

## Dextro-rotated uterus in benign gynaecological surgery

**Khaliza Kazrin, Wan Nurul Ezyani, Raymond Lim Chung Siang, Jerilee Mariam Khong, Aizura Syafinaz Ahmad Adlan, Narayanan Vallikannu Valliyappan**

Department of Obstetrics & Gynaecology, Faculty of Medicine, University Malaya, Kuala Lumpur, Malaysia

### ABSTRACT

**Introduction:** Dextro rotation of the uterus occurs when the uterus is rotated 45 degrees to its longitudinal axis. In a non-gravid uterus, the occurrence of this condition is extremely rare. We report here a case of dextro rotated uterus as an incidental finding during a total abdominal hysterectomy. **Case Description:** A 45-year-old woman who presented with abnormal uterine bleeding for the past 1 year due to adenomyosis. She was treated medically. However, her symptoms did not improve. She opted for a hysterectomy. MRI pelvis prior to surgery reported a retroverted uterus with multiple uterine fibroids, the largest measuring 3.3 x 4.2 cm. She had three caesarean sections. Intra-operatively noted dense adhesion between the right aspect of the uterus to the anterior abdominal wall and rectus muscle causing the uterus to be in a dextro-rotated position. Adhesiolysis was done followed by total abdominal hysterectomy. **Discussion:** The finding of a dextro-rotated uterus in this patient was unsuspected because the MRI scan, to investigate the nature of the fibroid, prior to the surgery showed only a retroverted uterus. Hysteroscopy +/- diagnostic laparoscopy, to investigate her symptoms, may play a role in diagnosing the dextro-rotation of the uterus. The main modality of treatment is surgery. In patients, who wish to preserve fertility, surgery to correct the position of the uterus can be performed.

## Endometrial cancer in a young lady

**Yee Yee Kyaing, Awi Anak Idi**

Department of Obstetrics and Gynaecology, Faculty of Medicine and Health Sciences, University Malaysia Sarawak, Kota Samarahan, Sarawak, Malaysia

### ABSTRACT

**Introduction:** Endometrial cancer is the most common gynaecological cancer in developed countries and rapidly increasing together with the development of socioeconomic status and the prevalence of metabolic diseases. It is common in post-menopausal women but the incidence among young women is about 2 to 14%. **Case Description:** A 28-year-old single lady presented with abnormal uterine bleeding for 4 months. Her body mass index was 48.3 kg/m<sup>2</sup> and investigations showed she had diabetes mellitus, hypertension, hyperlipidemia, mild ischemic heart disease, and obstructive sleep apnoea. Finally, she was diagnosed with endometrial cancer FIGO stage IA and treated with total abdominal hysterectomy, bilateral salpingo-oophorectomy, and pelvic lymph node dissection. Histopathology confirmed that it was grade 1 endometrial carcinoma, staged IA, with features of endometrial hyperplasia and atypia. **Discussion:** Endometrial cancer is usually diagnosed at the mean age of 68 years. Among many risk factors of endometrial cancer, components of metabolic syndrome are strongly associated with it. Young-aged endometrial carcinoma is not uncommon. According to the Asian data, among components of metabolic syndrome, obesity is a more prominent risk factor. Many studies showed metabolic syndrome caused the development of endometrial cancer by directly acting on tumour cells and regulating tumour environment. Some studies revealed that weight loss management could reduce the incidence of endometrial cancer and hyperplastic endometrium may be reversible. Therefore, many researchers conclude that early intervention of metabolic syndrome and a healthy lifestyle are important roles in the prevention and prognosis of endometrial cancer.