TORSION OF HYDROSALPINX

(A Case Report)

by

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Introduction

Diagnosis of torsion of a hydrosalpinx is usually made during operation and a review of literature reveals that no one has claimed to have made the diagnosis preoperatively. Our case also is one such surgical rarity.

CASE REPORT

Smt. C.D., 28 years, para 1 + 2, having no living issue was admitted in the emergency unit of our Department on 10-5-80 with acute pain in the lower abdomen. There was a tense, tender, cystic lump in the right lower abdomen with restricted mobility, of the size of 18-20 weeks' pregnancy. On vaginal examination the uterus was of normal size and confirmed the abdominal swelling to be arising from the right adnexia. Her LMP was on 1-5-80. She was also

being treated previously for secondary sterility for last 6 years and was advised laparotomy for right sided tubo-ovarian lump. A preoperative diagnosis of twisted ovarian cyst was made,

At laparotomy, both the ovaries were found to be normal. The right tube was 4 cm x 4 cm., bluish, cystic with flimsy peritubal adhesions. The degree of torsion was only partial. Total salpingectomy was done. The left tube was also found to be adherent to the surrounding structures with only flimsy adhesions which were separated and a cuff salpingostomy was done. Post-operative period was uneventful and she was discharged from the hospital on 10th post-operative day.

Summary

A case of torsion of hydrosalpinx has been reported. In our case the definite factors were chronic non-specific inflammation and a small sized hydrosalpinx which underwent partial torsion and became haematosalpinx producing features of acute abdomen.

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