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Coccyx fracture secondary to sexual trauma: A case report

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Abstract

Coccydynia is usually mild and self-limiting but could be devastating in rare cases. It is commonly associated with missed or neglected coccyx fracture. Coccyx fracture is common in female and childbirth has been documented as an aetiological factor. Sexual trauma has not been reported as a cause. We managed a 45-year-old woman with severe coccydynia follows sexual trauma sustained from consensual sexual intercourse.

Keywords: Coccydynia; sexual trauma; coccyx fracture

Introduction

Coccydynia is localized pain over the coccyx and it is usually mild and self-limiting but occasional severe and devastating pain may occur [1]. Coccydynia is about 5 times more likely in female than male [1, 2]. Trauma to the coccyx is the most common aetiological factor of coccydynia which include child birth trauma [1]. Coccyx fracture can leads to refractory coccydynia most especially when neglected. Coccygectomy is the treatment of choice for coccydynia secondary to coccyx fracture [2]. Sexual trauma has not been reported as an aetiological factor of coccyx fracture. We present a case of coccyx fracture secondary to sexual trauma.

Case Report

A 45-year-old woman presented to our clinic on account of two year history of severe inter-gluteal pain. She was lying supine during sexual intercourse with her husband when the penis slipped out and hit her perianal region with severe pain which had persisted for 2 years. The pain is non-radiating associated with difficulty sitting on the buttock. She had visited several health facilities and used various analgesics without relief. She has no history suggestive of systematic medical illness.

Examination revealed a middle aged woman with normal mental status. Neurological examination findings were normal. There was palpable tender everted coccygeal tip. Examination of other system was normal. A clinical diagnosis of coccydynia secondary to neglected sexual trauma was made. Lumbosacral spine x-ray showed displaced fracture of the coccygeal tip (figure 1a). There was a good bone density. She had excision of the fractured coccyx (figure 1b) under local anaesthesia with resolution of coccydynia. Post-operative x-ray revealed absence of the fractured coccyx (figure 1c). The couple was interviewed and gave consent for this report.

She represented 6-weeks post operation with severe perineal pain following sexual intercourse. Examination revealed laceration of the posterior distal one third of the vagina wall extending to the anus. She was referred to gynecologist.

Discussion

Women are the most common victim of sexual trauma and majority of the sexual intercourse related injuries are minor and under reported [3]. Nonconsensual sexual intercourse are more prone to trauma related complications but cases associated with consensual sexual intercourse has been documented [3, 4]. Common injury include vagina abrasion, vaginal laceration and cervical laceration [3, 5].

Coccygeal fracture from consensual sexual trauma has not been reported in the literature but the fact that coccyx fracture is more common in female may be a pointer to some previous unreported cases. Satisfactory resolution of the coccydynia following coccygectomy corroborate previous report on the benefit of surgical intervention in refractory coccydynia [2]. The index couple have been married for about 20 years and sustained the fracture of the coccyx during sexual intercourse on their matrimonial bed. The recurrent sexual related injuries are suggestive of the possibility of violent sexual intercourse being practiced by the couple [6]. This finding should widen our suspicion in evaluating female patients with coccydynia because they may not provide history of sexual trauma due to the associated stigma [6]. Women should be encourage to give adequate history to their physician to avoid delay in diagnosis and management of sexual trauma [4, 7]. Sexual trauma is a known complication of both consensual and nonconsensual sexual intercourse, therefore stigmatization of sexual trauma should be discouraged in the society in order to foster prompt and proper report.



Fig 1c: Post-operative x-rays confirmed absence of the coccyx

Conclusion

Coccygeal fracture is a rare but possible complication of sexual trauma.

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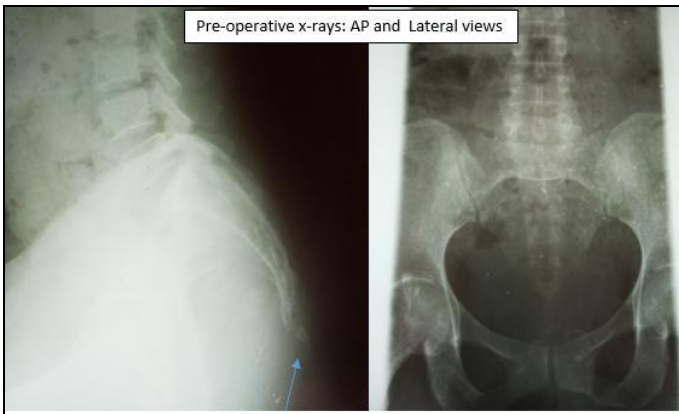


Fig 1a: Pre-operative x-rays with arrow pointing to the fractured coccyx



Fig 1b: Intra-operative image of the excised coccyx