Endometrial Polyps Often Missed On Transvaginal Ultrasound

By Doug Brunk

From the annual meeting of the American Institute of Ultrasound in Medicine

SAN DIEGO — Almost half of endometrial polyps seen on sono-hysterography were missed on transvaginal ultrasound, results from a large single-center study showed.

The factors associated with lack of detection on ultrasound included smaller polyp size, multiplicity, submucosal fibroids, location of polyps, and blood flow to the polyps, Dr. Alex Hartman said at the meeting.

Between January and May of 2009, Dr. Hartman and his associates performed a blinded retrospective case study of 800 consecutive patients (mean age, 48 years) diagnosed with endometrial polyps on sono-hysterography who also had the transvaginal sono-hysterography within 48 hours of the sono-hysterography.

The researchers assessed multiple factors, including patient age, size of the polyp, number of polyps, submucosal fibroids, intramural fibroids, adeno-myo-carcoma of the polyp, blood flow, abnormal bleeding, endometrial thickness, polycystic ovaries, and fertility status. Pearson’s chi-square tests and t-tests were used to compare the two groups.

Dr. Hartman, medical director of True North Imaging in Thornhill, Ont., went on to report that 433 patients (54%) with polyps diagnosed on ultrasound had their polyps seen on trans-vaginal ultrasound. The factors significantly associated with detection of a polyp on preliminary transvaginal ultrasound included larger polyp size (in general, the larger, the more likely seen); the presence of multiple polyps; the absence of submucosal fibroids; fundal location of the polyp; and the presence of blood flow to the polyp.

“Over the years, we found that polyps that were located in the fundus were much easier to see,” Dr. Hartman commented. “The ones that were confined to the lower uterine segment and midbody were much harder to detect.”

He also noted that 39 of the 800 patients (3%) also had submucosal fibroids. “Interestingly, only one-third of the polyps in these patients were diagnosed in the preliminary ultrasound study,” Dr. Hartman said. “So the presence of submucosal fibroids made it very difficult to see polyps on regular ultrasound.”

Right-Sided Ovarian Cysts In Teens Tend To Resolve

By Robert Finn

From the annual meeting of the North American Society for Pediatric and Adolescent Gynecology

LAS VEGAS — It’s well known that most ovarian cysts in adolescents resolve spontaneously, but for some unknown reason, those on the right side are far more likely to resolve than those on the left, a retrospective study of 151 teenagers girl showed.

Investigators at the University of Missouri–Kansas City determined that after adjustment for potential confounders, cysts on the left side were 116 times less likely to resolve without surgery than those on the right.

“You’d think that a right- or left-sided cyst wouldn’t matter. It would spontaneously regress independently of side. But we found that a right-sided cyst was a predictor of cyst resolution,” said coauthor Dr. Jeffrey Wall.

Dr. Wall and lead author Dr. Timothy Chad McCormick conducted the study by reviewing charts from 2000 to 2008 of all adolescent females with a diagnostic ICD-9 code consistent with an ovarian cyst or mass. There were 342 such patients. For the purposes of the study, the investigators included only 151 of those patients—those who had been followed until documented resolution or who underwent surgical intervention for nonresolution.

Of those patients, 91 (60%) had their cysts resolve spontaneously, while the others required surgery.

The researchers conducted a multi-variate regression analysis that adjusted for age at diagnosis, race, cyst size, cyst volume, cyst side, and cyst complexity. Only two factors emerged as statistically significant independent predictors of resolution: cyst side and cyst size. The odds ratio for left-sided cysts was 116.39, indicating a far greater risk for left-sided cysts than for those on the right. The odds ratio for right cyst size was 0.42, indicating that right-sided cysts under 7 cm in size were 58% more likely to resolve spontaneously than those on the left.

Major Finding: In adolescents, ovarian cysts on the left side are 116 times less likely to resolve spontaneously than those on the right.

Data Source: Retrospective analysis of data from 151 patients, aged 13-18 years.

Disclosures: None was reported.