

Case Report

Open Access, Volume 4

Adnexal cyst masquerading as a distended urinary bladder

Muhammad Akbar Baig*; Faryal Zehra

Department of Emergency Medicine, Aga Khan University Hospital, Karachi 74800, Pakistan.

*Corresponding Author: **Muhammad Akbar Baig**

Department of Emergency Medicine, Aga Khan
University Hospital, Karachi 74800, Pakistan.

Tel: 0092-315-2218758;

Email: muhammad.baig@aku.edu

Received: May 01, 2023

Accepted: May 26, 2023

Published: Jun 02, 2023

Archived: www.jcimcr.org

Copyright: © Baig MA (2023).

DOI: www.doi.org/10.52768/2766-7820/2440

Description

A 45 year old female with Diabetes presented with bloating, abdominal distension and urinary urgency for past 3 months. On examination, there was suprapubic tenderness with a large palpable mass in the location of the urinary bladder that was seen extending to the umbilicus. A provisional diagnosis of urinary retention was made for which a foley catheter was inserted. Approximately 200 ml of urine output was collected. On reassessment, the abdominal mass remained unchanged therefore; patient underwent a CT scan of the abdomen and pelvis with contrast. The CT was reported as having a large adnexal cyst seen pushing the bowel superiorly and the bladder inferiorly with dimensions 29.2 x 23.6 cm corresponding to volume of 2800 cc (Figure 1A,B).

Patient underwent an exploratory laparotomy during which a left adnexal cyst was removed which was later confirmed to be a benign serous cystadenoma on biopsy. Serous cystadenomas are known to present in many sizes and can span from 1 to 30 cm [1]. Because of their large size, they can displace other internal organs resulting in nausea, vomiting, abdominal distention and increased urinary frequency [2]. Diagnosis is generally made on a pelvis ultrasound. MRIs can be used to study the

mass for suspected malignancy [3]. Ultimately, surgical treatment is indicated allowing the physical removal of large serous cystadenomas with biopsy providing a definitive diagnosis.

References

1. Musheyev Y, Levada M, Ilyayev B. Ovarian Serous Cystadenoma Presents As Bladder Issues in 23-Year-Old Female: A Case Report. *Cureus*. 2022; 14: e23033.
2. Mechera R, Menter T, Oertli D, Hoffmann H. Large ovarian cystadenofibroma causing large bowel obstruction in a patient with Klippel-Feil syndrome-A case report. *Int J Surg Case Rep*. 2016; 20: 17-20.
3. Kirochristou G, Stefanou SK, Stefanou CK, Flindris S, Tsiantis T, et al. A case report of partial bowel obstruction as the first symptom of a sizeable adnexal mucinous cystadenoma. *InnovSurg Sci*. 2022; 7: 71-75.

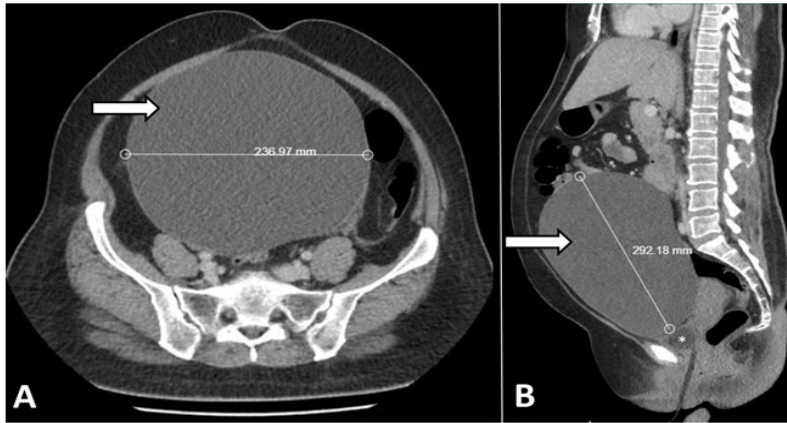


Figure 1: (A) Axial CT scan of abdomen showing large adnexal cyst (white arrow) with largest diameter measuring 236.97 mm (B) Sagittal CT scan of abdomen showing large adnexal cyst (white arrow) visualized separately from the bulb of foley catheter (white asterisk).