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Laparoscopic management of maldescended ovary presenting with recurrent acute abdomen

Ovarian maldescent is an extremely rare gynecological phenomenon, usually associated with Müllerian abnormalities. We report a 27-year-old woman, presenting with acute, right-sided abdominal pain. She has a history of subfertility and repeated admissions with chronic pelvic pain. Previous hysterosalpingogram and laparoscopy demonstrated unicornuate uterus with absent right fallopian tube and ovary. A right-sided, ectopic ovary was identified on later imaging and suspected as the cause of her symptoms. She underwent laparoscopic excision of the maldescended ovary with remnant fimbrial end and gubernaculum. She was discharged the following day as she was pain-free and remains so for 11 months later. This case report prompts a gynecologist to consider diagnosis of maldescended ovary in the women with uterine abnormalities and repeated episodes of abdominal pain. This is the first case report to the best of our knowledge where surgical management of ovarian maldescent was performed via minimal access approach, thus avoiding laparotomy in this acute setting.

Biography

Muhammad Haruna started working as a doctor 2 years back and is currently working as FY2 doctor at Hull Royal Infirmary, UK.

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