

Acute left non-haemorrhagic adrenal infarction in pregnancy: magnetic resonance imaging findings

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A 30-year-old patient, at 31 weeks' gestation, presented with acute severe abdominal pain. Non-contrast abdominal magnetic resonance imaging showed an enlarged left adrenal gland with increased T2 signal intensity and free fluid was noted (**Figure 1**). Restricted diffusion in the left adrenal gland was demonstrated (**Figure 2**), confirming the diagnosis of non-haemorrhagic adrenal infarction without a haemorrhagic component. The adrenal gland normalised after the patient was given anticoagulants.

Non-haemorrhagic adrenal infarction is an extremely rare cause of abdominal pain in pregnancy (Tschuertz et al, 2023). The aetiology of non-haemorrhagic adrenal infarction remains unclear, but is linked to pregnancy-related hypercoagulability (Glomski et al, 2018). Magnetic resonance imaging findings, especially diffusion-weighted imaging, are pivotal for definitive diagnosis of non-haemorrhagic adrenal infarction (Lie et al, 2022).

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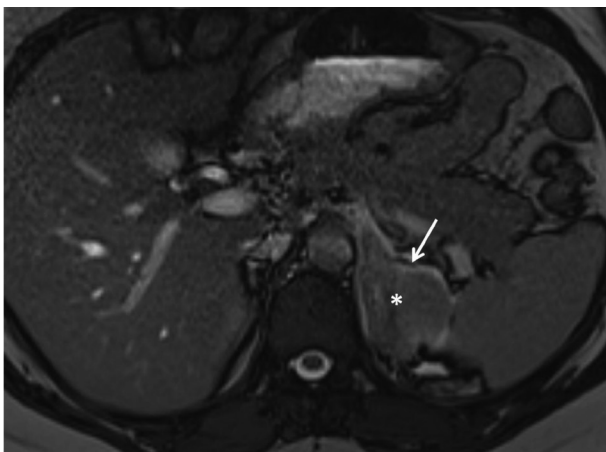


Figure 1. Axial T2-weighted image shows diffusely enlarged left adrenal gland (asterisk), and hyperintensity surrounding left adrenal representing oedema (arrow).

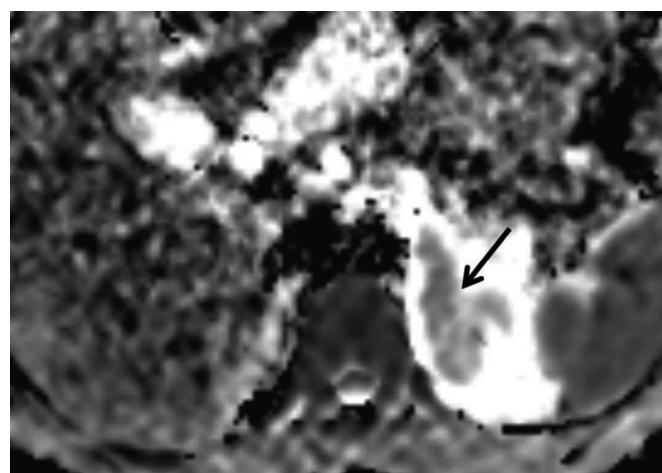


Figure 2. Apparent diffusion coefficient map demonstrating restricted diffusion of the left adrenal gland (arrow).