



A Rare Case of Ovarian Pregnancy with Torsion

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Background

Ovarian pregnancy accounts for less than 1% of all ectopic pregnancies making it an extremely rare condition. In our case report, an ovarian pregnancy caused the ovary to twist, which makes it more exceptional. The case of a 27 years old patient with no prior history and no risk factors including artificial reproductive techniques, who presented with sharp abdominal pain and a positive pregnancy test. The diagnosis was suspected in transvaginal ultrasound with an enlarged left ovary. Intra operatively, we discover a left adnexal torsion. A salpingo oophorectomy was performed and histopathology confirmed the diagnosis.

Introduction

Ovarian pregnancy with torsion is a rare condition that occurs when a fertilised egg implants in the ovary, leading to a pregnancy. The pregnancy can cause the ovary to twist, which can result in a medical emergency.

Symptoms of ovarian pregnancy with torsion can include severe abdominal pain, nausea, vomiting and fever. These symptoms are similar to those of other gynecological conditions, such as ectopic pregnancy and ovarian cyst which can make it difficult to diagnose.

Case Report

This was the case of a 27 years old patient who was admitted to the emergency room after experiencing sharp, stabbing pain in her lower abdomen. She was presented with 8 weeks of amenorrhea, a positive pregnancy test and no vaginal bleeding. She has never taken contraception. Her medical and surgical history were unremarkable. The examination revealed an hemodynamically stable patient, pelvic tenderness and left adnexal mass on bimanual examination. No vaginal bleeding and cervical os was closed. Her beta chorionic gonadotropin (BHCG) was elevated at 9327, haemoglobin was 12 g/dl. The ultrasound found a normal size of the uterus, endometrial thickness of 8 mm and no gestational sac was seen within the uterus. An enlarged left ovary with a complex cystic mass of 6 × 5 cm and moderate amount of free fluid in the pelvis.

The patient was taken to the operating room. During laparotomy, we discovered a swollen and twisted necrotic left adnexa with a large hemorrhagic mass which is probably the ectopic pregnancy. The right fallopian tubes and ovary were normal. A salpingo oophorectomy was done. The hemostasis was

achieved. The histopathological exam confirmed later an ectopic pregnancy. The recovery of the patient was uneventful and the BHCG level declined.



Picture : Necrotic Twisted Left Adnexa

Discussion

The frequency of ovarian pregnancy is less than a tubal pregnancy and constitutes 0.5–1% of all ectopic pregnancies.[1]

Differentiating tubal from ovarian ectopics can be difficult, and no specific ultrasound criteria exist to distinguish one from the other with 100% accuracy. [2]

There's an increased incidence of primary ovarian pregnancy after artificial reproductive techniques. [3]

Endometriosis and pelvic inflammatory disease has also been implicated in the increasing incidence. [4]

Ovarian pregnancies were associated with the lowest sonographic detection rates and with free fluid in the pouch of Douglas. [5]

In a study of Yuri et al., transvaginal ultrasound revealed absence of intrauterine sac, an ovarian enlargement associated with the presence of an ovarian ring within or in contact with the ovary in all cases. [6]

One of the large series of patients with ovarian ectopic pregnancy showed the ovarian pregnancy was resected and the ovary conserved in 89% and 11% needed an oophorectomy and was managed successfully by laparoscopy. [7]

In a study, Based on a study, a laparoscopic local injection of etoposide might be a consideration for women with ovarian pregnancy suitable for medical treatment. [8]

A retrospective analysis, revealed favorable reproductive outcomes in 21 women with laparoscopically treated ovarian pregnancy; the intrauterine pregnancy rate was encouraging, the rate of subsequent infertility was low. [9]

Conclusion

In summary, ovarian pregnancy is a rare and potentially life-threatening complication. The diagnosis of an ovarian pregnancy can be challenging and is often made intraoperatively and histopathology. In this article, ovarian pregnancy caused an adnexal torsion, this is what renders our case report exceptional.

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