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A rare case of vaginal sarcoma in pregnancy-A diagnostic dilemma

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ABSTRACT

INTRODUCTION- Vaginal sarcoma is an extremely rare diagnosis constituting 2-3% of malignant neoplasm in female genital tract¹. The etiology is currently unknown and unrelated to pregnancy. DES exposure, HPV infection, family history, cervical cancer may be the cause in some women, still influence of pregnancy on initiation, promotion and development of sarcoma is unclear².

CASE REPORT -A 20 year old primigravida with 31 weeks pregnancy presented with lower abdominal pain and on & off urinary retention from 1 month, for which she was referred to DR. BRAMH Raipur. Her vitals were stable. P/S & P/V- A 10X10 cm firm mass with regular margin felt, extending posteriorly and occupying whole of vagina with copious pus discharge was present. She was operated in view of Pre-PROM after 3 days of admission and delivered a healthy male baby. Intraoperatively the mass was not found to be originating from uterus or cervix.

MRI finding- A 12.3x11x15.7 CC leiomyoma noted in abdominopelvic cavity with malignant transformation with metastasis noted in bone marrow of pelvis and bilateral femur.

Pathological finding : suggestive of sarcoma.

CONCLUSION- Pregnancy includes many hormonal, molecular, anatomic transformation in genital tract. Overlapping of these changes with cancerous changes makes diagnosis challenging. As sarcoma runs a fast course hence timely detection and management by multidisciplinary approach is important.

KEY WORDS- Pregnancy, sarcoma, malignant

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