

Poster Number: EP 035 Name: Minarva Hikoka(2 nd year PG OBGY)

Title: OHVIRA SYNDROME(Obstructed Hemivagina and Ipsilateral renal anomaly)





INTRODUCTION: OHVIRA SYNDROME

(Obstructed Hemivagina and Ipsilateral renal anomaly) Also known as HERLYN WERNER WUNDERLICH syndrome is a rare mullerian duct anomaly and ipsilateral renal agenesis.

Delay in diagnosis are common due to normal onset of puberty and menstruation. usually present with progressive dysmenorrhea, non specific lower abdominal pain, urinary retention, pelvic mass , hypomenorrhea mass.

AIMS &OBJECTIVE: This study aims to present a case of a 26yr female with missed abortion with a swelling of size(6*7)cm in right lateral vaginal wall which came out to be a case of OHVIRA syndrome with uterus didelphys.



complain of amenorrhea for 2 months and 1 episode of bleeding 3 days back .Her usg report showed two uterus in pelvis with two separate endoechoes and cervix. Gsac corresponding to 8weeks present on left side uterine cavity, right side of uterus empty .Hypoechoic collection 6*5 present in upper part of vagina .Homogenous hepatomegaly,absence of right kidney in renal fossa with compensatory hypertrophic left kidney. p/s:cervix taken up,os posterior ,no bleeding,swelling of size(6x7)cm2 spherical in shape in right lateral vaginal wall present,non pulsatile,not increased while coughing or straining.

Bimanual pelvic evamination:uterus size couldn't be elicited,cervix taken up,os posterior.

RESULTS:

Diagnostic
hysterolaparoscopic
suction and evacuation
with vaginal septum
resection with
laparoscopic
adhesiolysis was done.
Post op days were
uneventful

Obstructed
hemivagina requires
surgical correction
due to pain,
increased risk of
infection band
retrograde menses
with risk of

endometriosis.

Conclusion: