EP33.10 Ultrasound findings of uterine inversion caused by endometrial sarcoma in a 17 year old girl

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Introduction
Instant diagnosis of non-puerperal uterine inversion is difficult due to its rarity and lack of understanding of typical ultrasound manifestations. This report presents a uterine inversion caused by uterine sarcoma in a 17 year old girl, diagnosed by ultrasound.

Case presentation
The case was a 17-year-old girl, without sexual experience. She presented irregular vaginal bleeding for 2 months. Previous ultrasound examinations showed heterogeneous masses of uterus, suspected as leiomyomas. On the day of ward admission, she complained of difficulty in voiding bladder. Transabdominal/transperineal ultrasound examinations showed urinary retention, and abnormal signs of uterus. The signs included: upside down of uterus on sagittal plane, which meant the fundus of uterus was displaced downward toward the vagina; blood vessels located in the center of distorted uterus on sagittal plane, representing infolding uterine arteries and veins; “target sign” on transverse plane, with two small round anechoic structures located in inner layer, representing both uterine arteries; entrapment of ovaries into uterine tissue;

D: entrapment of ovary into uterus; E: highly vascularized mass in vagina demonstrated by transperineal way; F: findings in laparoscopic procedure, which confirmed the diagnosis of uterine inversion.

a large highly vascularized heterogeneous mass in vagina sized 8cm, connected to fundus of uterus. Uterine inversion associated with uterine mass was diagnosed by ultrasound. The patients received emergency operation to remove the uterine mass protruded in vagina. Subsequent laparoscopic procedure 5 days later confirmed uterine inversion. The pathology showed endometrial stromal sarcoma.

Conclusion
Non-puerperal uterine inversion has typical ultrasound manifestations. Our case could be helpful to understand the ultrasound findings of the disorder and to diagnose timely.