

# CASE 048

**AUTHORS:** Dr. Deepika Jain, Dr. Mallika Dixit, Dr. Aditi Dewan, Dr. Lata Kini

**ACKNOWLEDGEMENTS:** Sanjay Kumar Sharma, Sneha Gadoo

Pelvic mass of mullerian origin –primary peritoneal adenosquamous carcinoma masquerading as intestinal/ovarian malignancy - a case report.

## PATIENT HISTORY

A 55 year old female presented with abdominal pain. CT scan revealed a pelvic mass near anterior wall of uterus, blending with bowel loops and obliterating bladder wall. We received five specimens comprising of omental biopsy, pelvic mass, total hysterectomy with bilateral salpingo-oophorectomy, dome of urinary bladder mass and resected segment of small intestine. Clinical diagnosis suggested were (i) Ovarian mass (ii) Small gut gastrointestinal stromal tumor.

## GROSS FINDING

We received a pelvic mass measuring 12.0 X 7.0 X 6.0 cm with attached tube like structure measuring 2.0 cm in length and 1.5 cm in diameter. Cut surface was solid-cystic grey white to grey brown. Total hysterectomy with bilateral salpingo oophorectomy specimen was unremarkable other than multiple nodules on uterine surface varying in size 1.0 to 1.5 cm. Dome of bladder, measuring 4.5 x 5.0 x 2.0 cm. Cut surface showed grey-white to grey-brown lesion. Small intestine showed an ulcer.

## HISTOMORPHOLOGY

Section from pelvic mass showed diffuse sheets, nests and papillae of tumor cells with large areas of necrosis. Tumor cells exhibited moderate to marked atypia, coarse chromatin and moderate amount of cytoplasm. Extensive areas of squamous differentiation were seen. No sarcomatous element was identified. Mitosis was > 10/10hpf. Tumor was infiltrating the fallopian tube wall attached to pelvic mass, serosal surface of uterus, dome of bladder and small intestine. Extensive sampling of uterus did not reveal origin of tumor from uterus, bilateral ovaries and fallopian tube. Omental biopsy showed inflammatory granulation tissue and was free of tumor.