

AN INTERESTING COMPONENT IN AN OVARIAN TERATOMA

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Introduction

Teratoma of the ovary is a germ cell tumour and at times, it may be seen in combination with other germ cell tumours like dysgerminoma. Some times a teratoma of the ovary may be associated with a non-germ cell tumour like, fetal adenoma or its malignant variant, in a case of struma ovarii or a primary carcinoid tumour of the ovary. However, a giant fibroadenoma of the breast representing as one of the constituents of an ovarian teratoma has been encountered for the first time and is being presented.

Case Report

Miss B.D., an 8 years old female child for progressively increasing swelling on the right side of the abdomen for the last five months. On clinical examination a large lump extending upwards from the hypogastrium to the right hypochondrium was detected. Intravenous pyelography did not reveal any significant abnormality of the kidneys and urinary tract. Laparotomy was done and a large tumour involving right ovary was removed. The left ovary was found to be normal. The post-operative period was uneventful.

On gross examination: The external surface was nodular and well encapsulated. The cut surface showed a variegated appearance. It re-

vealed, cysts of variable sizes measuring between 0.2 to 4 cms. in diameter, grey white solid areas and areas of necrosis. Microscopically in addition to the derivatives representing all the three germinal layers in a teratoma (Fig. 1 and 2), there was an area having mosaic polypoidal masses of cellular myxomatous tissue, without showing significant increase in mitotic activity, representing intralobular mammary stroma and distorting the mammary duct system into irregular clefts and slit like spaces lined by cuboidal epithelium (Fig. 3). These histologic features characteristically represented a giant fibroadenoma of the breast. No mammary lobular structures were encountered in the vicinity of this tumourous transformation or in any other micro-section examined from various other portions of the teratoma.

Discussion

Willis (1967) has mentioned that genuine mammary tissue does occasionally occur in a teratoma but a giant fibroadenoma of the breast developing in an ovarian teratoma has not been reported so far. However, clearly recognisable mammary tissue was not observed in the present case in vicinity of the tumourous transformation or elsewhere in this teratoma of the ovary.

Reference

1. Willis, R. A.: The teratoma, In Pathology of Tumours Ed. 4, Butterworths London: 1967, p. 959.

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See Figs. on Art Paper VII, VIII