

A RARE CASE OF TORSION OF A SUBSEROSAL MYOMA IN A POSTMENOPAUSAL WOMAN ASSOCIATED WITH TORSION OF THE UTERUS IN THE ISTHMUS LEVEL



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Abstract

Torsion of a subserosalmyoma is a rare surgical emergency that is infrequently diagnosed preoperatively.

The first reported case of the acute abdomen causing by torsion of uterine subserosalmyoma was in 1952 Tordera and others. Since then till today it was described in literature less than 50 cases of torsion myoma in non pregnant women.

I present a rare case torsion of subserosalmyoma in the funds uteri for the 720 degrees and torsion uteri in the isthmus level for the 180 degrees in a postmenopausal woman. A 61- year old woman admitted in department of gynecology General Hospital Nikiski in February 2017 with suddenly onset severe abdominal pain with a few hours duration. She also complained to nausea and cold sweating. After clinical and ultrasound examination preoperative diagnosis was: Abdomen acetum, Myoma uteri subserosumtorquatum, Virgo intact, Postmenopausis. She underwent laparotomy and was found to have complete necrotic subserosalmyoma sized about 10 cm in the fundus uteri with torsion about 720 degrees and necrotic small uterus with torsion at the level of the isthmus for 180 degrees.

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Total hysterectomy with adnexectomy was done. Postoperative recovery was regular and she went home the day fourth after operation. In conclusion torsion of myoma uteri is an extremely rare condition. Most cases were diagnosed intraoperatively. My case is case with a preoperative diagnosis based only on clinical and ultrasound examinations.

Biography:

Milica Glusac was born in Niksic Montenegro in the year of 1981. Completed University School of Medicine in Podgorica at the age of 25 and specialization study of gynecology and obstetrician at University in Belgrade at the age 33. Nowadays works in general Hospital in Niksic.



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