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Malaysian Menopause
Society

56th Malaysia-Singapore Congress of Medicine

In conjunction with

MyWoman International Congress 2023

Co-organised by

Academy of Medicine of Malaysia (AMM),

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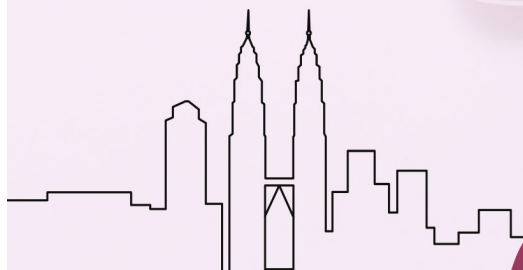
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Malaysian Menopause Society (MMS)

Abstracts

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The Effectiveness of Vaginal Hygiene Wash as Adjunct Treatment in Women with Bacterial Vaginosis, a Randomized Double-blind Controlled Trial with Microbial Analysis and Inflammatory Markers Review

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ABSTRACT

Introduction: Bacterial vaginosis, BV is one of the most common cause of lower genital tract syndrome worldwide among reproductive women. It is associated with malodorous vaginal discharge and often linked to several adverse health outcomes including subfertility, premature labour, pelvic inflammatory disease and Human Immunodeficiency Virus acquisition. Symbiosis has been proven to be the leading cause, in which opportunistic pathogens colonized the vagina against Lactobacillus genus. Treatment remains cumbersome as the symptoms varies and there is risk of recurrence. As an adjunct to current standard treatment with antibiotics, additional treatment with pre/probiotics hold some promise for long-term benefit.

Objective: To see clinical symptoms, cure rate and maintenance effect following antibiotic, supplemented with specially formulated vaginal wash in comparison to placebo. We also randomly analysed DNA qpcr and inflammatory markers from vaginal swab in both arms throughout the visits.

Methodology: Vaginal samples of symptomatic BV women, collected at baseline, end of treatment and one month after completion of treatment. Samples were sent for culture and sensitivity, DNA qPCR and inflammatory markers (IL-6, IL-8, IL-10, IL-1a and TNF-alpha).

Result: Symptoms showed significant improvement in all six domains. Both cure rate and maintenance is superior in treatment group. Benefits of antibiotic with treatment wash is also supported by lower level of BV associated microbiota and lower inflammatory markers trend.

Conclusion: The administration of vaginal hygiene wash that behaves as prebiotic and probiotic amplify the effectiveness treatment of antibiotic to BV patient which improve patient's symptoms.

The Correlation between Cyclooxygenase-2 (COX-2) Expression and Lymphovascular Invasion, Inflammatory Cell Infiltration and Cervical Cancer Stage

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ABSTRACT

Introduction: Human papillomavirus is the cause of cervical cancer inducing the Cyclooxygenase-2 (COX-2) expression resulting in prostaglandin increase, thus stimulating cell proliferation and the production of vascular endothelial growth factor. This study is objected to find out the correlation between COX-2 expression and Lymphovascular Space Invasion, inflammatory cell inflation and cervical cancer stage.

Materials and Methods: This study uses cross sectional design at educational Hospital of Hasanuddin University. COX-2 level examination was performed on 50 biopsy and surgery result on cervical cancer cases through immunohistochemistry. Data were analyzed using chi-square test with significant level of 95%.

Results: Study result indicated that significant correlation is found between COX-2 expression and cervical cancer stage with p value < 0.05. No significant correlation is found between COX-2 expression and Lymphovascular Space Invasion and inflammatory cell inflation with p value > 0.05. No correlation also is found between COX-2 expression and parity, education, profession, combination oral contraception uses ≥ 5 years, sexual partner and smoking history with p value > 0.05.

Discussion: Based on our results it can be concluded that the higher the stage of cervical cancer in line with the expression of COX-2 and examination of COX-2 expression can be used as a marker of cervical malignancy, besides that LVSI and inflammatory cell infiltration not affected on COX-2 expression.

A Rare Case of Torted Pedunculated Leiomyoma

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ABSTRACT

Introduction: Uterine leiomyoma is a result of uterine myometrium overgrowth, and affect 60% women of reproductive age, Torsion of pedunculated myoma is rare with reported incidence of 0.25%.

Case Description: A 42-year-old nulliparous lady presented with severe acute abdominal pain for two days. She was afebrile, BP 122/89, PR 94, abdominal examination revealed huge mass consistent with a 36 weeks gravid uterus with diffuse tenderness, guarding and muscle rigidity. Ultrasound showed presence of free fluid, with complex heterogeneous pelvic mass that seems to be connected to the uterus. Due to her exquisite pain and with differentials of torted ovarian mass in mind, an emergent laparotomy was carried out. Intraoperatively, a 20cm x 20cm pedunculated leiomyoma was identified on a twisted pedicle attached to the fundus of the uterus. Bilateral ovaries and fallopian tubes were normal. A myomectomy of the pedunculated fibroid was carried out.

Discussion & Conclusion: Conditions such as twisted adnexa mass, appendicitis and ruptured ectopic pregnancy have similar presentation with acute abdomen. Multiple imaging modalities has been proposed to aid diagnosis of pedunculated fibroid with modest sensitivity and specificity with inconsistent findings. Ultrasound with Doppler demonstrated a twisted pedicle or decreased vascular supply. Contrasted Computed Tomography may produce poor contrast enhancement and congestion of the vascular pedicle at the site of torsion. In our case the diagnosis of torsion of pedunculated myoma is based on direct intraoperative visualisation. In conclusion, preoperative diagnosis of torted myoma is challenging.

Analysis of Zinc Levels in Pregnancy with and Without Preeclampsia

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ABSTRACT

Introduction: Preeclampsia ranks as Indonesia's second most frequent cause of maternal deaths. A micronutrient imbalance may cause preeclampsia. Zinc is extremely effective during conception and pregnancy, when it is essential for both the embryonic and postnatal stages. The aim of this study is to compare the serum zinc levels between pregnant women with preeclampsia and those who do not.

Methods: The cross-sectional study design was used to construct this analytical investigation. Third-trimester pregnant women with and without a preeclampsia diagnosis made up the study sample. Purposive sampling was used to collect samples. conducted at the educational network hospital and the Wahidin Sudirohusodo Hospital. The ICP-MS method was used to examine samples at the Prodia laboratory. Data were analyzed by the Chi-square test, Mann-Whitney test, and Kruskal Wallis test.

Results: A total of 78 pregnant women were randomly divided into 2 groups including the preeclampsia group (n=38) and the control group (n=40). The preeclampsia group's mean serum Zn level was 48.32 ± 11.62 ng/mL, which was lower than the 50.85 ± 10.12 ng/mL average for pregnant women who did not have preeclampsia. According to the comparison test results, there was no discernible difference in the serum Zn levels between pregnant women who had preeclampsia and those who did not, with a p-value of 0.63 ($p > 0.05$).

Discussion: Zinc deficiency during the third trimester of pregnancy is brought on by a low intake of foods high in zinc and sporadic exposure to cigarette smoke, but has minimal effect on the development of preeclampsia.

The Correlation Between Expression Protein 53 Mutant Type with Cervical Cancer Staging

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ABSTRACT

Introduction: Cervical cancer in Indonesia is the second most common cancer and the second most common cause of cancer death in women after breast cancer, which is 19.2%. Cervical cancer is mostly caused by Human Papilloma Virus (HPV) infection. The HPV virus expresses the oncoprotein E6 which deactivates protein 53 (p53) thereby inhibiting the process of tumor apoptosis and causing uncontrolled proliferation.

Materials & Methods: This study was an observational study with a cross-sectional design to examine the relationship between 53 mutant protein expression and clinical cervical cancer stage. The research was conducted at Dr. Wahidin Sudirohusodo and Network Education Hospital on 34 female samples based on cervical cancer screening results.

Results: The results showed that there was a relationship between the clinical stage of cervical cancer and the expression of 53 mutant protein, where the more advanced the stage of cervical cancer, the higher the expression of 53 mutant protein with a significance value of 0.028 ($p < 0.05$).

Discussion: In cervical cancer the HPV virus causes the formation of a ternary complex between the cellular E3 ubiquitin ligase E6AP and protein 53. This complex causes the tumor suppressor protein 53 to be inactive which corresponds to an increased stage of cervical cancer. So that this research can be used as a consideration for research looking for predictors in determining the stage of cervical cancer.

Outcome of Tension Free Vaginal Tape Obturator for Surgical Management of Stress Urinary Incontinence in Hospital Kuala Lumpur: A Tertiary Hospital Experience

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ABSTRACT

Introduction: Stress urinary incontinence (SUI) is a debilitating condition affecting many women. Mid urethral sling (MUS) has been an established and effective method of treating SUI. In our center, the tension free vaginal tape obturator (TVTO) is the commonest MUS used.

Objectives: To assess the success rate of TVTO in the treatment of SUI and to assess the safety of the procedure.

Methodology: A total of 25 patients were recruited over 3 years for the audit and the outcomes were evaluated after the procedure. Key points of evaluation included relief of symptoms (either partial or complete) at 6 months, as well as procedure-related complications.

Results: 96% of the patients involved in the audit were symptom free post-procedure at 6 months and 4% reported a relative improvement in their symptoms. There were no reported cases of groin pain or mesh erosion.

Conclusion: TVTO is a safe procedure, provides an excellent cure rate with minimal to no complications which is in keeping with data previously published. It should be opted as the preferred choice of surgery in the treatment of SUI.

Evaluation of Urine Culture Before and After Catheter Insertion in Elective and Emergency Caesarean Section

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ABSTRACT

Introduction: Indwelling urinary catheterization is a routine procedure before a cesarean section. The catheterization can cause bacterial colonization of the urine and cause urinary tract infections. Catheter-Associated Urinary Tract Infection (CAUTI) is the cause of 40% of all nosocomial infections worldwide.

Methods: This study is an analytic study with a cross-sectional design at Khadijah Hospital and Fatimah Hospital in Makassar City. Urine culture examination was performed on 99 patients who were going to undergo elective and emergency cesarean sections before and after catheter insertion in cesarean section procedures. Data were analyzed using the Chi-square test, Mc Nemar, Mann-Whitney test, and t-independent test.

Results: The study showed that urinary bacterial colonies before catheterization were found in 18.60% of elective cesarean section patients compared to only 10.71% after catheter insertion. The urinary bacterial colonies before catheterization in 2.33% of emergency cesarean section patients were 14.29% compared to after the catheterization. There was a significant difference in the results of urinary bacterial colonies before and after catheterization in patients with elective cesarean section with a p-value was < 0.05 . However, there was no significant difference in the results of bacterial colonies in the urine between pre and post-catheterization in patients with an emergency cesarean section and a value of $p > 0.05$.

Discussion: There was a change in urine culture before and after catheterization, more colony growth was found in an elective cesarean section than in an emergency cesarean section, and bacterial colony growth was also more common preoperatively than postoperatively.

The Association Between Perineal Laceration with Anatomy and Pelvic Floor Muscle Strength

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ABSTRACT

Introduction: Perineal lacerations are damage to the tissues around the vagina and rectum and can cause disruption of the anatomy and function of the pelvic floor. The incidence of perineal lacerations in vaginal delivery ranges from 53-89%. This anatomical damage and muscle dysfunction can cause urinary incontinence, anal incontinence, and utero-vaginal prolapse. This study will examine the effects of postpartum perineal lacerations on the anatomy and strength of the pelvic floor muscles.

Methods: The sample of this study is primiparous women who experienced perineal lacerations. Sampling was carried out prospectively using the consecutive sampling method. Pelvic floor anatomy and strength were measured using a POP-Q system and a perineometer. The 1st and 2nd degree laceration groups measurements will be compared by using the chi-square and Mann Whitney tests will be carried out.

Results: Of the 123 research samples that met the criteria, a significant difference was found in the strength of the pelvic floor muscles in the first degree perineal laceration and second degree perineal laceration groups at 1 day and 12 weeks postpartum ($p = 0.000$ and $p = 0.042$). For pelvic floor muscle anatomy, the only significant difference found is in perineal body length at 12 weeks postpartum.

Discussion: The degree of perineal laceration is related to the strength of the pelvic floor muscles after delivery and the length of the perineal body 12 weeks postpartum

Pituitary Adenoma in Pregnancy with Progression of Visual Impairment

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ABSTRACT

Introduction: The diagnosis of pituitary adenoma during pregnancy is uncommon. This case report further discusses on potential of medical therapy with benefits of surgical intervention in disease progression of pituitary tumor.

Case description: A 24 year-old primigravida presented with persistent blurring of vision at 20 weeks gestation. She had visited Neurosurgeon in private hospital and MRI brain done reported as enlarged pituitary tumor (15x24x30 mm) with intrasellar, suprasellar component and compression on optic chiasma. Ophthalmology assessment, suggestive of bilateral hemianopia. Nevertheless, she had no other significant symptoms related. An endocrinology evaluation revealed hyperprolactinemia (2,048 ng/mL) and other hormonal markers are within normal range. Decision was made for initiation of dopamine agonist therapy. Unfortunately, she complained of worsening visual disturbance at 29 weeks and urgent delivery was recommended to avoid progressive symptoms. An uneventful caesarean section was performed to avoid further impairment of visual symptoms, and had delivered a baby boy weighing 1.43 kg.

Discussion: Prolactinoma is a prolactin-producing pituitary tumor, approximately 40% of all pituitary tumor. Some may present with headache, visual disturbance or loss in disease progression, abnormal menstruation or amenorrhea and infertility. Approximately 1.3% cases of microprolactinoma and 23.2% of macroprolactinoma respectively may appear with symptoms. As pregnancy will induce hyperprolactinemia with uncertain mechanism, hence a routine pituitary MRI with prolactin level are not recommended during pregnancy. Dopamine agonist treatment is preferably as first line for prolactinoma. The available data for dopamine agonist therapy portrayed a safety profile for treatment in pregnancy particularly for cabergoline and bromocriptine. Theoretically, it will avoid acute and rapid disease progression, unfortunately the diagnosis may set in later in late gestation. The growth of adenoma with compression to optic chiasma in case of macroadenoma will lead to significant visual disturbance or loss in relation to this case. Surgical intervention for macroadenoma would be offered in the event of evidence increased volume tumor with symptoms after conducted a multi-

disciplinary approach in a center with expert pituitary team. Trans-sphenoidal surgical resection is indicated and complement in second trimester, which showing improvement in visual field about 80% of patients. There is no clear evidence suggesting in association of breastfeeding with increment of prolactin level.

Conclusion: Patient may benefit from medical treatment in order to reduce the symptoms and decision of surgical intervention should be made if evidence of worsening visual impairment.

8-Hydroxy-2-Deoxyguanosine Level as A Stress Oxidative Product in Preeclampsia

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ABSTRACT

Introduction: Preeclampsia is a disease characterized by an increase in blood pressure in the second trimester of pregnancy. It can induce short-term and long-term complication in maternal and fetus. Oxidative stress was predicted as a component of placental and endothelial dysfunction and causing DNA damage. One of the main products is 8-OHdG. The "fetal programming" is a concern nowadays, the development of the disease begins from fetal life in the intrauterine which further manifest as a clinical disorder.

Methods: A Cross-sectional study between preeclampsia group (n=41) and control group (n=41). The sample was obtained from umbilical cord during delivery to clarify the correlation between systemic oxidative stress for 8-OHdG and run out using Elisa method.

Results: This study found there were 8-OHdG level was higher in preeclampsia ($3,84 \pm 1,36$) than control ($3,46 \pm 0,63$) but not significantly ($p= 0.531$). Risk factors independently played a role in preeclampsia were BMI ($p=0.026$) and parity (0.024).

Discussion: One of the products of oxidative stress that damages DNA is 8-OHdG. Preeclampsia was shown to have a higher amount of this substance in the umbilical cord than the control group.

A Retrospective Study of Anaemia and Pregnancy Outcomes in HCTM UKM

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ABSTRACT

Introduction: Anaemia is the most common condition affecting pregnant mother worldwide. Severity of anaemia in pregnancy is likely associated with adverse maternal and perinatal outcomes.

Objective: To investigate the maternal and fetal outcomes of mother with anaemia.

Material and methods: This was a retrospective study of antenatal patients who attended the Antenatal Clinic, HCTM and delivered in HCTM between 1st July 2021 until 31st December 2021. Universal sampling was used during sample selection. Nine hundred and sixteen patients were recruited and data were obtained from ObsCentral, OMS and medical records.

Results: The rate of anaemic mother at second trimester was 7.1% (n=65) during the study period and majority among the Malays, 90.8%. The mean age for the anaemic mother was significantly older than non-anaemic mothers (32.88+4.758 years vs 31.48 ± 4.695 years). There were significantly more multiparous mothers in the anaemic group as compared to the non-anaemic group (80% vs 65.7%, p<0.001). Among the anaemic mother at second trimester, 96.9% (n=63) had mild anaemia while only 3.1% (n=2) had moderate anaemia in pregnancy and none of them had severe anaemia. Majority of the anaemia at second trimester were dilutional anaemia 66.2% (n=43) followed by iron deficiency anaemia, 26.2% (n=17) and thalassemia 7.6% (n=5) respectively. There were significant association demonstrated among persistent anaemia mothers as compared to corrected anaemia mothers in incidence of postpartum haemorrhage, postpartum fever, low birth weight babies and NICU admissions.

Conclusion: Anaemia in pregnancy had a great impact toward pregnancy outcomes. Corrected anaemia mother has a better maternal and perinatal outcomes compared to mother with persistent anaemia until delivery. Measures should be taken in all different level of management in order to decrease the adverse maternal and perinatal outcomes.

Regional Anaesthesia for Abdominal Hysterectomy – Is It an Option?

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ABSTRACT

Introduction: General anaesthesia is traditionally preferred over regional anaesthesia for abdominal surgery due to fear of intraoperative visceral pain. However, it carries a myriad of serious complications than the latter.

Case description: We report a case of successful abdominal hysterectomy for a 24-week size uterus with multiple leiomyomas performed under regional anaesthesia in University Malaya Medical Centre, Kuala Lumpur.

A 34-year-old lady with childhood paraplegia, scoliosis (30° to the Right) and restrictive lung disease presented with multiple episodes of severe anaemia secondary to heavy menstrual bleeding requiring admissions and blood transfusions since December 2019. Due to her restrictive lung function (FVC 39%, FEV₁ 40%, FEV₁/FVC 80%) and high perioperative mortality and morbidity she was counselled for abdominal hysterectomy under regional anaesthesia. Intraoperatively, she was given spinal anaesthesia, Pfannenstiel incision and the hysterectomy took 115 minutes, she was discharged well at day 2 post surgery with no complications.

Discussion: A randomized trial (RCT) of 40 women in 2009 done in Montreal, Canada has concluded that spinal anaesthesia has lower postoperative pain score and lower morphine consumption, shorter post-operative care unit admission and shorter duration of hospital stay compared to general anaesthesia. A more recent RCT done in 160 Swedish women in 2011 has also concluded similar findings and spinal anaesthesia has been proven to be more cost-effective than general anaesthesia. Pain was also found to be much reduced in spinal anaesthesia after 1-year post hysterectomy, as reported in a Danish paper in 2012.

Conclusion: Regional anaesthesia is a viable option with encouraging outcome and in line with ERAS (early recovery after surgery) recommendation in patients undergoing abdominal hysterectomy in comparison to general anaesthesia.

Disseminated Peritoneal Leiomyomatosis - A Case Report with Diagnostic Conundrum

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ABSTRACT

Introduction: Extrauterine fibroids often present a diagnostic challenge due to the unusual locations that they arise from. These conditions have in recent years, been linked to laparoscopic myomectomies or hysterectomies and morcellation, with reported incidence between 0.1 and 1%. We present a case of disseminated intraperitoneal leiomyomatosis following laparoscopic myomectomy with morcellation.

Case description: A 42-year-old nulliparous lady with history of laparoscopic myomectomy in 2016 presented with complaint of pelvic discomfort and diagnosed with recurrent fibroid a year later. She opted for medical therapy with Esmya which conferred temporary relieved. Four years later she noticed the mass had rapidly increased in size and underwent Magnetic Resonance guided Focussed ultrasound (MRgFUS) but to no avail. Laparotomy myomectomy revealed multiple mesenteric and peritoneal leiomyomas, largest being 10 cm in diameter. Histopathological examination confirmed the diagnosis of leiomyomatosis.

Discussion: Extrauterine fibroids may arise from nearly any anatomic sites which include benign metastases leiomyoma, disseminated peritoneal leiomyomatosis, intravenous leiomyomatosis, parasitic leiomyoma and retroperitoneal growth. It's exact aetiology and pathophysiology remains unclear. Since its first description in 1952, there were approximately 200 cases reported to date. Due to its unspecific clinical manifestations, diagnosis remained a challenge. With the increasing use of morcellation, there is more evidence of iatrogenic implantation of fibroid tissue being reported.

Conclusion: High index of suspicion is necessary especially for those who had undergone laparoscopic myomectomy or hysterectomy. Although there is lack of consensus on the optimal management for women with extrauterine leiomyoma, surgery has been mainstay of choice as it offers definitive treatment.

Massive Hemorrhage in Second Trimester; A Rare Presentation of Placenta Percreta.

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Introduction: The rising rates of caesarean delivery has been associated with rapid surge of worldwide incidence of placenta accreta spectrum such as placenta percreta. Furthermore, the increasing number of previous caesarean section in a woman increases her risk to have placenta percreta. Therefore, it is imperative for obstetricians to diagnose placenta accreta spectrum. Reduction of maternal morbidity and mortality has been shown with proper antenatal care and management. However, if it remains undiagnosed placenta accreta spectrum could be life-threatening, resulting from catastrophic obstetric haemorrhage.

Objective: We report here a case of massive hemorrhage in a second trimester miscarriage secondary to placenta percreta which required life-saving hysterectomy.

Case description: A 26-year-old rhesus negative Malay woman in her third pregnancy with previous two caesarean deliveries presented to casualty at 17 weeks of gestation with complains of abdominal pain and pervaginal bleeding. Ultrasound revealed low lying placenta with suspicion of accreta. Regrettably, she was in hemorrhagic shock, resuscitated and taken to the operation theatre for emergency laparotomy, requiring life-saving hysterectomy. Histology confirmed placenta percreta. Patient recovered well post-surgery.

Conclusion: Prompt assessment and risk identification is vital in early pregnancy for women at high risk of placenta percreta which can be catastrophic if it is undetected. These women may need screening to rule out placenta accreta spectrum at earlier gestation