

Ovary and Adnexa

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전 해 정

서 론

Ovary는 dynamic한 organ으로서 호르몬의 변화와 월경주기에 따라 다양한 모양을 보이며 난소의 낭종은 정상 physiologic function으로 인해 생길 수도 있고 종양이나 염증이 원인일 수도 있다.

Simple Cyst in the Adnexa

Functional ovarian cyst
Ovarian remnant cyst
Parovarian cyst
Cystic ovarian neoplasm
Peritoneal inclusion cyst

Complex Adnexal Mass with Negative Beta-HCG

Complicated Functional ovarian cyst
Endometrioma
Tubo-ovarian abscess/Hydrosalpinx
Primary ovarian neoplasm
Germ cell line
Epithelial cell line
Stromal cell line
Metastatic disease to the ovaries
Peritoneal inclusion cyst
Parovarian cyst
Hematoma
Complicated ascites
Miscellaneous

Iliac artery aneurysm
Collection around transplanted kidney
Cystic degeneration of myoma of uterus

Complex Adnexal Mass with Positive Beta-HCG

Corpus luteal cyst of pregnancy
Thecal lutein cyst
Ectopic pregnancy
Other adnexal mass in pregnancy
Germ cell malignancy without pregnancy

Solid-appearing Adnexal Mass

Hemorrhagic functional cyst
Endometrioma
Ectopic pregnancy
Tubo-ovarian abscess
Ovarian torsion
Neoplasm
Stromal tumors
Germ cell tumors
Brenner tumors
Malignant epithelial tumors
Metastasis to ovary/Lymphoma
Leiomyoma (pedunculated)
Pelvic kidney
Hematoma

Highly Echogenic Pelvic Mass:
Calcification /Air/Fat

- Calcified pelvic masses
 - Uterine leiomyoma
 - Ovarian neoplasm
 - Pregnancy/Extruded fetal parts
 - Iliac artery aneurysm
- Air-filled pelvic mass
- Fat-containing pelvic mass

Amorphous Pelvis

- Pelvic inflammatory disease
- Endometriosis
- Ruptured ectopic preg/hemoperitoneum
- Extensive pelvic neoplasm
- Leiomyomatous uterus

Dilated Tubes in the Pelvis

- Dilated fallopian tubes
- Pelvic varices
- Dilated distal ureters
- Dilated small bowel loops

결 론

Clinically stable, reproductive age, negative beta-HCG with a complicated adnexal mass는 시간이 지남에 따라 resolution 할 수 있으므로 수술보다는 follow-up study가 중요하다.

Clinically unstable, severe pain, fever, leukocytosis with a complicated adnexal mass이면 operative intervention이 필요하다.

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