

CBL
THEME: OVARIAN
APOPLEXY. ANEMIC FORM.

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- ▣ Patient, 23 y.o, admitted to the hospital with complains on sharp pains in lower part of abdomen and short timely insensibility.

- ▣ What problems at this patient?
- ▣ What additional information do you need?

Anamnesis:

- ▣ Regular, painless, no abundant menstruation. Last menstruation in time – 15 of January. Sexual life from 22 years, without pregnancy. Gynecological diseases not noted. Considers herself ill from 2 of February, when felt strong pains in lower part of abdomen with irradiation to the rectum, was short timely insensibility.

Examination data:

- At admission the common condition of moderate severity, expressed paleness of skin surfaces and visible mucosa. PR 120 beats per min, of weak filling, AP 90/50 mm. The tongue – clean, dry. Anterior abdominal wall slightly tensed. Abdomen take place at breathing. At palpation sharp pain in lower part of abdomen, more in the left. Schetkin-Blumberg symptom weak positive in left iliac area. At percussion dullness of percussion sound in lower part of abdomen.

- ▣ Differential diagnosis:

- ▣ The interrupted ectopic pregnancy,
- ▣ Acute appendicitis,
- ▣ Acute inflammation of adnexa

- ▣ Your preliminary diagnosis...

- ▣ Ovarian apoplexy

- ▣ What investigation necessary for making a clinical diagnosis?

- ▣ CBC;
- ▣ Blood analysis on CHH;
- ▣ Vaginal investigation;
- ▣ Puncture of fornix posterior.

Results:

- CBC: Er. - $3 \times 10^{12}/l$, Hb - 95 г/л, Color index - 0,75, Leukocytes - $4,1 \times 10^9/l$, Formula: stab - 5%, s - 69%, eos - 4%, b - 1%, l - 18%, m - 3%. ESR - 16 mm/h, Coag. - 9 min;
- CUA: Color - yellow, density - 1011, transparent, pH - 5,0, protein - absent, glucose - absent, acetone - absent. Microscopy: epith. - absent, leukocytes - to 5 in v/a., Er. - absent, Cyl. - absent, mucose - absent, bacteria - absent;
- Blood on CH- 4 mIU/l;

- ▣ At puncture – blood in fornix posterior;
- ▣ Vaginal investigation: cervix of uterus of cylindrical form, palpation of uterus is difficult because of sharp pain and tension in abdomen wall, uterus not enlarged; adnexas not palpable, painful, more in the right.

- ▣ Your clinical diagnosis...

- ▣ Ovarian apoplexy. Anemic form.

- ▣ Your plan of treatment...

Treatment

- ▣ Urgent operation is necessary. Volume of organs saved operation depend on degree of hemorrhage in ovary – on suturing of the bleeding site to resection of ovary or ovary ectomy. It's possible to remove ovary only at massive hemorrhage, which affect it's tissue. At rupture of corpus luteum should suturing, without resection of ovary, otherwise the pregnancy will be interrupted.