

## **Prolapse of a large pedunculated uterine myoma.**

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### **Question:**

What is this condition and how can it be treated?

### **Answer:**

A 60-year-old postmenopausal woman, G2P2A0, was referred to our Emergency Department due to complaints of a protruding mass from the vulva, vaginal bleeding and abdominal pain. Clinical examination revealed a neglected mass originating above the level of the internal cervical os. Computed tomography examination revealed a uterine mass measuring 15cm.X10cm.X7cm. with bilateral hydronephrosis. The patient underwent abdominal hysterectomy and bilateral salpingoophorectomy. Biopsies retrieved from the mass as well as the final post-surgery histology report indicated a leiomyoma.

Uterine leiomyoma are the most common pelvic tumors in women. When they originate from submucous layer, they have the chance to prolapse. Reported prevalence of prolapsed pedunculated submucosal leiomyoma is 2.5%.<sup>1</sup> Most myomas are small but variable in size, between 1-6 cm., however, some case reports in the literature have reported prolapse of larger myomas, measuring more than 10cm. in diameter.<sup>2</sup>

Surgery has been the mainstay of prolapsed pedunculated leiomyomas, with both vaginal removal and hysterectomy being safe.<sup>1</sup> The feasibility

and choice of each procedure depend on many factors. Lower parity, absence of coexisting leiomyoma, low volume of leiomyoma and more severe anemia were associated with preference of vaginal removal.<sup>1</sup> On the other hand, as described in literature, hysterectomy is preferred in postmenopausal women with multiple leiomyomas or in cases of larger volume.

### Key Clinical Message

We report a rare case of a large prolapsed pedunculated uterine myoma measuring 15cm in its greater diameter. In order to make a surgical procedure safe and feasible, appropriate clinical predictors should be taken into account and pre- and intraoperative preparations be available to the surgeon's armamentarium.

### *Reference:*

<sup>1</sup> *"Clinical predictors of successful vaginal myomectomy for prolapsed pedunculated uterine leiomyoma"* Serdar Aydın, Hale Göksever Çelik, Mustafa Maraşlı and Rabia Zehra Bakar *J Turk Ger Gynecol Assoc.* 2018 Sep; 19(3): 146–150 doi: 10.4274/jtgga.2017.0135

<sup>2</sup> *Vaginal myomectomy for prolapsed submucous fibroid: it is not only about size.* Maryam Al-Shukri, Wadha A; Ghafri, Hamoud Al Dhuhli, Vaidyanathan Gowri. *Oman Med J.* 2019 Nov; 34(6): 556-559 doi: 10.5001/omj.2019.100