnancy loss, retained products of conception, or infection. When pregnancy tissue remains within the uterus, patients are at risk for complications including hemorrhage and septic abortion. Early recognition of persistent bleeding after miscarriage is essential to prevent severe maternal morbidity.

Case Description

A 29-year-old G6P1051 female with a history of anemia, class III obesity, pre-diabetes, and depression presented with two weeks of persistent vaginal bleeding following a recent spontaneous abortion. She reported passage of clots, suprapubic pain, chills, chest pain and was found to be febrile and tachycardic on presentation. Laboratory evaluation demonstrated leukocytosis, lactic acidosis, and worsening anemia (hemoglobin decreased from 9.2 g/dL to 7.5 g/dL). Blood cultures grew *Escherichia coli*. Pelvic examination revealed heavy vaginal bleeding with clots and an open cervical os, raising concern for incomplete or septic abortion. The patient underwent emergent suction dilation and curettage with evacuation of products of conception and required uterotonic therapy, blood transfusions, and intravenous antibiotics. Her course was complicated by recurrent bleeding and a hemoglobin nadir of 6.8 g/dL requiring additional transfusion. With continued antimicrobial therapy and supportive care, her bleeding improved and she stabilized prior to discharge.

Discussion/Conclusion

This case demonstrates how delayed evaluation of persistent vaginal bleeding after pregnancy loss can progress to septic abortion, bacteremia, and severe anemia. Clinicians should maintain a high index of suspicion in patients presenting with ongoing bleeding or systemic symptoms after miscarriage. Early gynecologic evaluation and timely uterine evacuation with antimicrobial therapy are critical to preventing severe infection and life-threatening complications.