

POST-PARTUM OVARIAN VEIN THROMBOSIS EXTENDING TO INFERIOR VENA-CAVA: A RARE CASE REPORT

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Abstract

Introduction: Postpartum ovarian vein thrombosis (POVT) is rare but life-threatening complication of puerperium. It is seen in 0.05 - 0.2 % deliveries. Nearly 80-90% of POVT occurs in the right ovarian vein, possibly explained based on its anatomic position and blood flow dynamics. An extension of POVT to inferior vena-cava is relatively rare and very few cases are reported in literature. Case: A 28-year-old woman, para 01 presented four days after an uncomplicated cesarean delivery to our emergency department with the history of sudden onset of right lower abdominal pain accompanied by high- grade fever. On examination, the patient was average built and weighed 65 kilograms. She was febrile with rectal temperature 38 °C, pulse 102 beat/min and BP 118/70 mm of Hg. Physical examination revealed localized tenderness in the right lower abdomen. Pelvic examination was otherwise normal. Ultrasonography (USG) abdomen revealed a cord-like structure in the lower right abdomen arising next to the right ovary. Computed tomography (CT) of the abdomen with contrast showed dilated right ovarian vein (1.8 cm in diameter) with complete thrombosis measuring 1.8 cm x 0.8 cm x 0.6 cm and extending into the inferior vena cava (IVC). Based on CT, she was diagnosed with postpartum ovarian vein thrombosis and immediately started on a dose of low molecular weight heparin (LMWH) and antibiotic (ceftriaxone 1 gm BID for 5 days). LMWH was discontinued after the normalized ratio (INR) had attained therapeutic levels (INR) level: 2-3). Warfarin was started and continued for three months. She had an uneventful recovery, with repeat imaging after three months showing complete resolution of thrombus. Conclusion: POVT is a rare but serious complication of puerperium. Early diagnosis is crucial to prevent unnecessary interventional procedures. Multidisciplinary management strategies, starting with early anticoagulation, will significantly reduce the patient morbidity and mortality.

Biography

Houda Al Yaqoubi, a feto maternal medicine consultant, having total 15 years of experience in the field of Obstetrics & Gynecology. Currently she is working as a consultant in the Department of Obstetrics & Gynecology under Ministry of Health Oman. She had fel- lowship in Feto-Maternal medicine from the University College Hospital London UK, St. George Hospital UK and National University Hospital Singapore. She is actively engaged in various research activities, workshops and CME programs. She has couple of publi- cations in international peer reviewed journals. Her future plan is to work more on antenatal and postnatal maternal comorbidities and complications management.



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