

ORIGINAL ARTICLE

## Pediatric Ovarian Torsion in a Medical Center in Taiwan: Case Analysis

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#### 1. Introduction

Abdominal pain is one of the most common complaints of patients visiting emergency departments.<sup>1-3</sup> Approximately one-third of children who present with abdominal pain at an emergency department do not receive a specific diagnosis.<sup>3</sup> Diagnosis of abdominal pain in children can be difficult given the high prevalence of gastrointestinal disorders, especially in young children who may not be able to describe their symptoms particularly well or localize their discomfort. Failing to diagnose an emerging surgical condition, such as acute appendicitis, is the primary concern of physicians when treating patients with abdominal discomfort. However, ovarian torsion is an uncommon cause of abdominal pain, especially in young children, and early diagnosis is essential in order to salvage the affected ovaries. In this study, we analyzed the epidemiological characteristics of patients below 18 years of age with adnexal torsion at Changhua Christian Hospital (CCH). We retrospectively examined all patients with adnexal torsion who visited the pediatric emergency department or outpatient clinic of CCH between June 2003 and June 2010. We also reviewed relevant studies in the literature.

#### 2. Materials and Methods

We reviewed the medical charts of all patients who treated between June 2003 and June 2010 who were diagnosed with adnexal torsion or ovarian torsion (International Classification of Diseases 620.5). Medical records were reviewed for age, associated symptoms, past and present medical histories, physical findings, diagnostic tests performed, clinical course, pathological findings, and diagnoses. Leukocytosis was defined as >10,000 white blood cells (WBCs)/mL in a peripheral blood sample, and pyuria was defined as >5 WBCs per high-power field (HPF) of a urine sample. The study was approved by the institutional review board of CCH.

### 3. Results

A total of 21 patients below 18 years of age with adnexal torsion were identified over the 7-year period and included in the analysis. Of these children, three had visited the outpatient department and the remaining had visited the pediatric emergency department of our hospital. All patients were eventually admitted to our hospital. Their mean (SD) age was 13.62 (3.75) years (Table 1). Four patients were below 10 years of age, and the youngest was 7 years old. Eight children had previously visited other private clinics or were transferred from other local hospitals. The incidence rate of adnexal torsion in the pediatric emergency room of CCH was one case per 10,000 visiting patients.

Abdominal pain presented in each child. The lower abdomen was the most common area where children described the location of their pain (Table 2). Among these children, one child mentioned radiating flank pain but did not have a urinary tract infection. Vomiting and nausea was the second most common symptom (33.3%). Two children presented with diarrhea, one had difficulty in urinating, and one presented with a fever. A palpable mass was detected by physical examination in one child, and one

Table 1 Ep	Table 1 Epidemiological characteristics of patients with	ics of	patien		adnexal torsion.	corsion.											
		Oval	rian ter	Ovarian teratoma			Ova	Ovarian simple cyst, follicular	nple c	yst, fo	llicula			Tubal ser	Tubal serous cystadenoma,	enoma,	Adult granulose
							cyst	cyst, serious cystadenoma	us cys	tadeno	ma			paratubal cyst	l cyst		cell tumor
Age (y)		7	6	11	13	18	7	10 12 14 16 17 18	12	14	16	17	18	12	17	18	17
Counts		-	2	2	-	2	-	-	-	-	-	2	-	2	-	-	-
Location	Right			2						ß					٣		-
	Left			m						m					-		0
Surgical	Salpingectomy			0						0					m		0
Technique	Salpingo-oophorectomy			2						-					-		-
	Oophrectomy			2						-					0		0
	Ovary cystectomy			2						m					0		0
	Conservative treatment 1 (cystectomy 3 mon later)	1	systecti	omy 3 m	on later	-				-					0		0
	Partial oohorecotomy			-						2					0		0
Comorbidity							Hyd Cori	Hydrosalpinx (1) Corpus luteum hematoma (1)	nx (1) eum h	emato	ma (1)			Ovarian h	iemorrhagic	Ovarian hemorrhagic necrosis (1)	

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