

# Endometrial Carcinoma in Puberty Age Girl – Case Report

Durga Gehlot, Dev Nanda Chaudhry, Jyotsna Ojha,  
S.P. Medical College & Associated Group of Hospitals, Bikaner.

Miss R.P. Kaur, 16 yrs. was admitted to our hospital on 15.10.97. for adenocarcinoma uterus diagnosed by histopathology of endometrial curettings.

**H/O Present Illness-** Since last two years patient was having irregular, excessive painful periods. She was given various hormonal preparations mainly estrogen pills, thinking her case as puberty menorrhagia.

Patient was having mild grade suprapubic pain, continuous type since last 1-1/2 years, which became more frequent and excruciating in nature for last 6 months.

## Menstrual History.

- (a) Menarche 13 years.
- (b) After menarche menstrual cycle for one year- 3-4/28days normal, painless.
- (c) Since last 2 years 6-7-8/20-25-28 days, irregular, excessive and painful flow. LMP-6 days ago.

**Obstetric History:-** Unmarried.

**Past History:-** H/O congenital VSD causing repeated attacks of URI upto 10 years of age.

**Personal History:-** Vegetarian, High School educated, non-smoker girl.

**Family History:-** No history of carcinoma in maternal or paternal side.

**General and Systemic Examination:-** Thinly built, not emaciated, moderately anaemic. No Lymphadenopathy, no edema feet.

**Resp. System:-** NAD, CVS- Shows findings of VSD- pulse 100/mt. regular good volume, BP 100/70mm of Hg. P/A:- Normal findings, No lump, liver and spleen normal.

## Investigations:

- (1) Hb 8.5 gm
- (2) BT 2'30"
- (3) CT 3'50"
- (4) Urine-NAD
- (5) FBS- 78mg/dl
- (6) SGOT-0.7mg/dl
- (7) Serum creatinine 0.7mg/dl
- (8) Blood Urea-24mg/dl.
- (9) Serum Uric Acid- 3.4mg/dl.
- (10) Bl group-A
- (11) USG- Done at periphery 6 months ago, revealed normal findings.



Fig 1-Uterus cut open.

**Gynaecological Examination:-** P/S exam. shows normal Cx and vagina, no bleeding P/V.

**By P/V Examination:** Cx closed. Ut AV, AF, 8Wks. Softish, uniformly enlarged, freely mobile, fornices and pouch of Douglas free. Slight bleeding on examination finger.

D & C repeated on 18.10.97 for confirmation of diagnosis. During curettage plenty of hypertrophic endometrial tissue came out very easily as if tissue was lying loosely in cavity.

H.P. Report No. (145/10/97) well differentiated adenocarcinoma uterus.

TAH and BSO done on 19.10.97- Preoperative 250ml of blood transfusion given.

On opening abdomen uterus was uniformly enlarged, 8 weeks size, normal surface, not adherent to any adjacent structures. Both fallopian tubes and ovaries were normal.

No Lymphadenopathy detected clinically, liver, spleen, omentum found normal.

TAH with BSO done in usual way. Post operative