Title: Successful Diagnosis And Fertility Preserving Laparoscopic Management of Accessory Cavitated Uterine Mass: A Report of Two Cases

Abstract

Objective: To demonstrate successful diagnosis and fertility preserving laparoscopic management of accessory cavitated uterine mass (ACUM).

Method: We present two cases of ACUM. The first case, a 24-year-old nulliparous woman presented with dysmenorrhea and infertility. Imaging was suggestive of an obstructed non-communicating rudimentary horn. The second case was a 21-year-old nulliparous woman with severe dysmenorrhea whose ultrasound showed a subserosal degenerated fibroid. However, magnetic resonance imaging revealed a focal cystic adenomyosis with uterosacral and rectal endometriosis.

Result: A hystero-laparoscopic procedure was performed in both cases. The first case demonstrated a normal uterine cavity on hysteroscopy, thus excluding a rudimentary horn. A 3x3 cm bulge was seen on the right anterolateral surface of uterus, under the round ligament. In the second case, a similar bulge of 2x2 cm was seen. Endometriosis involving the rectum, uterosacral ligaments and overlying peritoneum was also observed. Complete laparoscopic excision of the ACUM was performed in both cases along with rectal shaving for rectal endometriosis in the second case. Histopathological examination confirmed the diagnosis. Both patients had no further dysmenorrhea at a three-month follow-up.

Conclusion: High clinical suspicion and appropriate radiological modalities can help in identifying ACUM from its closely related differentials. Laparoscopic surgery is effective in its treatment with the preservation of fertility. Co-existing endometriosis should be excised for complete symptomatic relief.

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