



P63. CYSTIC OVARIAN TERATOMA WITH INTRACYSTIC FAT BALLS: A CASE REPORT

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Context

The benign mature cystic teratoma is one of the most common human germ cell tumours encountered and it is often found in the ovaries of women of reproductive age. Cystic teratoma can produce a wide spectrum of sonographic appearances, which depends on their major content. Some ultrasonographic findings specific for cystic teratoma have been described as acoustic shadowing, dermoid mesh, tip of iceberg, fat–fluid level, and fluid–fluid level. We present a case of another distinct ultrasonographic feature, namely multiple, discrete, uniform globules floating within the cyst.

Patient

A 29-year-old woman was referred to the gynaecology department with the diagnosis of an incidental pelvic mass found in an abdominal sonography that was being carried as a part of an acute calculous cholecystitis surgical workup.

Pelvic examination showed a soft palpable mass behind the uterus with a smooth external wall. The mass was slightly mobile but not tenderness was found. The patient had no notable medical conditions, and she had a history of caesarean section.

Measures

Laboratory findings were within normal limits, including serum tumour markers.

Transvaginal sonography revealed a large right ovarian cyst, well-defined of 122x88,6x137mm occupying the whole pelvic cavity, the cyst contains multiples, distinct, round, bright, echogenic, uniform globules of about 20mm diameter floating in hypoechogenic fluid. Colour Doppler study revealed no vascularization. The left ovary and uterus showed no abnormalities. Magnetic resonance imaging (MRI) findings were consistent with those of the Ultrasound with a slightly higher fat content. A preoperative sonographic diagnosis of dermoid cyst was made

Intervention

The patient underwent laparoscopic surgery. Intraoperative findings revealed a large right ovary cystic tumour, the left ovary and the uterus were normal. Right-sided adnexectomy with excision of the cyst

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was done. Macroscopically, the ovarian mass showed a high content of sebaceous material.

Results

Histopathology revealed mature dermoid cyst with inflammatory reaction. There was no granulation and no evidence of any malignancy. Postoperative period was uneventful.

Conclusions

The appearance of intracystic multiple floating balls on ultrasonographic examination is an unusual but pathognomonic finding for ovarian cystic teratoma, other imaging modalities have limited additional diagnostic value.