

A Rare Case of a Pelvic Retroperitoneal Epidermoid Cyst

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ABSTRACT

Epidermoid Cyst are benign cutaneous tumors that may occur in any part of the body. However the pelvic epidermoid cyst are rare and only a few cases have been described in the literature. Because of the rarity we are presenting a case of pelvic epidermoid cyst.

KEYWORDS : Epidermoid Cyst, Pelvic Retroperitoneal, Ovarian.

A 22 years nulliparous patient presented with progressive swelling of the abdomen and inability to conceive. On examination she has had pelvic mass rising into the abdomen mainly on the right side. The mass was 16-18 weeks gestation size, non tender with tense firm feel and a restricted mobility. There was no evidence of free fluid in the abdomen.

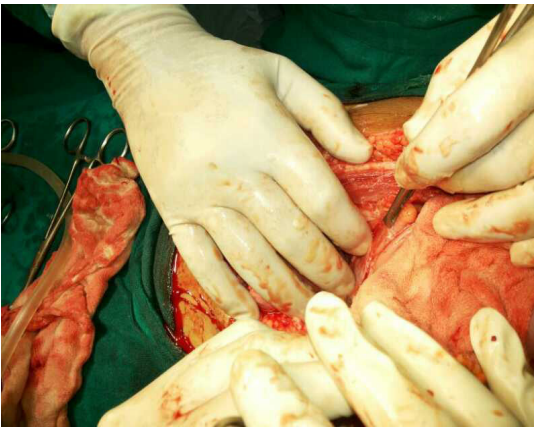
The ultrasound showed a cystic, unilocular mass measuring 15x12 cm in size mainly on the right side of the pelvis. A pre operative diagnosis of ovarian tumor was made. The abdomen was opened by midline vertical incision and a tense, cystic mass in the pelvis filling the right retroperitoneal area was found. Uterus and adnexa were normal. During dissection of the cyst it was punctured and the contents of the cyst were drained out (sebaceous material about 500 ml.). The cyst was then removed and sent for histopathological examination. The histology was compatible with epidermoid cyst. The post operative period was uneventful and the patient was discharged on 7th post operative day.

Epidermoid cyst is the most frequent cutaneous cyst in the head and neck area its occur in the pelvic area is the rarity and hence this case reports Epidermoid cyst could be congenital post traumatic. Epidermoid cysts are benign tumors with very little risk of malignant transformation. These tumors however grow to reach a considerable size displacing or damaging other tissues and organs.

Conclusion :

Preoperative diagnosis of pelvic Epidermoid cyst is difficult. Ultrasound and CT Scan often report it as a ovarian cyst. The treatment of pelvic Epidermoid cyst is surgical excision, using a cleavage to avoid any organ damage. Sometimes removal may be difficult in the retroperitoneal area, then in that case the cyst be punctured and drained, and the wall of the cyst is dissected out in toto . Precautions should be taken to avoid spillage and injury to vessels and nerves.





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