VIDEO ARTICLE

Laparoscopic resection of giant ovarian tumor: a video article

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ABSTRACT

Objective. The presentation of large abdominal masses is rarely seen in clinical practice as early access to medical investigations and imaging is readily accessible. Serous cystadenomas of the ovary are benign and account for 20% to 50% of all ovarian tumors. We present a clinical case of giant serous cystadenoma resected by laparoscopy.

Description of the case. A 25-year-old woman consulted due to an increase in abdominal circumference for a year. A CT scan revealed large hypodense mass measuring $30 \times 20 \times 10$ cm. The abdominal mass was suggestive of an enteric cyst and we performed a laparoscopy resection preserving the right ovarian parenchyma. Patient made an uneventful recovery and was discharged on postoperative day three. The final histopathological result was ovarian serous cystadenoma.

Conclusions. The single most common type benign ovarian neoplasm is serous cyst adenoma. Excision of a giant ovarian cyst may be associated with considerable mortality. In such patients special consideration must be given to hemodynamic and ventilatory monitoring and intraoperative fluid management.

Key words

Serous cystadenoma; giant ovarian cyst; inferior vena cava compression; ovary.
COMPLIANCE WITH ETHICAL STANDARDS

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Conceptualization: AGDG, FJTP
Data curation: AGDG, FJTP
Formal Analysis: AGDG, FJTP
Funding acquisition: AGDG, FJTP
Investigation: AGDG, FJTP
Methodology: AGDG, FJTP
Project administration: AGDG, FJTP
Resources: AGDG, FJTP, EAD
Software: AGDG, FJTP
Supervision: AGDG, FJTP, EAD, DPS
Validation: AGDG, FJTP, EAD, DPS
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References