

ABSTRACT

Objective: To compare the clinical and histological diagnosis of adnexal masses excised at Kenyatta National Hospital, Nairobi.

Study design: This was a descriptive cross-sectional study.

Results: The mean age of the patients was 29.5 years with a range of 20-45 years, and 98.8% of the patients were literate. The mean age at menarche was 15.1 years and 71.6 % had been sexually active by 18 years of age. There was no family history of any form of cancer in 96.8% of the patients. The most commonly diagnosed adnexal mass by clinical methods was ectopic pregnancy 59.3% and tubo-ovarian masses 24.7%. The main complaint usually was lower abdominal pain alone 33.3%, or accompanied by vaginal and/or urethral discharge 46.9%. In Intra-operative analysis, the most common diagnosis was also found to be ectopic pregnancy 56.8% followed by benign cysts 19.8% and (non-neoplastic) functional cysts 13.6%. The mass was noticed to be unilateral 86.4%, cystic 86.4%, freely mobile 71.6% and lacked ascites 98.8%.

The most important finding of this study was the histological diagnosis which confirmed ectopic in pregnancy 49.4%, functional cysts comprised 25.9%. The other findings were pelvic inflammatory disease 7.4%, serous cystadenoma 6.2%, fibroid 3.7% and serous cystadenocarcinoma 1.2%.

CONCLUSION

Clinical diagnosis is important in detecting ectopic pregnancy confirmed by histological diagnosis. Most of the adnexal masses were either non-neoplastic or benign. The conclusive determination of other adnexal masses is not definitive and requires physicians high index of suspicion whenever a complaint of lower abdominal pain is raised. Ultrasound is a reliable pre-operative investigative tool.