Massive Ovarian Edema Syndrome in pregnancy: diagnostic challenge for the clinician
Artunc-Ulkumen B, Pala HG, Bulbul Y
Celal Bayar University, Manisa, Turkey

Objective
Massive Ovarian Edema Syndrome (MOES) is a very rare condition characterized with unilaterally or bilaterally enlarged ovaries. Typically, the ovaries have increased stromal tissue. Due to this appearance, it can be easily misdiagnosed as the solid ovarian tumors leading to unnecessary surgical intervention during early pregnancy. We present here a case of pregnancy with MOES which presented with severe abdominal pain.

Methods
A 26 year old pregnancy with a previous spontaneous vaginal delivery admitted to the outpatient clinic due to severe abdominal pain.

Results
Ultrasonographic examination revealed a 7 week singleton pregnancy. The left ovary was 13x8x10 cm and the right ovary was 11x7x6 cm. Embedded follicles were seen in enlarged ovarian tissues. The patient was followed-up regularly and after 8 weeks, the ovaries reached their normal volume again.

Conclusion
Cases with MOES usually have one or both ovaries involved. In contrast to ovarian torsion, ovaries with MOES stay viable. There is no infection nor necrosis. The embedded follicles in enlarged ovaries are the only pitfall for differentiating from the solid ovarian tumors.