Laparoscopic Management of Juvenile Cystic Adenomyoma

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Adenomyomas are uncommon pathologies composed of endometriotic glands mostly containing hemorrhagic material. Different management options are available according to age and anatomical localization of the cystic mass.

A 20-year-old girl was presented with severe dysmenore that ongoing for 6 months. Laparoscopic excision was decided following confirmation of adenomyotic cyst localized on right anterior wall just below the cornual end. Transverse incission was performed and cystic lesion was reached. Endometriotic cyst wall was then delineated from the myometrial tissue using hydro- and sharp dissections. Finally, cyst wall was completely enucleated. The myometrial defect was repaired with absorbable suture material. Post-operative period was uneventful.

Laparoscopic removal of adenomyotic cyst is a feasible option for adolescants. This technique not only provides better and faster recovery, but also minimizes the adhesion formation risk that might contribute to tubal factor infertility.