

## Non-Gestational Ovarian Choriocarcinoma – A Teenager’s Nightmare

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### ABSTRACT

**Introduction:** The incidence of ectopic pregnancy is about 27 per 1000 pregnancies. On average, about 6-16% will present to an emergency department with first-trimester bleeding and abdominal pain. Presentation with these symptoms, the simultaneous presence of an adnexal mass and an empty uterus makes a urine pregnancy test important to distinguish whether the symptoms are pregnancy related or not. A positive urine pregnancy test (UPT) with the presence of an adnexal mass is not conclusive of ectopic pregnancy. **Methods:** We present two case reports of non-gestational choriocarcinoma (NGOC), which were initially diagnosed as ectopic pregnancy. **Results:** The first case is a 16-year-old girl, with vaginal bleeding and an adnexal mass due to an ovarian choriocarcinoma, she underwent unilateral oophorectomy and received multiple courses of chemotherapy. She is disease free without evidence of recurrence or metastasis after 12 months of follow-up. The second patient is also 16 years old and presented with an acute abdomen. She was diagnosed as a ruptured luteal cyst and underwent partial oophorectomy. When the pathologist diagnosed a choriocarcinoma she received multiple courses of chemotherapy, but thereafter an advanced disease was diagnosed with evidence of distant metastasis. **Conclusion:** When the UPT is positive, an ectopic pregnancy is not the only diagnosis as the rare entity of non-gestational ovarian choriocarcinoma (NGOC) should be considered.

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## The Concurrent Occult Stress Incontinence Surgery Dilemma – Can a Trial of Pessary Fitting Help us to Decide?

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### ABSTRACT

**Introduction:** The prevalence of occult stress urinary incontinence (SUI) ranges from 6 to 30%. Various methods have been employed during examination or urodynamic testing to demonstrate the presence of occult SUI. Even then, there remains controversy on decision to perform concurrent anti-incontinence procedure at time of surgery. **Objectives:** The aim of the study is to evaluate whether the fitting of vaginal pessaries for women with symptomatic pelvic organ prolapse would provide a measure of severity of occult stress incontinence, to aid decision for concurrent anti incontinence surgery at the time of prolapse repair. **Methods:** We evaluated data from 239 women with pelvic organ prolapse who were fitted with a vaginal ring pessary from 1st January 2013 till 31st December 2017 and retained those pessaries for four months. Data on demography, stage of prolapse, urinary symptoms prior to and four months after pessary fitting was obtained. **Results:** Of the 239 patients who were successfully fitted with ring pessaries, 16.3% SUI prior to the fitting, 89% of these women claim their SUI symptoms improved after. Three women found their symptoms unchanged and only one reported worsening of symptoms. 6.2% percent of women demonstrated occult SUI after pessary fitting but only three found this severe enough to request surgical correction. **Conclusions:** A compulsory short trial of pessary fitting in women with pelvic organ prolapse may be a more representative approach than occult SUI testing during urodynamics alone, in order to guide clinicians on whether a concurrent anti-incontinence procedure is warranted during surgery.