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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 menses 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 separated 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 homogeneously enhancing predominantly solid mass lesion in right adnexa not separating 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 adherent 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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