## Happy Gynecon 2021 Part II



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## A RARE CASE REPORT- OVARIAN LEIOMYOMA

A 28 year old female came to gynae OPD with complaints of lower abdominal pain and history of irregular mensus since 6-7 months. She is P2L2A1 with last child birth 3 years back with normal vaginal delivery.

On **PER ABDOMEN** examination -A 14 weeks size mass felt which was mobile with regular margins and was hard in consistency.

On **PER VAGINUM** examination - findings were coinciding with per abdomen findings and mass was felt seperated from the uterus.

All investigations were done.

USG report was suggestive of A large heteroechoic solid mass lesion seen in the right iliac fossa region and right of pelvic cavity- suggestive of right adnexal mass(11\*8cm).

Confirming with CECT Abdomen - A large well defined homogenously enchancing predominantly solid mass lesion in right adnexa not seperating from right ovary. these findings suggest solid right ovarian mass lesion.

CA125- 26.3U/ML

CEA-<0.5NG/ML

Rest all blood investigations were normal.

So decision of exploratory laparotomy was taken.

**Operative findings -** Huge , Solid mass of approx 14 weeks seen originating from right ovary which was addherent with right fallopian tube found twisted.

Right tubo-oophorectomy done.

**HISTOPATHOLOGY REPORT** -NORMAL OVARIAN TISSUE WITH AREAS SHOWING IRREGULAR BUNDLES OF INTERSECTING FASCICLE OF SPINDLE SHAPED CELLS NO ATYPIA OR PLEOMORPHISM SUGGESTIVE OF **OVARIAN LEIOMYOMA**.

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