

Twisted Dermoid Cyst in Pregnancy – A case report

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The patient a 22 year old, second gravida with an ongoing intra uterine pregnancy of 16 weeks was admitted at a private nursing home on 26th February 2000. She had severe pain in lower abdomen since 3 hours along with nausea and vomiting. Ultrasound examination done 4 weeks previously had indicated an intrauterine pregnancy of 12 weeks with no other significant finding.

Aside from tachycardia her other vital parameters were normal. Abdominal examination revealed a mass arising from the pelvis equivalent to 24 weeks. Tenderness was felt in the left flank.

Sonography revealed a single live intra-uterine gestation of 15-16 weeks with a 91x94x70 mms large mixed echogenic, tender mass in the left adnexal region likely to be a haemorrhagic ovarian cyst (Fig. 1)



Fig. 1

Conservative management with painkillers and antiemetics was attempted but the pain worsened and the mass moved towards the left flank now allowing a 16 week sized uterus to be palpated separately from the ovarian mass raising the possibility of torsion of the ovarian pedicle.

Exploratory laparotomy was done on 28-2-2000 which revealed a pregnant uterus with seemingly normal right adnexa. The Left Fallopian Tube was stretched over the Left Ovary which was cystic and enlarged to about 10x10x10 cms (Photograph 1). It had a lobulated surface with variable consistency on palpation. The cyst wall was friable. The left fallopian tube with the ovary was removed.



Fig. 2: Fallopian Tube and Ovary with Dermoid Cyst

Histopathology report of the mass revealed a multicystic ovary containing necrotic material and hair, and was diagnosed as a benign dermoid cyst of the ovary.

Patient recovered well from the surgery and had a full term normal delivery on 6th August. The baby weighed in at 3.2 kgs with no obvious problems related to the 2nd trimester maternal surgery. A twisted dermoid cyst of the ovary is a rare cause of acute pain in the abdomen during pregnancy.