

# Laparoscopic primary repair after the diaphragmatic endometriosis resection

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In approximately 0.6 % of cases, ectopic endometrium has been found in extrapelvic sites, such as the umbilicus, skin, upper abdominal peritoneum and organs (liver, spleen), diaphragm, pleural cavity, lungs, and pericardium. The prevalence of diaphragmatic endometriosis has been reported in up to 0.19 % of lesions. No guidelines exist about treatment of diaphragmatic endometriosis, and this rare condition is still a matter of debate because it raises several diagnostic and treatment challenges. We present a case of patient affected by diaphragmatic endometriosis who was treated by laparoscopy. A 41-year-old woman was referred to our department because of dyspareunia and dysmenorrhea. Laparoscopic finding showed left ovarian cyst adherent to peritoneum, cul-de-sac partial obliteration and endometriotic nodule on right diaphragm. We performed laparoscopic adhesiolysis, right ureter peritonectomy and diaphragmatic resection of endometriosis. An accidental diaphragmatic injury was occurred during the laparoscopic diaphragmatic resection. We performed successful laparoscopic primary repair of diaphragm and then chest tube was also inserted. The patient was uneventfully discharged home 4 days later.  
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Keywords : Endometriosis, diaphragm, laparoscopy

Authors :

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References : , , ,

## Authors

Joong Sub Choi 1, Jaeman Bae 1, Won Moo Lee 1, Jeong Min Eom 1, Jong Woon Bae 1, Un Suk Jung 1,

1. Obstetrics and Gynecology, Hanyang University College of Medicine, Seoul, KOREA, REPUBLIC OF

## Authors (raw format)

Choi Joong Sub - email : choiyjy1@hanyang.ac.kr Institution : Hanyang University College of Medicine Department :

Obstetrics and Gynecology City : Seoul Country : KOREA, REPUBLIC OF Speaker : Yes

Bae Jaeman - email : obgybae@hanyang.ac.kr Institution : Hanyang University College of Medicine Department :

Obstetrics and Gynecology City : Seoul Country : KOREA, REPUBLIC OF Speaker : No

Lee Won Moo - email : leewmoo@hanyang.ac.kr Institution : Hanyang University College of Medicine Department :

Obstetrics and Gynecology City : Seoul Country : KOREA, REPUBLIC OF Speaker : No

Eom Jeong Min - email : mixie@naver.com Institution : Hanyang University College of Medicine Department : Obstetrics

and Gynecology City : Seoul Country : KOREA, REPUBLIC OF Speaker : No

Bae Jong Woon - email : hyogbjw@naver.com Institution : Hanyang University College of Medicine Department :

Obstetrics and Gynecology City : Seoul Country : KOREA, REPUBLIC OF Speaker : No

Jung Un Suk - email : petrow@naver.com Institution : Hanyang University College of Medicine Department : Obstetrics

and Gynecology City : Seoul Country : KOREA, REPUBLIC OF Speaker : No

