



## Case Report: “12 years female having a small ovarian cyst converted into ovarian mucinous carcinoma diagnosed at the age of 25 years”

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**ABSTRACT :-** Actually even a small cyst detected in the ovary at any age can cause ovarian cancer after some years. Though on sonography which type of cyst will get converted into malignant one, but ovarian lesion should be removed to avoid future complications. Though it is proved that 5 to 10 percent of women have surgery to remove an ovarian cyst, but only 13 to 21 percent of those are cancerous.

Though serous type of cyst are more prone to change in cancerous lesion. The other main types include mucinous, endometrioid and clear cell.

It is also fact that, on sonography it can't be detected whether the cyst is benign or malignant, contemporary management of ovarian cysts in the adolescent consists of conservative management, whether expectant, medical or surgical. The most common ovarian cysts in adolescence are functional and often regress without further treatment.

**Keywords :-** Ovarian cyst, CA-125, Mucinous adenocarcinoma, Menstruation, abdominal pain, chemotherapy, lymphnodes, other tumor markers.

### I. INTRODUCTION :-

12 year female patient presented with mild to moderate left side abdominal pain, abdominal pressure and bloating Freuent urination. During, physical examination pain on left side of abdomen during palpation

With routine blood test – CBC – Normal, ESR – Normal, kidney function test – normal, Liver function test - normal, CA- 125 – 18.6 U/ml (Normal range less than 46 U/ml).

On sonography – all sonological findings normal, except 0.5 x 0.5 cm cystic tesicn was reported.

There are few types of ovarian cyst and tumors mainly

1) Ovarian endometriomas can develops due to endometriosis, that is endometrial tissue lining the uterus to grow in other areas if this tissue attaches to one of the ovaries, an ovarian endometrioma can form.

2) Ovarian cystadenomas are liquid filled cysts that develop from cells on the surface of ovary most of the cystadenomas are benign in condition, but very rarely cystadenomas are cancerous.

3) When dermoid cysts, or teratomas are mude up of variety of different cell types. They are known as ovarian germ cell tumor. Usually these tumors are benlgn, but occasionally they are malignant.

### 4) Advice from Gynecologist :-

At the age of 12 years, though the cyst was small Gynecologist convinced her parents for removal of that cystic ovarian lesion. But parents refuse for this surgical treatment at that age. With symptomatic treatment that girl got relief, but at the time of menstruation she was still complaining of abdominal pain.

After some symptomatic pain she became well settled, there was abdominal pain during menstruation. Her parents or she herself kept to follow up about cyst like by doing sonography whether it was increasing or not. She get relax and start her routine.

How she has been diagnosed as ovarian cancer of left ovary at the age of 26 years?

The girl was intelligent and got admission in Govt. Medical College Nagpur she has completed her MBBS.

During she complain of severe abdominal pain on left side, burning micturation with frequent urination, loss of appetite.

On Sonography.

8.5 x 7 cm cyst was found

Some lymphnodes were slightly enlarged

Ascites was present

On Blood Test – CBC – Hb - 9.8 ml

WBC count – 12800/cmm predominantly Neutrophis seen.

CA 125 – **980 U/ml**



### **Ascstic fluid Examination**

On microscopy – Many Nuetrophils seen against proteinaceous background

**Cytology** – Suggestive of Ovarian Malignancy

**Histopathology Report** – Findings suggestive of Adenocarcinoma

The patient after surgical treatment, taking chemotherapy but according to medical science survival rate is very less in ovarian malignancy.

Chances of ovarian cyst converting into malignancy are 12 to 20 percent.

## **II. CONCLUSION :-**

Age of female patient and size of cyst though not in favour of malignancy, strict follow up of cystic changes should be kept by yearly CA-125 levels and change on sonography. Whether cyst is increasing in size or not.

Consult your Gynecologist if you are feeling abdominal related pain, menstrualual pain or burning and frequent urination.

Follow up by sonography once in a year to know the size changes of ovarian lesion or to see any other related complications.

Though percentage of converting being cystic lesion to malignancy is less, still it should not be ignore at any cost.

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