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P113. OVARIAN CANCER WITH METASTASIS TO THE STERNUM

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Context: In case of ovarian cancer median survival after diagnosis of bone metastasis is only 40 months. Despite therapy, the prognosis of cases with bone metastasis is poor.

Objective: Gynaecologic carcinoma ranks low on the list of bone metastasis, and the incidence of bone metastasis varies. The most common sites of metastases were the vertebrae, ribs, skull, pelvic bones and femur. Ovarian cancer is usually disseminated by direct extension, transperitoneal seeding and lymphatic channel, or by hematogenous route.

Methods: A case of ovarian cancer with metastasis to the sternum diagnosed antemortem is presented.

Patients: A 46-year-old woman, multipara, had abdominal pain and difficulties in low abdomen caused by a large tumor that extended almost to the umbilicus. On palpation, normal uterus and huge solid-elastic formation extending high to the umbilicus were found. Routine laboratory findings were within the normal limits. The level of the CA 125 tumor marker was 1084 U/ml, while ultrasonography showed the abdominal formation to be filled with hypoechoic content. Preoperative prossesing was done.

Interventions: The patient underwent surgical treatment. Histological diagnosis was endometrioid carcinoma of both ovaries metastazing to the great omentum. Intraoperative cytology was negative. The patient received chemotherapy based on paclitaxol and cisplatin.

Main outcome: After chemotherapy computer tomography and scintigraphy of the bone and liver were normal.

Measure: After 17 months of the initial diagnosis she noticed a tumefaction and pain in sternal region with CA 125 elevation to 1160 U/ml. Radiological studies showed a defect in the sternum. Magnetic resonance imaging confirmed the diagnosis and showed a tumor growing into the sternum and muscle.

Results: Histopathology of the sternal tumefaction puncture confirmed the diagnosis of metastatic adenocarcinoma. The patient received radiotherapy to the sternal region. However, she died 9 months after the diagnosis of bone metastasis.

Conclusion: The presence of bone metastasis in a patient with ovarian carcinoma is a grim prognostic sign that correlates with extensively disseminated disease.

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