Unusual Presentation of Gynecologic Conditions: Be Very Mindful

G. Willy Davila

Gynecologic conditions can be very straightforward to diagnose, but can also present with very unusual and challenging symptomatology and physical findings. In this issue of the Journal of Clinical Gynecology and Obstetrics (JCGO) we publish a case series of receptor-mediated neuroimmune effects of ovarian teratomas [1]. The young women presented with various neurologic findings including confusion, delirium, altered speech, dyskinesia and seizures. Pelvic imaging revealed adnexal masses which upon removal contained teratomas. Excision of the adnexal mass led to improvement in neuropsychiatric functioning. The condition of N-methyl-D-aspartate (NMDA) receptor autoimmune encephalitis was recognized as a clinical entity in 2007. After reading this paper, one can easily recognize the fact that in the past (and even now) many young women were likely treated as having a primary neurologic or psychiatric condition, and likely did not respond to traditional therapy. Certainly, some underwent very invasive therapies and may have even been institutionalized and never again led a normal life as the teratomas went undiagnosed.

As I perused the literature on this subject, it became clear that the majority of the published literature is in the neurologic or psychiatric literature. Very little is found in the obstetrics and gynecology (OBGYN) literature. This explains why most readers of this journal may never have heard of this condition.

As the primary medical care providers to women, OBGYN clinicians should be familiar with conditions that can lead to serious consequences on women’s health. One can think of atypical presentations of severe pre-eclampsia, undiagnosed advanced pregnancy in a young woman, an undiagnosed ovarian cancer being treated as a gastrointestinal (GI) condition, among many other gynecologic conditions that should not be missed by a woman’s OBGYN clinicians. Unfortunately, atypical presentations frequently lead to a delayed diagnosis and even ineffective therapy.

Journals such as the JCGO have many missions. Top among them is fostering of the education of OBGYN clinicians about the state-of-the-art management of common OBGYN conditions by sharing new research data. In addition, not far from the top is increasing awareness of clinical conditions which can have serious consequences on women’s lives, such that clinical care can be directed at optimizing clinical outcomes. As an old professor of mine in Texas used to say: “Not all that gallops is a horse. Sometimes, it can be a zebra!”

Acknowledgments

None to declare.

Financial Disclosure

None to declare.

Conflict of Interest

None to declare.

Data Availability

The author declares that data supporting the findings of this study are available within the article.

Reference