Ovarian Torsion in The Third Trimester Of Pregnancy Leading to Iatrogenic Pre-term Delivery

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**Background**

- Ovarian torsion in the third trimester of pregnancy leading to a midline laparotomy and Caesarean section for the delivery of a pre-term baby is an uncommon event.
- As the woman is likely to present with non-specific symptoms of lower abdominal pain, nausea and vomiting, ovarian torsion can often be misdiagnosed as appendicitis or pre-term labour.
- Treatment and the opportunity to preserve the tube and ovary may consequently be delayed.

**The Case**

- A multiparous woman who had undergone two previous caesarean sections at term, presenting at 35 weeks’ gestation with a presumptive diagnosis of acute appendicitis.
- **Ultrasound**: a cystic lesion 6 x 3 cm in the right adnexa, potentially a degenerating fibroid or a torsted right ovary.
- **MRI**: unable to provide further clarity.
- **Intervention**: midline laparotomy and simultaneous de-torsion of the ovarian pedicle and ovarian cystectomy together with caesarean section of a pre-term infant.

**Conclusion**

- Prompt recognition and ensuring intra-operative access can achieve a successful maternal and fetal outcome when managing ovarian torsion in pregnancy.
- The risk for a pregnant woman and her newborn could be reduced by earlier diagnosis and management of ovarian masses. (1).

**Findings**

- Ovarian torsion in infidelity management - Missing the diagnosis means losing the ovary: A high price to pay. 2011.