

ENDOMETRIOSIS IN AN EXTRAUTERINE LEIOMYOMA

(A Case Report)

by

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We describe below a case of an isolated endometriosis in the centre of a leiomyoma situated in the broad ligament.

CASE REPORT

A 33 year old woman was registered for her third delivery. She had no gynaecological complaints. A forceps delivery was performed. Later she underwent a tubectomy operation. At this operation the uterus revealed presence of small fibroids. In addition there was one small nodule on the left fallopian tube and one in the left broad ligament. The last two which were separate from the uterus were excised and sent for histopathological examination. The patient had an uneventful recovery and was discharged.

HISTO-PATHOLOGY

On gross examination the nodule from the fallopian tube did not reveal anything remarkable. Histological examination was suggestive of a leiomyoma. The nodule from the broad ligament measured about 1.5 x 1.2 x 1.2 cms. The cut surface was greyish white with a brownish area in the centre. (Fig. 1). Microscopic examination revealed the structure of a leiomyoma with presence of an endometrial type of gland in the centre. (Fig. 2, 3 and 4). No stromal tissue was seen.

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Discussion

Co-existing leiomyomas of the uterus and adenomyosis are quite common. Adenomyosis in a leiomyoma in the uterine wall has also been reported. The triad of pregnant uterus, uterine leiomyomas and the smooth muscle nodules in the peritoneum would qualify this case as one of 'Leiomyomatis peritonealis disseminata'. The finding of endometriosis in an extrauterine leiomyoma must be rare indeed. It may not cause any clinical symptoms.

The present finding we feel would tend to support the serosal metaplasia theory about endometriosis.

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References

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See Fig. on Art Paper VII