ADNEXAL TORSION IN POSTMENOPAUSAL WOMEN: CLINICAL PRESENTATION AND RISK OF MALIGNANCY

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Objective: To investigate the clinical presentation, intra and post-operative outcome in postmenopausal women who were diagnosed with adnexal torsion.

Method: Cases of postmenopausal women who were diagnosed with adnexal torsion between the years 1995-2014 were reviewed (study group). Four cases of premenopausal women who were diagnosed with adnexal torsion during the same time period were selected as controls and were matched to each case in the study group. Demographic data, clinical signs and symptoms, intra and post-operative characteristics were compared between the two groups.

Results: During the study period 44 postmenopausal women were diagnosed with adnexal torsion. The mean age of women in the study group was significantly older than the control group (58±7 vs. 27±9, p<0.01, respectively). Constant abdominal pain was the most common presenting symptom in the postmenopausal group (57%), whereas colicky pain was the predominant symptom in the premenopausal group (86%). Time interval from admission to surgery was significantly longer in the postmenopausal group (median, 24 hours; range, 13-48 hours; vs. 6 hours; range, 4-12 hours, P<0.001). Laparoscopic surgery was performed in 90% of the premenopausal group compared to only 50% of the postmenopausal group (P<0.001). Four women in the postmenopausal group were diagnosed with malignancy (9%) whereas no cases of malignancy were found in the premenopausal group (P<0.001).

Conclusions: Adnexal torsion in postmenopausal women is an uncommon event with a unique presentation. A longer delay between presentation and surgery may be attributed to the rarity and irregular symptoms of the disease in this age group. Since malignancy is not an uncommon finding in this group of patients, preparation for more extensive surgery should be contemplated.