

EP11.14. CORRELATION OF SONOGRAPHIC FINDINGS OF OVARIAN ENDOMETRIOMAS WITH THE CLINICO-DEMOGRAPHIC FEATURES OF WOMEN SCANNED AT THE PHILIPPINE GENERAL HOSPITAL

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OBJECTIVE

The study aims to correlate the sonographic findings of ovarian endometriomas with the clinical and demographic features among patients who underwent ultrasound with a pathologically proven diagnosis of endometrioma after surgical removal of an ovarian mass.

RESULT

- ❖ Women who underwent an extensive procedure for endometriotic cysts belong to the older age groups (29 to >60yo) were noted to be married, multigravid, had a history of contraceptive use, had co-morbidities (such as diabetes and hypertension) and presented with vaginal bleeding, abdominal distention and had an elevated CA 125.
- ❖ Typical features of endometrioma are relatively more common in the younger age groups.
- ❖ No notable pattern for the atypical features across age groups.
- ❖ In multiparas, unilocular cysts and minimal vascularity were more common.
- ❖ Among those with contraceptive history, smaller tumor size and presence of wall irregularities were more common.
- ❖ Endometriomas that sonographically present as large, atypical cysts with mixed echogenicity, multiple papillary projections, thicker cyst walls and thicker septae mostly manifested abdominal pain while majority of those with adhesions had dysmenorrhea.
- ❖ Larger endometriotic cysts and multiple papillary projections were also more common in patients presenting with abdominal enlargement.
- ❖ Thicker septae was common among those with vaginal bleeding.

METHOD

This is a 5-year retrospective cross-sectional study conducted at PGH including 279 patients with endometriomas. The clinicodemographic profile of patients sonographically and histologically diagnosed with endometriomas were recorded and analyzed statistically using series of Kruskal-Wallis, Chi-square, Fischer's exact and Wilcoxon rank-sum tests.

CONCLUSION

Clinico-demographic profile of patients with endometrioma significantly varies across age groups in terms of marital status, parity, level of education, contraceptive use, co-morbidities, symptoms, surgical procedure and CA-125 levels.

Based on the current data, significant statistical correlations were noted in terms of type of cysts and vascularity with parity as well as tumor size, presence of irregularities with contraceptive use and classic clinical manifestations of endometrioma with certain sonographic features.

