## Happy Gynecon 2020 Part II



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## A case of huge bilateral ovarian tumor in pregnnancy

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"A case of huge bilateral ovarian tumor in pregnnancy"

Objective- Management of ovarian tumor in 2nd trimester of pregnancy

Background- The incidence of ovarian tumor in pregnancy is 1 in 2,000. The incidence of germ cell tumors (dermoid) is increased two fold during pregnancy. Malignant ovarian tumor is extremely rare during pregnancy.

Case- 32 years, G2P1L1 at 22 weeks period of gestation with previous one cesarean section came to AIIMS obstetrics OPD with ultrasonography suggestive of ovarian cyst with hypothyroidism and was admitted for further evaluation and management. Ultrasonography –abdomen and pelvis was done with features suggestive of dermoid cyst, with tumor markers marginally raised. Preoperative workup was done and patient underwent laprotomy with bilateral oophorectomy under general anesthesia. Intraoperative period period was uneventful. Postoperative period was managed with uterine relaxants and antibiotics. Rest intranatal period was uneventful and patient underwent elective cesarean section at term.

Outcome-Bilateral ovarian cyst, both ovaries not seen separately. Right side  $10 \ge 8 \text{ cm}$ , multilobulated, bosselated, cyst with intact capsule and left side  $10 \ge 8 \text{ cm}$ , multilobulated, bosselated, predominantly cystic with some solid areas with intact capsule.

Conclusion- Ovarian tumors are common in pregnancy and if operative management is required then is best managed in 2 nd trimester.

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