

# Clinical and Ultra Sound dilemma due to Multiple Sebaceous balls

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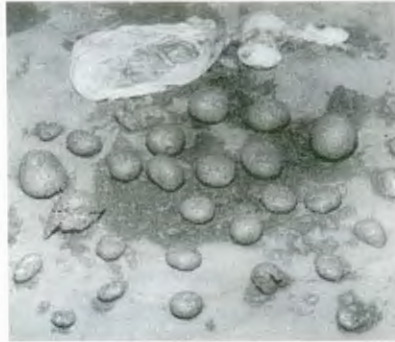
Dermoid cysts (Cystic teratomas) which constitute 10-15% of all ovarian tumours, usually present as cysts which rarely exceed 10-15cm in diameter and usually with teeth, cartilage or putty sebaceous material.

This case is presented because of the presentation of dermoid cyst as a large size nodular tumour with variable consistency measuring 50 x 40 cms and containing multiple globular sebaceous balls varying in size from 6 cm to 10 cms in diameter.

Mrs. S., 35 years old multiparous lady with previous vaginal deliveries had presented with a huge abdominal mass occupying all the quadrants and extending upto about 6cms below the xiphisternum with uniform dull aching abdominal pain.

General examination revealed a healthy young lady with normal cardiovascular and respiratory system. The abdominal mass measured 50 x 40 cm with variable consistency and well defined upper and lateral borders. Pelvic examination confirmed the mass to be arising from the adnexa. Ultrasound examination revealed a large mass

with echogenic areas occupying the whole of the interior of the mass. At laparotomy the mass was found to be arising from the right ovary and uterus and the other ovary were normal. Cut section revealed the contents to be only multiple sebaceous balls mixed with hair (20 in no.) varying in size from 6cm to 10cm diameter.



Chemical changes in the sebaceous material, fragmentation of the hair and the churning action of body movements are said to be the cause for formation of sebaceous balls.

Multiple small sebaceous balls have been illustrated in the text book of clinical of gynaecology – by Sir T.N.A Jeffcoate.

Dermoid cysts with sebaceous balls can thus present as nodular large tumours posing a clinical and ultrasonic dilemma as to the benign nature of the tumour.