



A case of spontaneous delivery after extirpation of endometriotic cyst two months before delivery

Todorovska I, Samardziski I, Dabeski D, Livrinova V, Simeonova Krstevska S
University Clinic of Gynecology and Obstetrics, Skopje, FYROM

Objective

To describe a case involving combined gynecological and obstetrical intervention within two months.

Methods

We will describe the details of the case including ultrasound findings, and laboratory analysis.

Results

During routine first trimester screening a large cyst was diagnosed measuring 80x103mm, with an irregular shape and dense liquid within. Ca 125 level was 85 U/ml. After two months the patient experienced moderate pain and Ca 125 had risen to 250 U/ml. On ultrasound scan it was difficult to visualize the cyst. There was a strong suspicion of malignancy and the patient was sent for an oncological opinion. It was decided to operate on the patient. The patient was 24 weeks gestation. The cyst was ruptured and removed resulting in an improvement in symptoms. Histopathological examination showed endometriosis ovarii. Routine obstetric follow up was then carried out. Biometry and cervical length was normal. Two months after surgery the patient went into spontaneous labour at 32 weeks of gestation. The baby weighed 1400g with Apgar scores of 7 at 1 minute and 8 at 5 minutes.

Conclusion

Even though clinical and laboratory findings pointed towards malignancy, it is necessary to be very careful when deciding further management. Although operating on a gravid uterus is associated with significant risks, the risk from malignancy is greater. Patient well being is paramount so one should not be afraid to take risk steps such operation during pregnancy after weighing up the options.