

Ureter adhesion to the fibroid

Brahmana Askandar Tjokropawiro 

Obstetrics and Gynecology,
Universitas Airlangga Fakultas
Kedokteran, Surabaya, Indonesia

Correspondence to
Dr Brahmana Askandar
Tjokropawiro;
brahmanaaskandar@gmail.com

Accepted 3 November 2023

DESCRIPTION

The prevalence of uterine fibroids ranges from 40% to 60% among women under 35 years and from 70% to 80% among women over 50 years.¹ The ureter is a retroperitoneal structure in the pelvis that may be injured during surgery for fibroids. The incidence of ureteric injury in patients with fibroids that underwent hysterectomy was 0.64%.² A large fibroid may compress the ureter and cause hydronephrosis. A retroperitoneal fibroid is a rare case, and the diagnosis is made intraoperatively.³ Thus, we should be more careful with the ureter when performing retroperitoneal fibroid surgery, as the ureter may be attached to the fibroid.

We report a case of ureter adhesion to a retroperitoneal fibroid. A woman around 40 years of age with fibroid underwent hysterectomy. Intraoperatively, a large fibroid was seen on the left side of the uterus ([figure 1](#)). The fibroid grew in the left pelvic retroperitoneal space. After opening the retroperitoneal space, we identified the ureter attached to the fibroid. The ureter was dissected and hysterectomy was successfully performed. The pathological result revealed a fibroid.

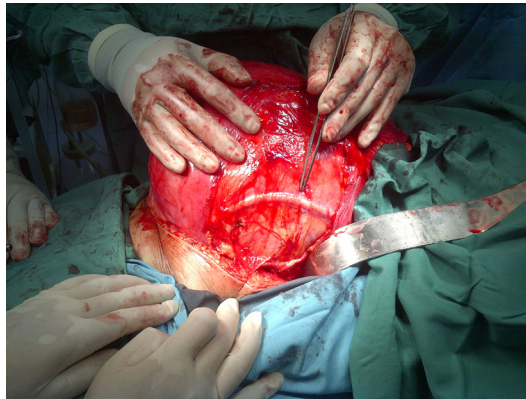


Figure 1 The ureter attached to the retroperitoneal fibroid.

Learning points

- ▶ In large fibroids, particularly retroperitoneal fibroids, the anatomy of the ureter may be distorted.
- ▶ Opening the retroperitoneal space and identifying or isolating the ureter is an important step during surgery for fibroids to prevent injury to the ureter.

Contributors The following authors were responsible for drafting of the text, sourcing and editing of clinical images, investigation result, drawing original diagrams and algorithms, and critical revision for important intellectual content: BAT. The following authors gave final approval of the manuscript: BAT.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient consent for publication Consent obtained directly from patient(s)

Provenance and peer review Not commissioned; externally peer reviewed.

Case reports provide a valuable learning resource for the scientific community and can indicate areas of interest for future research. They should not be used in isolation to guide treatment choices or public health policy.

ORCID iD

Brahmana Askandar Tjokropawiro <http://orcid.org/0000-0003-1658-3477>

REFERENCES

- 1 Cheng L-C, Li H-Y, Gong Q-Q, *et al*. Global, regional, and national burden of uterine fibroids in the last 30 years: estimates from the 1990 to 2019 global burden of disease study. *Front Med (Lausanne)* 2022;9:1003605.
- 2 Kiran A, Hilton P, Cromwell DA. The risk of ureteric injury associated with hysterectomy: a 10-year retrospective cohort study. *BJOG* 2016;123:1184–91.
- 3 Mahendru R, Gaba G, Yadav S, *et al*. A rare case of retroperitoneal leiomyoma. *Case Rep Surg* 2012;2012:425280.



© BMJ Publishing Group Limited 2023. No commercial re-use. See rights and permissions. Published by BMJ.

To cite: Tjokropawiro BA. *BMJ Case Rep* 2023;16:e257862. doi:10.1136/bcr-2023-257862

Copyright 2023 BMJ Publishing Group. All rights reserved. For permission to reuse any of this content visit <https://www.bmj.com/company/products-services/rights-and-licensing/permissions/>
BMJ Case Report Fellows may re-use this article for personal use and teaching without any further permission.

Become a Fellow of BMJ Case Reports today and you can:

- ▶ Submit as many cases as you like
- ▶ Enjoy fast sympathetic peer review and rapid publication of accepted articles
- ▶ Access all the published articles
- ▶ Re-use any of the published material for personal use and teaching without further permission

Customer Service

If you have any further queries about your subscription, please contact our customer services team on +44 (0) 207111 1105 or via email at support@bmj.com.

Visit casereports.bmj.com for more articles like this and to become a Fellow