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Absent ovary and peritoneal stone found at laparoscopy

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DESCRIPTION

A 19-year-old Caucasian lady presented with lower abdominal pain of unknown origin. There was no significant medical or gynaecological history, in particular, no previous episodes of acute abdominal pain. Blood tests were unremarkable and a decision was made to perform diagnostic laparoscopy. At operation a small amount of free fluid was found in the pelvis suggestive of a ruptured ovarian cyst on the left. There was absence of the right ovary and a free peritoneal stone in the right paracolic gutter (figure 1). It is suggested that a previous torsion and autoamputation of the right ovary had occurred even though the patient did not recall any previous episodes of abdominal pain. Autoamputation

of the ovary has been previously reported, though it has been reported more frequently in neonates¹ which may explain why the patient could not recall any previous episodes of pain. Autoamputation is a rare event and cause of abdominal calcification, the primary event being torsion of the ovary, and normally occurs in children.² It can be suspected radiologically or diagnosed at laparoscopy.² Ovarian torsion in children is uncommon but occurs with an annual incidence of 5 per 100000 and is typically associated with normal ovaries or benign lesions.³

Figure 1 Photo taken at diagnostic laparoscopy.

Learning points

- ▶ Ruptured ovarian cysts are a cause of abdominal pain.
- ▶ Unusual findings may be found at laparoscopy.

Competing interests None.

Patient consent Obtained.

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