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- Title: Scar Endometriosis - A Rare Case Report

1. Introduction

Scar endometriosis is the presence of functional endometrial tissue in a scar. It has an incidence of 0.03–0.6% following cesarean section.

2. Case presentation

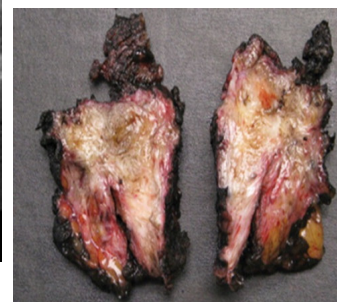
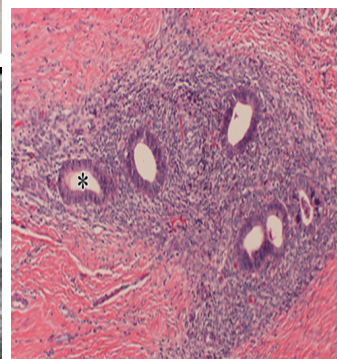
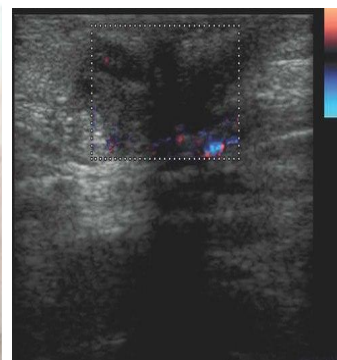
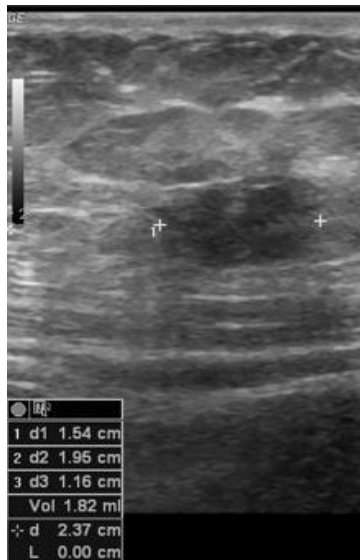
A 21-year-old married female with two prior LSCS presented with 6-months of right scar pain, cyclical and aggravated during menses, without generalized abdominal pain or comorbidities.

3. Examination

P/A:- soft , No GTR, Local scar site examination- pfannenstiel scar present On right side of scar 3*2 cm palpable nodule present. Tenderness and induration present. P/S - cx vagina healthy. P/V- uterus size normal, RV, B/I fornix free, non tender

3.1 USG local

Heterogeneous hypoechoic lesion noted in subcutaneous plane on right lateral side of scar measuring 3.3*3*2.7 cm, with loss of fat plane. Punctate hypoechoic lesions noted.



3.2 USG doppler

It shows ill-defined, blurred outer borders surrounded by a hyperechoic ring. Colour Doppler examination invariably revealed scarce blood vessels at the periphery of the mass

4. Histopathological examination

Dense chromatin nuclei with subnuclear vacuoles corresponding to early secretory phase. Granulation tissue and multiple blood vessels seen. Endometriotic glands and stroma in the subcutaneous tissue.

6. Conclusion

Scar endometriosis is diagnosed through a thorough history, physical exam, and imaging, with MRI being particularly useful. While hormonal treatment offers limited relief, surgical excision is the standard treatment.