

Microwave ablation of a subrectus abdominal wall endometrioma: A case report

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ABSTRACT

Introduction: Abdominal wall endometriosis (AWE) is a rare form of extrapelvic endometriosis, commonly associated with surgical procedures. Traditionally, excision of the lesion is the treatment of choice but subrectus AWE present a challenge as surgical removal may require extensive fascial repair or mesh application. Non-surgical methods including microwave ablation (MWA) had been used with excellent results. **Case Description:** A 41-year-old lady who had 2 previous caesarean deliveries presented with disturbing cyclical abdominal wall pain and tenderness, 2 years after the last delivery. Hormonal treatments failed to adequately control the symptoms. Ultrasound examination revealed hypoechoic mass 3x3 cm located below the anterior rectus sheath giving the diagnosis of a subrectus abdominal wall endometrioma. Ultrasound guided MWA was performed using a 10 cm length 16G MWA antennae with 3 mm active tip using Helios Microwave Ablation System H-1 (Canyon Medical Inc, Nanjing, Jiangsu, China) generator. The ablation was performed at 50 W for 43-90 seconds (total of 4 passes) with peritoneal insufflation at the pressure of 10 mmHg to create a safe distance from the abdominal viscera. The improvement was dramatic with complete disappearance of the cyclical symptom on the subsequent menstrual cycles. **Discussion:** MWA offers another option of nonsurgical treatment for AWE, especially useful for subrectus lesion. It is highly effective with minimal and transient complication profile.