

## Sigmoid obstruction caused by torsion of a giant ovarian cyst- Georgios Velimezis- Sismanogleio General Hospital

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**Introduction:** Ovarian cysts are commonly found in women of reproductive age. Most of them do not cause symptoms and resolve in one to two months with conservative management. However, some of the cysts may be complicated with severe pain due to torsion or rupture. We are presenting a rare case of a 64-year-old woman who was admitted to the hospital with obstructive ileus caused by torsion of a giant ovarian cyst.

**Case Description:** A 64-year-old female patient visited the emergency department with acute abdominal pain associated with nausea and vomiting. The abdomen was tender with high-pitched sounds. Rectoabdominal examination revealed tenderness of Douglas. X-ray revealed a dilated colon. Rectosigmoidoscopy was decided but the endoscopic assessment was limited at the start of the sigmoid colon. The patient underwent exploratory laparotomy. A huge left ovarian mass was found and was successfully removed. No other surgical treatment needed. Patient was discharged in good condition. Histological examination has described

torsion of a cystadenoma 20x13 cm at the left ovary with no signs of malignancy.

**Results:** A big variety of tumors can arise from the ovaries due to their complex histogenetic and embryologic development. Most of them are benign. The majority of the benign ovarian cysts present asymptotically. In some cases, they can present with pain, menstrual disturbances, abdominal swelling, pressure effects or hormonal effects in functional cysts. Torsion, rupture, and haemorrhage can be some of the complications of benign ovarian cysts. In our case a huge benign ovarian cystadenoma caused obstruction of the sigmoid colon. In cystic lesions, bowel obstruction is uncommonly described.

**Conclusions:** Ovarian or adnexal torsion consists of an acute surgical emergency compromising ovary's blood supply. Furthermore, when a mass cause large bowel obstruction, an explorative laparoscopy or laparotomy is required in order to remove the mass and resolve the intestinal obstruction.