

## TEXTILOMA: IMAGISTIC SIGNS

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**Introduction:** Retained textile surgical meshes (TSM) which are left unintentionally in abdominal cavity are a problem despite precautions measures. Being qualified as major medical error, they are rarely reported. The natural evolution of condition is indistinct, whereas diagnosis and treatment are difficult.

**Keywords:** textiloma, ultrasound, computed tomography

**Purpose:** To determine typical imagistic signs of textile surgical meshes with other surgical and non-surgical pathologies

**Material and methods:** During a 17 year period (2003-2020) nineteen patients with retained TSM were admitted in two Departments of Surgery. Males – 6, females – 13, with median age 32.8 ( $\pm 3.1$ ) years. Time to readmission after first surgery ranged from 5 days to 15 years. Imaging studies included abdominal radiography, ultrasound scan, and computed tomography.

**Results:** Transabdominal ultrasound had shown a well-defined mass with a strong posterior shadow. Computed tomography revealed a well-defined “spongiform” mass with gas bubbles inside. Seventeen patients underwent repeated surgery with removing of surgical meshes and drainage of contaminated intra-abdominal collection, one – partial gastrectomy for suspected tumor, and one hysterectomy with bilateral anexectomy for bleeding.



**Conclusions:** Retained textile surgical mesh should be considered as a possible diagnosis in any postoperative patient, who presents with signs of peritoneal infection or with abdominal mass. Repeated surgery is usually required for removing surgical meshes from abdominal cavity.