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Natural history and complications of ovarian cysts managed conservatively in children and adolescents

Alessandra Inzoli², Paolo Passoni², Ramona Chiozzi¹, Valeria Carazita¹, Beatrice Villa¹, Costanza Liverani¹, Francesca Manzoni¹, Sara Nava¹, Stella Granato¹, Daniela Giuliani², Robert Fruscio^{2, 1}

1. Università degli Studi di Milano-Bicocca, Milan, Lombardy, Italy.
2. Obstetrics and Gynecology Unit, Fondazione IRCCS San Gerardo dei Tintori, Monza, Lombardy, Italy.

Objectives

Conservative management of ovarian cysts is considered safe for presumed benign lesions according to the IOTA5 study; however, all included patients were older than 18 years. Evidence on conservative management in pediatric and adolescent gynecology (PAG) remains limited, despite the potential impact of surgery on future fertility and ovarian reserve.

Methods

This prospective study included all patients younger than 18 years evaluated for ovarian cysts and managed conservatively at a tertiary referral center (IRCCS San Gerardo dei Tintori).

Results

Sixty-four patients were included (mean age 9.86 years). At baseline, all cysts were classified as benign on ultrasound and follow-up confirmed their benign behavior. IOTA criteria proved reliable for identifying benign lesions. During follow-up the rate of serious complications was low (ovarian torsion 3.1%).

Conclusions

Our findings support transabdominal ultrasound and conservative management as a safe approach for ovarian cyst evaluation in PAG patients.

Characteristics	Patients (n=64)
Type of ultrasound: Transabdominal Transvaginal	57/64 (89%) 7/64 (11%)
Symptoms: None Pelvic Pain	51/64 (79,6%) 13/64 (20,4%)
Site: Ovarian Paraovarian/paratubal cyst	58/64 (90,7%) 6/64 (9,3%)
Largest diameter (mm) Acoustic shadows Ascites Largest solid component (mm)	40.9 (10-104) 1/64 (1,5%) 0/64 (0%) 0.27 (0-17)
Type of tumor: Unilocular Unilocular-solid Multilocular Multilocular-solid Solid	61/64 (95,3%) 1/64 (1,5%) 2/64 (3,2%) 0/64 (0%) 0/64 (0%)
Echogenicity of cyst content Anechoic Low level Ground glass Hemorrhagic Mixed Not applicable	44/64 (68,7%) 0/64 (0%) 1/64 (1,5%) 12/64 (18,8%) 2/64 (3,2%) 5/64 (7,8%)
Color Score 1 2 3 4	64/64 (100%) 0/64 (0%) 0/64 (0%) 0/64 (0%)



Figure 1. Pubertal status

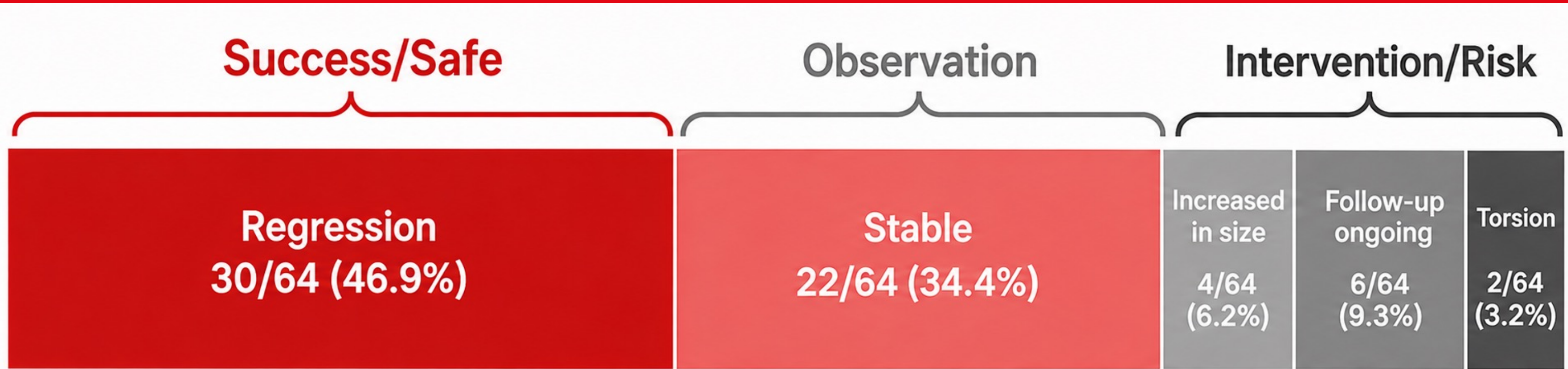


Figure 2. Follow-up outcomes

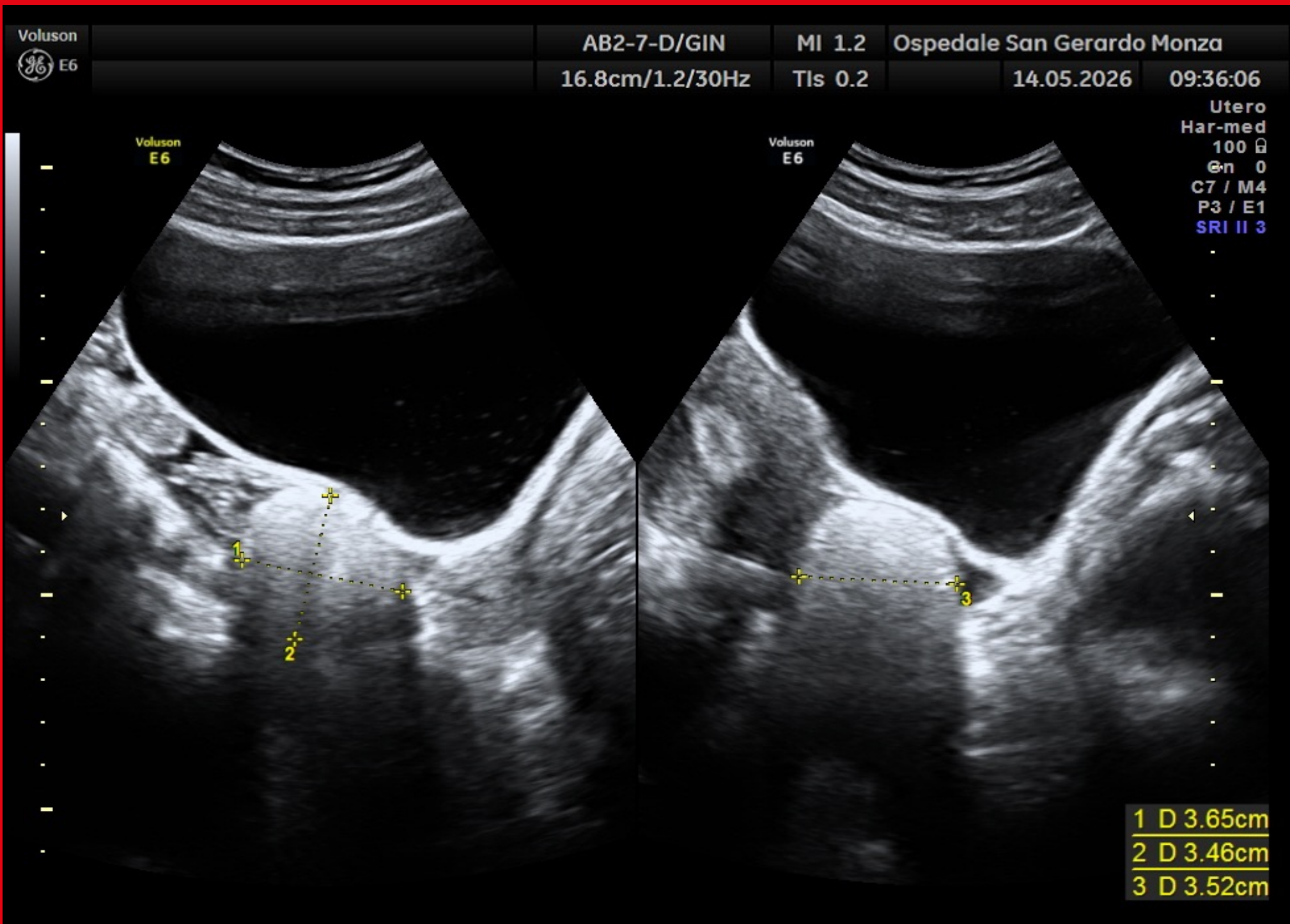


Figure 3. A transabdominal scan of a dermoid cyst in a 17 years old patient