

Accessory Spleen in Pelvis Causing Lower Abdominal Pain: A Rare Case Report

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INTRODUCTION

Accessory spleen usually remain asymptomatic and are found in 10% of normal population .They are not larger than 3 cm and should not be confused with polysplenic syndrome. We report a case report of accidentally discovered accessory spleen from pelvis.

CASE REPORT

A fifty year old woman was taken up for abdominal hysterectomy for fibroid uterus having left lower abdominal pain. During dissection a well encapsulated solid mass was seen attached to small bowel in the pelvis. This mass was 2 cm by 1 cm in size and adhering to wall of small bowel. This was separated from bowel tissue and sent for histopathology. Bowel was closed primarily and after thorough exploration of abdomen, abdominal hysterectomy was performed. Biopsy report showed ectopic splenic tissue with changes of fibrocongestive spleen.

DISCUSSION

Embryologically spleen develops from series of lobules which coalesce during embryogenesis. Incomplete fusion leads to main mass and several smaller accessory spleen. Accessory spleen usually remain asymptomatic and most commonly found near splenic hilum and rarest being retroperitoneum [1]. Vural [2] described a case of mobile mass in left lower quadrant preoperatively diagnosed by ultrasound which on surgery was found to be accessory pelvic spleen. We conclude that meticulous inspection of abdomen should be done during operation in these cases and ectopic spleen should be thought of and looked.

REFERENCES

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