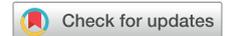


A rare case of endometriosis invading external iliac vein causing deep vein thrombosis



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FIGURE 1
Computerized tomography, adnexal masses



Li M. Endometriosis and deep vein thrombosis. *Am J Obstet Gynecol* 2019.

FIGURE 2
Endometriotic nodule encasing left external iliac vein



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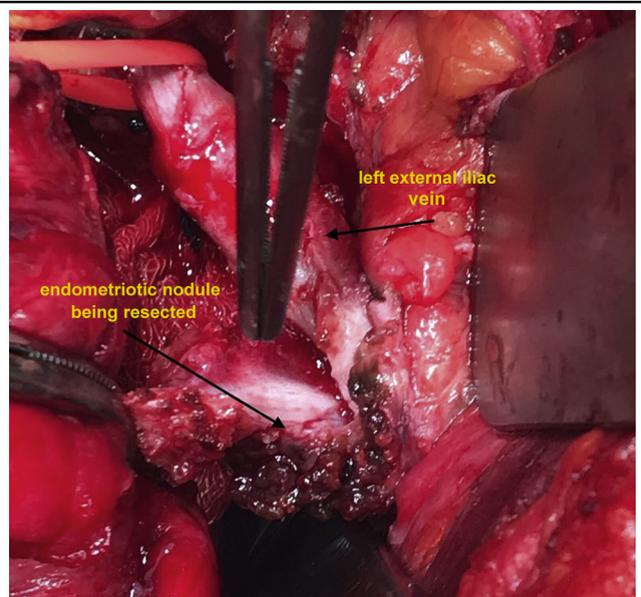
A 25 year old nulliparous woman presented with a 3 day duration of fever, lower abdominal pain, and shortness of breath. On physical examination, there was a 14 week-sized pelvic mass. A computerized tomography scan showed bilateral multiloculated adnexal masses with compression on the left external iliac vein and a hypodensity within the vein suggesting a thrombus (Figure 1).

A therapeutic dose of enoxaparin was started at 2 mg/kg daily and an inferior vena cava filter was inserted preoperatively.

Intraoperatively, a bilateral endometriotic cyst was noted with dense adhesion to the ovarian fossa and uterus. A 4 cm endometriotic nodule was also noted encasing the left external iliac vein (Figure 2).

Excision of the nodule was performed after skeletonizing the left external iliac vein and the nodule was completely removed (Figures 3 and 4). Histology confirmed endometriosis.

FIGURE 3
Skeletonizing external iliac vein



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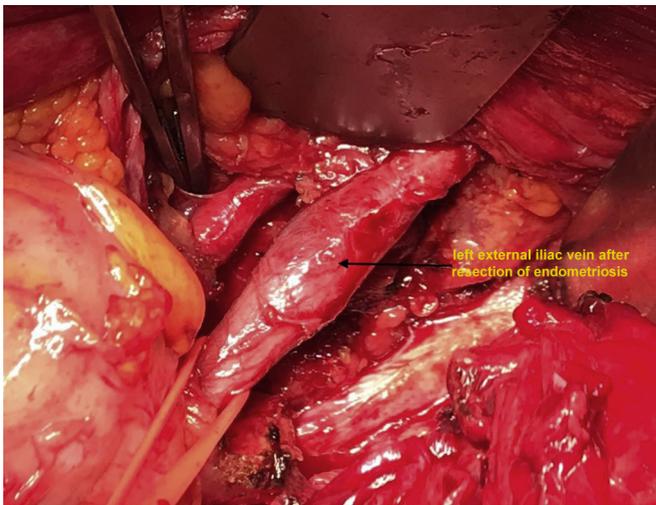
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FIGURE 4
External iliac vein after resection



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The IVC filter was removed 2 weeks postoperatively and enoxaparin was stopped 3 months later, and a hormonal suppressant was also started for long-term management. ■