Splenic Cyst Manifesting as Gastric Outlet Obstruction

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A 34-year old woman with history of right oophorectomy secondary to ovarian cysts presented with a 1-week history of nausea and vomiting. Abdominal exam was only remarkable for splenomegaly and computed-tomography of the abdomen demonstrated a 10.5 x 9.0 x 8.8 cm splenic cyst. (Figures 1 and 2) It was theorized that her symptoms were secondary to gastric outlet obstruction from the enlarged spleen.

She subsequently underwent ultrasound guided drainage of the cyst which resulted in 500 mL of brown thin fluid removed with sclerosis of the cyst. No organisms were isolated upon culture of the fluid. The patient’s clinical condition improved for discharge. Given the possible need for splenectomy should the cyst recur, the patient received immunizations for Haemophilus influenzae type B, Pneumococcus, and Meningococcus prior to discharge.

Note: All authors had access to the clinical data related to this patient’s care and shared equally in the preparation of this manuscript.

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The authors and/or their spouses/significant others have no financial interests to disclose.

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