E-Poster Abstracts

A Case of Synchronous Female Genital Tract Malignancies with Dissimilar Histology: The Ovary and Endometrium

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Introduction: All though the simultaneous development of multiple primary cancers in the upper female genital tract is a known phenomenon it's a rare event. Carcinoma of the ovary and the endometrium can occur simultaneously in about 5% of endometrial malignancies and about 10% of ovarian carcinoma. Though the diagnosis either as a separate primary or as a metastatic tumour is difficult, careful assessment of gross, histological and immunohistochemical features becomes helpful. We present a case of synchronous tumours of the ovary and endometrium with different histology.

Case report: A 55 year old mother of one, menopaused for four years presented with abdominal distension, abdominal pain and loss of appetite for three months. USS Pelvis revealed a thick walled, multi-locular complex cyst measuring 9 x 8 cm, with cystic and solid areas arising from right ovary. Her CA-125 was 234 U/L. Since she had a high RMI index underwent a staging laparotmy. She had a right sided musinous ovarian cyst, omentum, undersurface of the diaphragm and liver was normal. There were neither enlarged pelvic or para-aortic lymph nodes, nor the evidence of psudomixoma peritoni. She underwent hysterectomy, bilateral Salpingo-oophorectomy, Infra-colic Omentectomy and Appendisectomy. The histopathology report revealed a well differentiated musinous cystadenocarcinoma of the right ovary. Endometrium showed a mixed type picture — foci of endometroid squamous differentiation and musicnous adenocarcinoma with papillary glandular architecture and was infiltrating up to 20% of the myometrium. Histology of the cervix showed an adenocarcinoma of the endocervical type with early stromal invasion. The appendix, Omentum and the contra lateral ovary were devoid of malignant involvement. She is currently on follow up and completed her first cycle of radiotherapy.

Discussion: The synchronous origin of carcinoma confined to the ovary and endometrium is an unusual condition and presents a diagnostic and therapeutic dilemma. Differentiation between metastatic diseases and synchronous tumours is important because it influences on cancer staging, management, and prognosis. Relatively early presentation in this lady helped in early detection and treatment. It is thought that patients with synchronous dual primary carcinomas may have a more favourable prognosis than that with advanced metastatic carcinomas.

¹Cancer Council Australia. Draft clinical management guidelines for the prevention of cervical cancer: Public consultation draft. *Cancer Guidelines Wiki*, [cited 11th May 2016]. Available from http://wild. cancer. org.au/australia/Guidelines: Cervical cancer/Prevention.