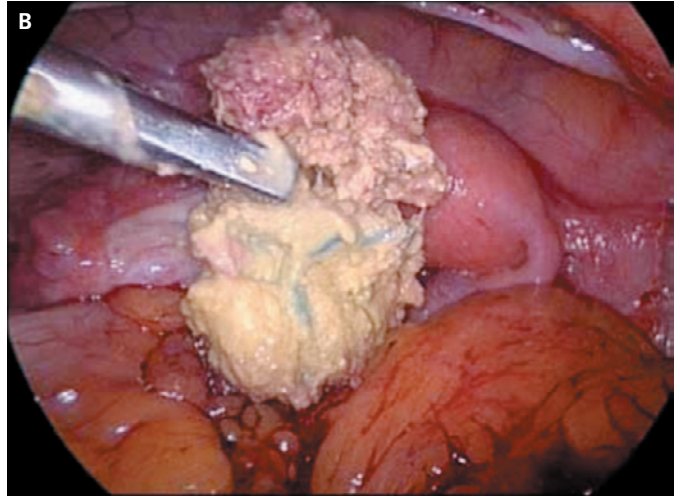


IMAGES IN CLINICAL MEDICINE

Gossypiboma in the Pouch of Douglas



A 63-YEAR-OLD WOMAN PRESENTED WITH A 1-YEAR HISTORY OF VAGUE pelvic and back pain. She had undergone laparoscopic surgery of the fallopian tubes 27 years earlier owing to infertility. Magnetic resonance imaging, T2 sagittal view, of the abdomen showed an 8-cm pelvic mass (Panel A). Because of concern about ovarian carcinoma, she underwent an exploratory laparoscopy, which revealed extensive adhesions of the lower abdomen and a yellow, dense mass involving the entire pouch of Douglas (Panel B). Attempts to dissect the mass led to its rupture, revealing contents that were suggestive of a dermoid cyst. However, on aspiration of the contents, an old swab was identified and removed. The term for a left-behind surgical sponge is gossypiboma, derived from the Latin *gossypium* (cotton) and the Swahili *boma* (place of concealment). The patient had an uneventful recovery and was discharged 2 days later.

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Marc Possover, M.D., Ph.D.

Hirslanden Clinic
CH-8032 Zurich, Switzerland

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CORRECTION

Gossypiboma in the Pouch of Douglas

Gossypiboma in the Pouch of Douglas . The third sentence of the legend should have read, "Magnetic resonance imaging, T2 sagittal view, of the abdomen," rather than "Computed tomography of the abdomen." The article has been corrected at NEJM.org.