



UTERINE LEIOMYOSARCOMA- A RARE DIAGNOSIS

Oncology

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ABSTRACT

Leiomyosarcoma is a rare uterine malignancy arising from the smooth muscle of uterine wall. Here is a case report of a 34-year-old female who presented with pain abdomen and was diagnosed with leiomyosarcoma of the uterus. The diagnosis of leiomyosarcoma is made by histopathological examination. The prognosis depends on the mitotic index and the extent of the disease.

KEYWORDS

Uterine leiomyosarcoma, fibroid, mitotic index

INTRODUCTION

Leiomyosarcoma is a rare uterine malignancy arising from the smooth muscle of the uterine wall. It accounts for almost 2-5% of all uterine malignancies.³ The highest prevalence is seen in pre and perimenopausal women with an average age of diagnosis being 51 years. It may also present with vague symptoms that mimic other benign uterine conditions. There have been reports of sarcomatous transformation in benign uterine leiomyomas.

CASE STUDY

A 34-year-old, P1L1 presented with complaints of pain abdomen since 20 days, sudden in onset, more over the left lower abdomen. She had no comorbidities. Vitals were stable. On per abdomen examination, 2 masses were felt. USG abdomen and pelvis showed a mixed irregular mass of 10.7 x 9.3 cm which was followed up by CT abdomen and pelvis that showed multiple fibroids with the largest fibroid measuring 6.1 x 5.2cm in the anterior myometrium with few eccentric foci of calcifications. Intraoperatively 2 masses were seen. One was a subserosal fibroid. Another mass was seen in the left pelvis lying over the ureter, adherent to the uterine artery and posterior wall of the bladder. She then underwent total abdominal hysterectomy + left salpingo-oophorectomy + left DJ stenting. Radiation oncology reference was sought and advise followed but there was loss to follow up.

DISCUSSION

Uterine leiomyosarcoma is a rare malignant tumor arising from the myometrium. They account to around 1% of uterine malignancies. Diagnosis of uterine leiomyosarcoma is suggestive of poor outcome for most of the patients, and complete hysterectomy with clean tumor margins is the goal of surgical therapy.⁵



Figure 1: Gross specimen of uterus with the mass

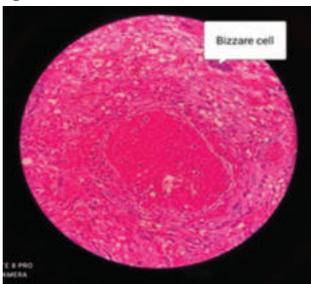


Figure 2: Histopathology of mitotic figures with bizarre cells

CONCLUSION

Uterine sarcomas are not suitable for screening because of their rarity. The prognosis of the disease depends on the extent of disease and the mitotic index.³ Because of its characteristics, this tumor has a poor prognosis.

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