

Unusual Ultra Sonographic Appearance of a Dermoid

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A 32 years old married patient presented to us with 1 ½ months pregnancy and a huge rapidly growing mass in the abdomen. The patient had no bowel or bladder disturbances and did not show obstructive symptoms. She was small built and pale with Hb of 6.8gm%. On palpation, the mass was cystic with irregular surface and extended from pelvis to xiphisternum. On pervaginal examination, 6 wks pregnant uterus was felt, freely mobile and separate from the mass.

Ultrasound of the abdomen revealed huge thin walled cyst occupying the entire abdomen. Multiple uniform spherical hyperechoic masses were seen floating freely within the cyst (Fig. 1). Ovaries could not be identified separately either on abdominal or transvaginal scan. Gestational sac was seen in the uterus. CA 125 was within normal limits.

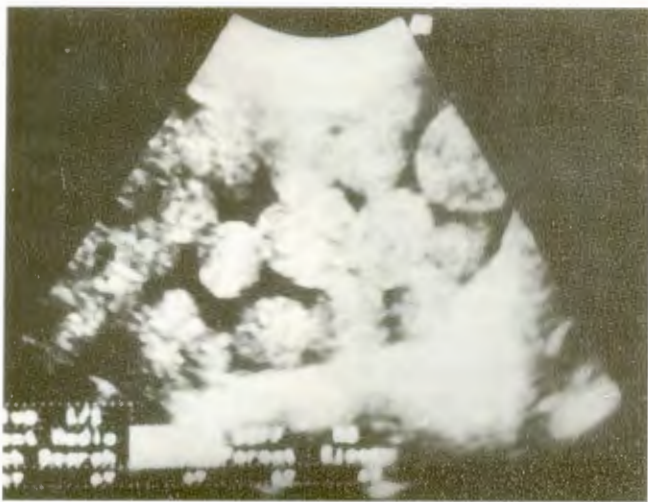


Fig. 1: Ultrasonographic appearance of the mass

The differential diagnosis was:

1. Dermoid cyst of the ovary
2. Hydatid cyst of the liver
3. Liposarcoma arising from mesentery or omentum

In view of uncertain diagnosis and possible major surgery involved, M.T.P. was performed. C.T. Scan done could not establish the definite origin or diagnosis of the mass. At exploration, a large right ovarian dermoid cyst weighing 12 kg was removed. The uterus and opposite ovary were normal. Cut section showed multiple balls of sebaceous material of consistency like "putty" (Fig. 2). Histopathology confirmed the diagnosis of dermoid cyst. In retrospect, because the differential diagnosis was alarming, the patient was subjected to M.T.P. unnecessarily. Radiation exposure in early pregnancy could have been avoided by using M.R.I. instead of C.T. Scan.



Fig. 2: Cut section of the mass