

AB031. SOH22ABS216. Double trouble: a case of dysmenorrhoea in a 16-year-old girl

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Background: DG is a 16-year-old girl who presented to the gynaecology clinic in the Rotunda hospital with severe and worsening dysmenorrhoea, during which she would experience fainting episodes and pain to the point where she was unable to attend school. She had no other medical history, drug allergies or previous surgeries. Menarche was at age 15 and she had no other gynaecological history of note. She was started on cerazette by her general practitioner (GP) in the hopes of relieving symptoms.

Methods: Pelvic ultrasound showed normal ovaries and uterus but a solid appearing right adnexal lesion. Magnetic resonance imaging (MRI) showed evidence of a double uterus with only the left sided uterus communicating with the vagina. Differential diagnosis included Mullerian duct abnormality and accessory and cavitated mass. A uterine didelphys with only a left ostia seen on hysteroscopy. Laparoscopy showed a uterine didelphys with a non-communicating, engorged right uterus and right fallopian tube. Her case was discussed at a multidisciplinary meeting, where it was decided the most suitable treatment was to perform a laparoscopic hemi-hysterectomy with right salpingectomy to remove the right sided non communicating cavity and tube. This procedure was recorded with the patient's consent and will be shown as part of the video presentation.

Results: Histology confirmed an accessory uterus with

active endometrium and foci of adenomyosis. She recovered well post operatively and was counselled on future fertility and implications for delivery.

Conclusions: Uterine didelphys is a rare condition but with significant implications therefore surgeons treating young women with abdomino-pelvic pain should have awareness of this anomaly.

Keywords: Dysmenorrhoea; haematometra; hemi-hysterectomy; laparoscopy; uterine didelphys

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Footnote

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Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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