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Leiomyosarcoma arising in pre-existing bizarre mitotically active leiomyoma

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Introduction: Leiomyoma is the most common uterine tumor and also the most common uterine sarcoma. Leiomyosarcoma arising in pre-existing bizarre mitotically active leiomyoma –to our knowledge– has been rarely reported.

Case Report: The case study begins with a 36-year-old female, with past medical history of symptomatic fibroid uterus, asthma, anxiety and obesity underwent a scheduled abdominal myomectomy, which was uncomplicated, and she was discharged home on postoperative day two in a stable condition. We received 70cc of pelvic washing. ThinPrep is performed and demonstrated reactive mesothelial cells, negative for malignant cells. Also received a specimen labeled as myoma. Grossly showing ovoid, bi-lobed tanpink myoma, measuring 15.5x11.0x9.5cm and weighing 708gms. The surface is smooth and irregular. Sectioning show multiple tan white, fibrous, whorled areas with areas of red-grey discoloration and patchy areas of geographic necrosis. Microscopic examination demonstrates uterine mass composed of proliferation of spindle cells and round epithelioid cells, arranged in fascicles with associated patchy areas of necrosis. The neoplastic cells demonstrate oval and spindle shaped nuclei with ill-defined cytoplasmic borders, pleomorphic hyperchromatic nuclei with areas of prominent increase nuclear-cytoplasmic ratio. Diffuse areas of bizarre nuclei with binucleation and giant cells forms are present. Patchy areas of increased mitotic index up to 8-12 mitoses/HPF. Multiple atypical mitotic figures are observed in many sections. The bizarre cytological nuclear atypia is also observed within the smooth muscle of the medium-sized and small-sized blood vessels.

Conclusion: The histologic features are consistent with a rare form of leiomyosarcoma arising in pre-existing bizarre mitotically active leiomyoma. Leiomyosarcoma is associated with poor prognosis. Overall survival rates range from 15-25%. Stage is the most powerful prognostic factor. Tumors <5.0cm confined to the corpus are associated with better survival and outcome.

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