Case Report

Struma Ovarii - A Case Report

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Abstract

Struma ovarii (literally: goitre of the ovary) is a rare form of monodermal teratoma that contains mostly thyroid tissue. The vast majority are benign tumours; however, malignant tumours of this type is found in a small percentage of cases. It is most common between the ages of 40 and 60 years and accounts for approximately 5 percent of all ovarian teratomas. Here we present a case of left sided struma ovarii. This patient is a 39 years' woman from Bhobanipur, Rajbari, Bangladesh. She noticed bleeding per vagina, abdominal swelling and left pelvic region mass for few months. Clinical & imaging examination revealed ascites and left ovarian neoplastic lesion. After excision biopsy, histopathological examination was performed. Microscopically, it shows ovarian tissue but predominantly composed of mature thyroid tissue which are diagnostic key feature of struma ovarii.

Keywords: Struma ovarii, teratoma, histopathology, thyroid.

Introduction

Struma ovarii is a rare and usually unilateral specialized or monodermal teratoma¹. It is predominantly composed of mature thyroid tissue². It accounts for approximately 5 percent of all ovarian teratomas³⁻⁵.

Struma ovarii is most common between the ages of 40 and 60 years⁵. Women with struma ovarii usually present with pain and/or a pelvic mass and less frequently with ascites. Clinical and biochemical features of hyperthyroidism are uncommon in women with struma ovarii, occurring in less than 5 to 8 percent of cases^{4,6-9}.

Case Report

Mrs. Momotaj Begum aged 39 years, R-151001154006, non-diabetic, housewife, hailing from Bhobanipur, Rajbari, was referred to KYAMCH by local physician due to bleeding per vagina, abdominal swelling and left pelvic region mass for few months.

Both ultrasonography and CT-scan report commented as left ovarian neoplasm with ascites. Hysterectomy with salpingo-oophdrectomy was done and later it was diagnosed struma ovarii (left) and adenomyosis (myometrium of uterus) by Histopathological examination.

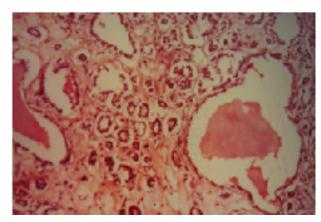


Figure: Histopathological finding of struma ovarii.

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Discussion

Struma ovarii is a monodermal teratoma¹. Struma ovarii accounts for approximately 5 percent of all ovarian teratomas³⁻⁵. The thyroid gland typically is not enlarged, abdominal pain was present in 20 to 42 percent and a palpable lower abdominal mass in 23 to 58 percent^{5,9}. Struma ovarii cannot be diagnosed on clinical, biochemical or imaging test. Diagnosis is confirmed by Histopathological examination. Microscopically, it shows mature thyroid tissue². Removal of the lesion, commonly by excision is the preferred treatment.

Conclusion

Although it is a pelvic mass lesion and cause discomfort. It is not usually a malignant condition and histopathological examination should be done to ruled out struma ovarii.

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