Novel peritoneal vaginoplasty by Luohu II technique performed by paediatric adolescent gynaecology centre in Malaysia: A video presentation

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ABSTRACT

Introduction: Various surgical and non-surgical techniques have been proposed for the creation of a neovagina in women suffering from Mayer–Rokitansky–Küster–Hauser (MRKH) syndrome. **Case Description:** A 25-year-old, single nulliparous woman with primary amenorrhea and normal secondary sexual characteristics had a late diagnosis of MRKH Type 1 at the age of 24 despite seeking medical attention from an early age. Although she had a stable sexual partner for many years, vaginal penetration during sexual intercourse was painful and impossible. Self-vaginal dilatation was also unsuccessful. The patient eventually underwent peritoneal vaginoplasty by Luohu II technique after being seen at a Paediatric Adolescent Gynaecology Centre in Kuala Lumpur, Malaysia. The surgery was uncomplicated and successful. The patient was discharged home 5 days post-operatively with a vagina length of 8 cm. The patient continued self-vaginal dilatation for a month post-operatively and subsequently was able to have normal pain-free sexual intercourse with her partner. **Discussion:** This case introduces and describes the novel peritoneal vaginoplasty by Luohu II technique first established in Luohu, Shenzhen, China for the creation of neovagina in women in MRKH which is minimally-invasive and results in good anatomical and functional outcomes.

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Metastatic choriocarcinoma presenting with cauda equina syndrome: A case study

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ABSTRACT

Introduction: Gestational choriocarcinoma is an infrequent malignant trophoblastic tumor whose characteristic is hypersecretion of Beta-hCG. Some choriocarcinomas have been reported to metastasize to the spine. **Case Description:** A 17-year-old lady, Para 0+1, presented with history of bilateral lower limb weakness, back pain, and urinary incontinence for one-week. Ultrasonography of pelvis was unremarkable. Her Beta-hCG was elevated (282,972 IU/mL). CECT showed small uterine anterior myometrial lesion with distant metastases to mediastinum, lumbar, lungs and brain. MRI showed posterior lumbar vertebrae mass from L1-L5, measuring 4.5 x 5.2 x 13.7 cm (APxWxCC). **Discussion:** Modes of treatment and prognosis is discussed.