

# CHORIOCARCINOMA WITH FATAL PULMONARY AND HEPATIC METASTASIS WITH NORMAL INTRAUTERINE PREGNANCY

by

SHARDA AGARWAL\*

and

G. I. DHALL\*\*

Choriocarcinoma with normal intra-uterine pregnancy is an extremely rare entity. Van der Werf *et al* (1970) could collect only 18 cases in the review of world literature. Greene and McCue (1978) added one more who presented with cerebral metastasis. In these cases the involvement of various tissues and organs has been variable. In some cases, the foetus is spared but mother's organs and placenta show widespread disease, while in others both mother and foetus have been affected with sparing of placenta (MacRae, 1959; Duamen *et al* 1961). We have recently seen such a case with extensive pulmonary metastasis during the third trimester of pregnancy.

## CASE REPORT

H.D., 27 year old, third gravida was admitted to the local General Hospital with 33 weeks of pregnancy and complained of fatigue, cough and hemoptysis of 2 weeks duration. X-Ray chest revealed bilateral nodular opacities and evidence of pneumonic infiltrate in the right lung field. Patient was treated with antibiotics and later with antitubercular drugs without any improvement in her condition. She delivered

at 35 weeks gestation, a normal and live child. The patient went downhill and 5 months later she was referred to the Postgraduate Institute of Medical Education and Research, Chandigarh on January 27, 1979.

On examination she was pale, febrile, dyspnoic and emaciated. Examination of the chest revealed bilateral crepitations and poor air entry and these signs were more prominent on the right side. She had severe pain in the right chest and a tender hepatomegaly of 5 cm. There was no vaginal bleeding and the vagina and cervix looked healthy. Uterus was of normal size and adenexa were not palpable.

Investigations revealed haemoglobin of 6g. T.W.D.C. 9600/mm, serum bilirubin 0.5 mg/dl., SGOT 15 i.u./litre SGPT 6 i.u./litre, alkaline phos. 38 and 64 King Armstrong units, blood group AB Rh+ve. X-Ray chest showed extensive bilateral metastatic deposits. Aspiration biopsy of the lung revealed sheets of malignant cells consistent with metastatic choriocarcinoma. Endometrial curettings showed proliferative glands. Liver biopsy was not done and the liver scan revealed a space occupying lesion of 7 cm. diameter on the superior aspect of the right lobe of liver. Brain scan was normal. She was put on chemotherapy with actinomycin D, methotrexate and cyclophosphamide. She developed pancytopenia, alopecia, generalised skin rashes and hyperpyrexia. On proper management she made slow but steady recovery. Serum H.C.G. levels fell from 69 M.i.u./ml. to 2.5 and 1.3 M.i.u./ml. two months after the beginning of chemotherapy. Pulmonary metastasis almost cleared. Shortly after the eighth course of chemotherapy she presented with recurrence of pain, pulmonary metastasis, hepatomegaly and deterioration of liver function. Serum H.C.G. levels rose to 59.2 M.i.u./ml

\*Lecturer (Presently at Lady Hardinge Medical College, New Delhi).

\*\*Associate Professor.

Department of Obstetrics and Gynaecology, Postgraduate Institute of Medical Education and Research, Chandigarh 160 012.

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She was again put on chemotherapy and convicin was added. She went downhill and died on June 26, 1979.

#### Discussion

Choriocarcinoma with a normal intrauterine pregnancy is an extremely rare entity with varied clinical presentation. Out of 18 cases reported by (Van der Werf, 1970), 6 presented with pulmonary metastasis with or without vaginal bleeding. Exploratory Laparotomy for suspected intra-abdominal haemorrhage led to the detection of 4 other cases. Rarely, Choriocarcinoma with secondaries present with no detectable primary lesion in the placenta or the uterus (Lepow, 1959). Van der Werf *et al* (1970) has discussed the possible mechanism of association of metastatic choriocarcinoma with normal intrauterine pregnancy. The more plausible ones being due to a primary placental lesion or malignant transformation of the trophoblastic embolus in a normal intrauterine pregnancy.

The prognosis of these patients is very poor. Late detection of the disease, delay in instituting the treatment and widespread metastasis at the time of presentation of the patient to the hospital make the prognosis poorer.

Another interesting observation is that the patient's blood group was AB. Bagshawe *et al* (1971) have observed that the disease progresses very rapidly in patients of choriocarcinoma with blood group AB.

#### Summary

A case of choriocarcinoma with pulmonary metastasis during the last trimester of an otherwise normal pregnancy is reported.

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