

## Bilateral Ovarian Hemorrhage in a Patient under Anticoagulant Therapy

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### Clinical Image

The frequency of haemorrhagic ovarian cysts is 1% among women under anticoagulation. This condition is typically seen when the International Normalized Ratio is superior to 4. The most feared complication is rupture which can be life-threatening [1].

Haemorrhagic ovarian cysts may be revealed by abdominal pain, fever, urinary tract disorders, nausea, and vomiting [1]. The differential diagnosis should include other causes of acute abdominal pain and highly attenuated adnexal masses.



**Figure:** Axial non-contrast pelvis CT scan in a 36 years-old patient under oral anticoagulation revealing enlargement of both ovaries containing hyperdense components consistent with hemorrhage, associated with peritoneal fat stranding (red arrow).

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On CT, ovarian hematomas appear as haemorrhages in ovarian cysts and highly attenuated enlarged ovaries [2]. The existence of active bleeding and hemoperitoneum necessitates urgent intervention [1].

The treatment aims to control the bleeding and save the ovaries. Conservative management is adopted in patients with stable hemodynamics. In case of active bleeding or diagnosis dilemma surgery is indicated. Reversal of anticoagulation and restarting it postoperatively should be discussed depending on the risk of rebleeding [1].

### References

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