

VIDEO ARTICLE

Laparoscopic resection of giant ovarian tumor: a video article

Laparoscopic resection of giant ovarian tumor

Andrea González **De Godos** *, Francisco Javier **Tejero Pintor**, Enrique Asensio **Díaz**, David **Pacheco Sánchez**

General Surgery and Digestive System, Río Hortega University Hospital, Valladolid, Spain.

***Corresponding author:** Andrea González **De Godos**, General Surgery and Digestive System, Río Hortega University Hospital, Valladolid, Spain. Street Dulzaina, 2, 47012 Valladolid (Spain). Email: agonzalezdeg@saludcastillayleon.es

Doi: 10.36129/jog.2024.169

ABSTRACT

Objective. The presentation of large abdominal masses is rarely seen in clinical practice as early access to medical investigations and imaging is readily accesible. 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 × 20 × 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

Authors contribution:

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

Visualization: AGDG, FJTP, EAD, DPS

Writing – original draft: AGDG, FJTP, EAD, DPS

Writing – review & editing: AGDG, FJTP, EAD, DPS

Funding: nil.

Study registration: not applicable.

Disclosure of Interests: non declared.

Ethical Approval: yes.

Informed consent: yes.

Data sharing: yes.

References

1. Ahmed N, Khan TA, Saleem MM, Bhatti O, Zahid MA. Huge Abdominal Mass in a Young Unmarried Lady - A Social and Psychotherapeutic Challenge. Cureus. 25 de abril de 2021;13(4):e14672.

Manuscript accepted for publication