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GUNSHOT WOUND OF THE BLADDER

AN UNUSUAL CASE

BY

Lieutenant P. J. ELLIS

Royal Army Medical Corps

Late House Surgeon, Manchester Royal Infirmary

THE following case history is of interest because of the length of time elapsing between wounding and the occurrence of symptoms.

On 16th July, 1944, in Normandy, whilst the patient was leaning with two friends against a wireless truck, it was hit by a German 88 mm. shell. One man was killed outright, the other died shortly after. The patient (W. M.) suffered multiple injuries, consisting of traumatic amputation of his left arm, extensive burns of the face and right arm, and penetrating wounds of the abdomen and left thigh.

Shortly after, at No. 24 Casualty Clearing Station, his wounds were dressed and laparotomy performed. Eight perforations of the ileum were sutured. There is no record of any injury to his bladder. Following evacuation to England he made a good recovery.

He was first seen by Mr. Thomas Moore at the Manchester Royal Infirmary on 10th November, 1955, when he stated that he had been quite well following discharge from the army, but during the previous five years he had had some discomfort in his perineum with intermittent dysuria, scalding and increased frequency of micturition. On no occasion had retention of urine occurred, but the stream was frequently poor, and on two occasions during the previous fortnight he had passed small clots of blood.

On examination his general condition was good, with a well-healed lower abdominal midline scar and a 3 in. oval scar over his left anterior superior iliac spine. Palpation over the bulb of the urethra produced excruciating pain. Two days later, whilst at home, he passed an irregularly shaped stone, which had to be extracted from his external urethral meatus.

Straight radiograph and intravenous pyelogram showed multiple small metallic foreign bodies in the abdominal wall and thighs and a 2 in. long shadow in close relationship to the bladder. This was oval, and projecting from one end of it was a narrower irregular opacity.

At operation on 10th December, 1955, the bladder was opened through a low transverse supra-pubic incision. The urine was clear and on examination the foreign body (see Plate facing this page) was found lying freely in the lumen of the bladder. It was extracted. The bladder mucosa showed no abnormality and there was no sign of infection or scarring, old or recent.

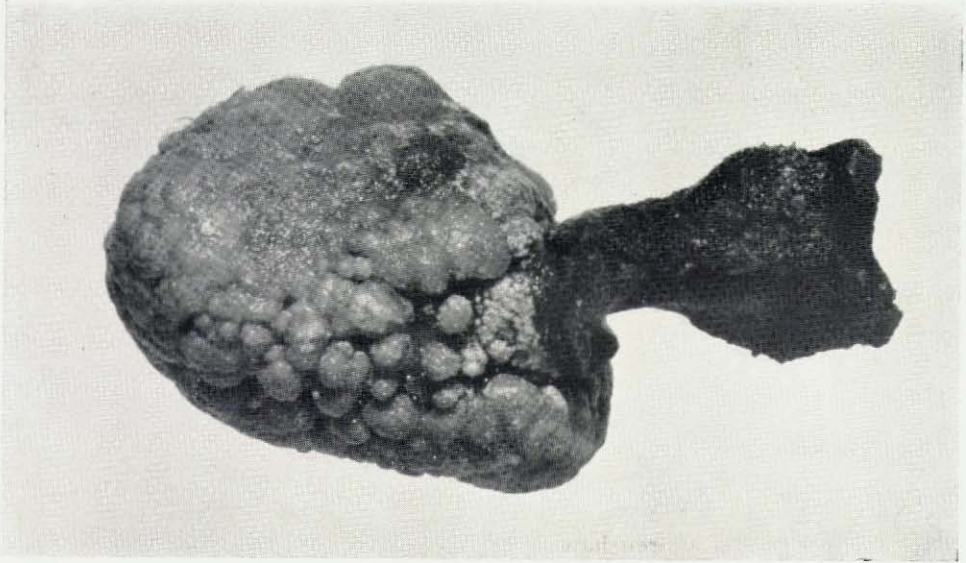
The bladder was closed following the insertion via the urethra of a Thomas Moore catheter, and continuous irrigation with 5 per cent citrate solution was started. The catheter was removed on the third day after operation as the urine was clear and sterile. His progress was uneventful and he was discharged on the tenth day after operation. When seen two months later he was quite well.

The specimen is 2 in. by 1 in. and consists of a piece of shrapnel, coated with calculus at one end only, his symptoms before admission being due to the passing of fragments of this calculus.

The interesting points in this case are : the length of history ; the absence of gross urinary infection ; and the absence of abnormality of the bladder wall. The radiographic appearances suggested that part of the foreign body was embedded in the bladder wall, the free end only being coated by calculus, but this was not the case.

At what time the shrapnel fragment passed through the bladder wall is problematical as neither at operation in 1944 nor again in 1955 was evidence of damage to the bladder wall noted.

I would like to thank Mr. Thomas Moore for permission to publish this case and Colonel G. W. Ollerenshaw, T.D., of the Department of Medical Illustration, Manchester Royal Infirmary, for the photograph.



Foreign body removed from bladder following gunshot wound