

Episiotomy Scar Endometriosis a Rare Case Report

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Article History	Abstract
Received: 06 June 2023 Revised: 05 Sept 2023 Accepted: 25 Nov 2023 CC License CC-BY-NC-SA 4.0	<i>Endometriosis is defined as the presence of ectopic endometrial tissue outside the uterine cavity. It is a benign condition commonly observed in women of the reproductive age group. It can occur in both pelvic and extra-pelvic sites. Moreover, pelvic endometriosis is relatively common, as compared to extra-pelvic endometriosis. The most frequent site for pelvic endometriosis is ovary. It can also affect rectum, uterosacral ligaments, rectovaginal septum, urinary bladder. Extra-pelvic endometriosis is rare and when it occurs, does so more frequently in surgical scar sites, especially in caesarean section scar. Endometriosis in an episiotomy scar is extremely rare but can lead to significant morbidity in patients due to local infiltration. This condition can be diagnosed by the presence of the classical clinical triad of history of episiotomy, tender nodule at the scar site and cyclical pain. Surgical excision is very useful to assess the deeper extension of the lesion. Herein, we report one such case of episiotomy scar endometriosis.</i> Keywords: Episiotomy Scar Endometriosis

1. Introduction

Endometriosis is a chronic, benign, estrogen dependent disorder where there is presence of normal endometrial glands and stroma outside the uterine endometrial cavity. It generally occurs in pelvic and extra pelvic sites. Episiotomy scar endometriosis is extremely rare (0.01%) (1) lead to significant morbidity in patient due to local infiltration.

Case Report

35 year old patient who had two previous normal vaginal delivery with right mediolateral episiotomy presented to surgery op with nodule, pain in the perineal (episiotomy) scar, which increased during her menstrual cycle .

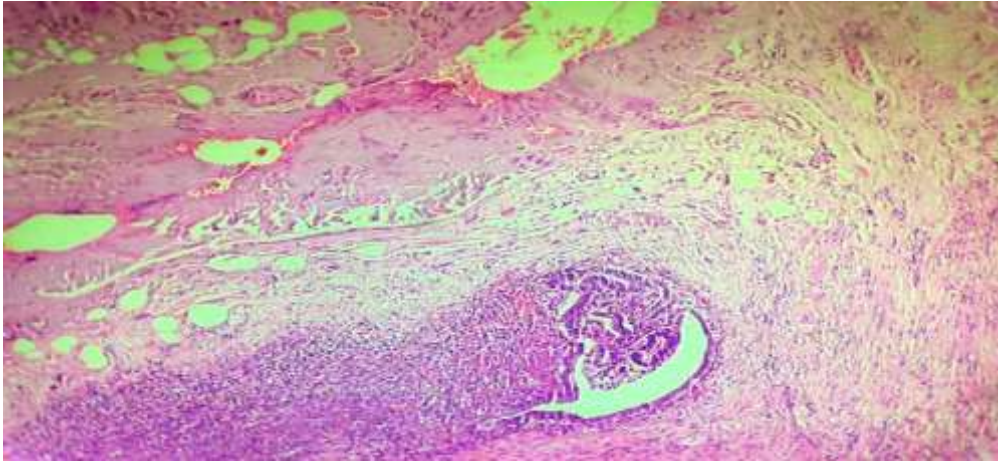
Gross

Received 3 Grey black nodular tissue bits. Cut surface appears firm, hemorrhagic.



Microscopic Examination

Section studied shows fibrosed tissue composed of endometrial glands and stroma embedded within it. Some of the glands are dilated and filled with neutrophilic exudates. Also seen are scattered lymphoplasmacytic infiltrate, hemosiderin laden macrophages and congested blood vessels. Fibroadipose tissue and skeletal muscle bundles are also included in the biopsy. No evidence of any atypia.



2. Results and Discussion

The etiology of scar endometriosis is explained by mechanical transplantation of endometrial cells to open scar during delivery. Thus, prompt diagnosis of this condition provides symptomatic relief. Careful histopathological examination of the tissue not only confirms the diagnosis, it also excludes the possibility of malignancy. Three cases of malignant transformation have been reported in episiotomy scar endometriosis⁽²⁾ High index of suspicion should be kept in mind with classical clinical symptoms.

3. Conclusion

Since it is a rare entity, high index of suspicion is needed to diagnose. Early diagnosis and surgery can reduce morbidity.

References:

1. Dadhwal V et al, . 2018;74(3):297-299. <https://doi.org/10.1016/j.mjafi.2017.064>
2. Han L et al, Res. 2016 Jan 12;9:1. <https://doi.org/10.1186/s13048-016-0211-5>. PMID: 26754828; PMCID: