

CLINICAL IMAGE

Huge teratoma in a teenager

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Abstract

Mature cystic teratoma is the most common ovarian tumor in young females. We are presenting a 13-year-old African–American female with abdominal distension. Computed tomography of the abdomen showed midline cystic mass. Diagnosis was confirmed after laparoscopic left salpingo-oophorectomy. Malignant transformation of mature cystic teratoma is rare.

A 13-year-old African–American female presented to outpatient clinic complaining of abdominal distension and pain of 3 weeks duration. She was diagnosed with constipation 1 week before presentation for which she was taking stool softener resulting in bowel movement every 2 days. Review of systems was positive for heavy menses since menarche, which started at age of 12. Otherwise her medical and surgical histories are unremarkable.

Her physical examination showed normal vital signs. Abdominal exam showed distension with large midline mass. There was no tenderness or guarding. Computed tomography (CT) of the abdomen and pelvis showed a large 25.2 × 17.3 × 10.2 cm midline cystic mass extending superiorly from the pelvis to the abdomen (Fig. 1). Laparoscopic left salpingo-oophorectomy was done. The cyst obscured the view. About 2.6l of clear fluid were

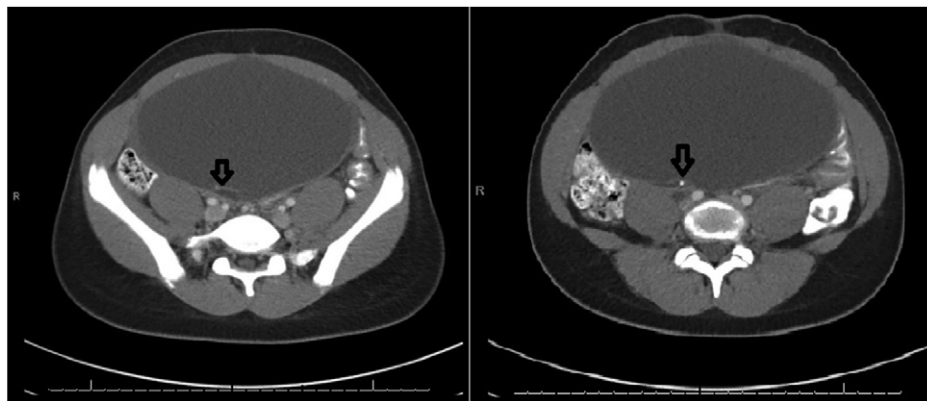


Figure 1: CT of the abdomen (axial view) showing fat in the right side and calcification in the left side as indicated by arrows.

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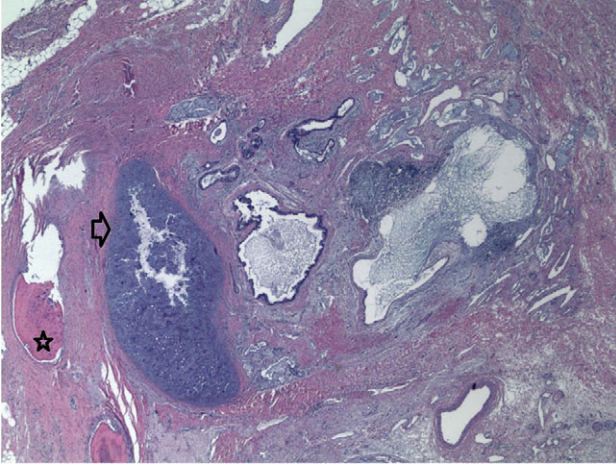


Figure 2: Histopathological slide showing bone tissue (star) and cartilage tissue (arrow).

aspirated. The cyst was decompressed and the opening into the cyst was sealed with a Vicryl suture to avoid any spillage. Mature cystic teratoma consisting of mature dermal, bronchial, cartilaginous, osseous and brain tissue was determined by histopathology (Fig. 2). Patient recovered after surgery without complication. Abdominal cystic masses in pediatric age group include choledochal cysts, cystic diseases of kidney, lymphangioma, duplication cyst, cystic teratoma, pseudocyst, pancreatic cyst, hydatid cyst, ovarian cyst and urachal cyst. CT findings in mature cystic teratoma include fat (areas with very low Hounsfield values) in 93% of the cases (Fig. 1). [1].

Mature cystic teratoma is the most common ovarian tumor in young females. It is almost benign and asymptomatic [2]. Definitive diagnosis will be made at the time of surgical excision [3]. Surgery is the mainstay of treatment. Malignant transformation of mature cystic teratoma is rare [4].

KEY LEARNING POINTS

- Computed tomography has excellent sensitivity to diagnose mature cystic teratoma because of ability to detect fat.
- Definitive diagnosis of mature cystic teratoma will be made at the time of surgical excision.

CONFLICT OF INTEREST STATEMENT

None declared.

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