Herlyn Werner Wunderlich Syndrome

Wong Xin Sheng, Farhawa Binti Zamri, Wong Lee Leong, Abi Ling Ung Ping

Department of Obstetrics and Gynaecology, Hospital Bintulu

ABSTRACT

Introduction: Herlyn Werner Wunderlich syndrome is an extremely rare syndrome characterized by a triad of uterus didelphys, obstructed hemivagina and ipsilateral renal agenesis. It is also known as obstructed hemivagina and ipsilateral renal anomaly (OHVIRA), a congenital defect of Mullerian ducts. Case Report: An 11-year-old girl was referred from Polyclinic for pelvic mass for investigation. She has underlying epilepsy and bronchial asthma. She attained menstruation just a month before her presentation. She complained of lower abdominal pain for 3 days and had associated fever for 1 day. No significant sign demonstrable on physical examination. Transabdominal scan revealed a mass in the pouch of Douglas measuring about 6x6cm with mixed echogenicity resembling a dermoid cyst. Tumour markers were normal. She presented again 1 month later with a abdominal mass at 16-week size. A Computed tomography performed revealed uterine didelphys, obstructed hemivagina and left renal agenesis which was consistent with Herlyn Werner Wunderlich Syndrome. She subsequently underwent an examination under anaesthesia. Drainage of hematocolpos and refashioning of the vaginal septum were done. Conclusion: Herlyn Werner Wunderlich syndrome is rare. The diagnosis of such condition could be challenging especially when patient present with acute abdomen with evidence of pelvic mass.

KEY WORDS:
Herlyn Werner Wunderlich Syndrome, OHVIRA, hematocolpos, uterus didelphys, renal agenesis

The Early Pregnancy Assessment Unit (EPAU) in Hospital Sultanah Nurzahirah (HSNZ) Kuala Terengganu: A Clinical Audit of First Year of Service

Siti Nur Dina¹, Siti Hajar M¹, Mohd Hafiz I¹, Nasuha Yaacob²

¹Department O&G HSNZ Kuala Terengganu, ²Reproductive Services Unit, Department O&G HSNZ Kuala Terengganu

ABSTRACT

Objectives: EPAU is a dedicated service that aims to provide accessible diagnosis, treatment and support service. We conducted this clinical audit to assess effectiveness of the service and identify opportunities for improvement. Methods: Retrospective audit study of all women attending the EPAU of HSNZ between 1st January - 31st December 2016. Baseline characteristics and clinical outcomes were extracted from clinical records and assessed. Results: As many as 719 women attended EPAU in 2016, with a mean of 60 women/month, the highest attendance was 107 (15%) in March 2016. Two-thirds of patients were from Kuala Terengganu district. The majority 75% were in reproductive age group of 19 to 35 years. Half of the women, (n=372) self-presented and 18% were referred from Klinik Kesihatan (KK). Though majority (n=476) of these women were in first trimester, the EPAU also saw 134 women in the early second trimester. 15% of the total patients were unsure of their dates upon attendance to EPAU. Thus explained that 65% of all these women presented with per vaginal bleeding, as compared to a very small proportion had abdominal pain (0.2%), passing out product of conception (0.7%) as their primary symptoms. There were 545 women diagnosed with miscarriages, 36 with a pregnancy of unknown location/suspected ectopic pregnancy, 92 patients had viable early pregnancy. Conclusions: This dedicated service has shown much favourable response since inception, reducing a significant bulk of patients who were previously admitted to ward for early pregnancy problems. The unit shall increase uptake and utilization of services to other nearby districts health facilities by increasing awareness and access.