PICTORIAL ESSAY





Gangrenous Omental Herniation Caused by Spontaneous Pouch of Douglas Fistula: A Rare Case

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Received: 31 March 2020 / Accepted: 2 September 2020 / Published online: 12 October 2020 © Federation of Obstetric & Gynecological Societies of India 2020

Eighty-two-year-old female, multipara, presented with urosepsis. Pelvic assessment revealed foul-smelling, dirty-looking polypoidal mass protruding through vagina, which looked like a neoplastic lesion (Fig. 1). Ultrasound abdomen was normal, but MRI revealed omentum present in the Pouch of Douglas, protruding into the vagina through its posterior wall (Fig. 2a, b). During surgery omentum was dissected, necrotic part was excised and then reposited back into abdomen, followed by the closure of the defect in posterior vaginal wall. Histopathological examination revealed gangrenous omentum with no evidence of malignancy or granulomatous pathology. On follow-up, the patient was completely asymptomatic.



Fig. 1 Dirty-looking polypoidal mass lesion protruding through the vagina

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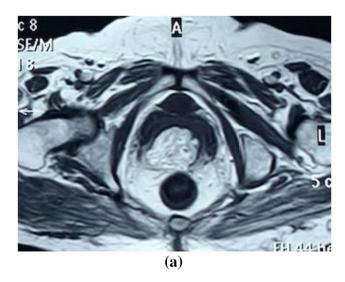
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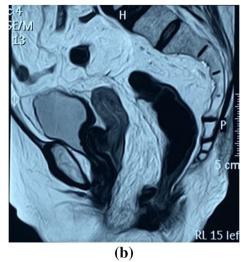


Fig. 2 a, b MRI revealed omentum present in the Pouch of Douglas, protruding into the vagina through a rent in posterior vaginal wall

Funding None.

About the Author

Compliance with Ethical standards

Conflict of interest The authors declare that they have no conflict of interest.

Informed Consent Informed consent was obtained from the patient.

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