30yo Nullip DVT, Refractory Menorrhagia, 20/40 Adenomyotic Uterus

Coghlan, E., Melon, J., Maouris, P., Ardakani, N.M., Fender, L.
King Edward Memorial Hospital

BACKGROUND

Deep Vein Thrombosis (DVT) secondary to large uterine fibroids is well documented in the literature. Case reports describe use of IVC filter to facilitate emergency hysterectomy, relieve pressure symptoms and treat menorrhagia. Adenomyosis results in a diffusely enlarged uterus, ectopic endometrial tissue inducing hypertrophy and hyperplasia, generally not exceeding 12/40 size. This unusual case is the first documented case in the literature of bilateral DVT and refractory menorrhagia from a grossly enlarged adenomyotic uterus in a nullip.

CASE SUMMARY

This 30yo nullip was diagnosed with an extensive left lower limb and pelvic DVT in the setting of compression from a large pelvic mass. History of metromenorrhagia. Imaging of the DVT demonstrated a 30cm bulky uterus consistent with adenomyosis. Hysteroscopy found a 8cm cavity, thick polypoid vascular endometrium, with limited biopsy given her anticoagulated state and concerns over haemorrhage. Histology demonstrated simple hyperplasia but concern for malignancy remained from incomplete sampling. GnRH and progesterone was trialed to retain fertility with no reduction in uterine volume or bleeding. Fertility consult indicated a low chance of successful pregnancy outcome with hysterectomy recommended and accepted with ovarian conservation. An IVC filter was inserted in liaison with haematology. She proceeded to an uncomplicated TAH with bilateral salpingectomy and pelvic washings. On histopathology, the uterus weighed 1775g with final histology demonstrating adenomyosis and a benign endometrial polyp, no evidence of malignancy. The IVC filter was removed 6 weeks post-operatively.

REFERENCES


CONCLUSION

• MDT input, notably from haematology and fertility specialists, were paramount in safely and ethically managing this patient.
• IVC filter facilitates emergency hysterectomy in the setting of DVT.
• This is an unusual case of refractory menorrhagia with a grossly adenomyotic uterus.