

## CONCLUSION

This case highlights the importance of immunohistochemistry in a patient with multiple lesions and also that epithelial ovarian, peritoneal, and tubal cancers represents spectrum of disease that originates in mullerian compartment and share the similar immunophenotype. We present this rare case as to increase the awareness about this rare tumor which can mislead the clinician. This case had an extensive squamous differentiation which has been described in only one case till now.

## REFERENCES

1. Roh SY, Hong SH, Ko YH, et al. Clinical characteristics of primary peritoneal carcinoma. *Cancer Res Treat.* 2007;39(2):65–68. doi:10.4143/crt.2007.39.2.65.
2. Swerdlow M. Mesothelioma of the pelvic peritoneum resembling papillary cystadenocarcinoma of the ovary; case report. *Am J Obstet Gynecol.* 1959;77(1):197–200.
3. Cobb, L.P., Gaillard, S., Wang, Y. et al. Adenocarcinoma of Mullerian origin: review of pathogenesis, molecular biology, and emerging treatment paradigms. *gynaecol oncol res pract* 2, 1 (2015) doi:10.1186/s40661-015-0008-z.
4. Irving JA, Clement PB. *Diagnostic histopathology of tumors*. 5th ed. P1044.
5. Yamashita T, Suzuhigashi M, Higashimoto M et al. A case of primary peritoneal adenosquamous cell carcinoma. *JJSA.* 2012;73:2409-14
6. Piek JM, van Diest PJ, Zweemer RP, Jansen JW, Poort-Keesom RJ, Menko FH, et al. Dysplastic changes in prophylactically removed Fallopian tubes of women predisposed to developing ovarian cancer. *J Pathol.* 2001;195(4):451–6. doi: 10.1002/path.1000.