

Poster number (EP12.22). Endometrial clear cell carcinoma associated with breast cancer adjuvant hormonal treatment: a clinico-sono-histopathological correlation.

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Introduction

Clear cell and serous endometrial carcinomas are rare and aggressive diseases diagnosed in the post- menopause and associated with breast cancer. Transvaginal ultrasound imaging for gynaecological surveillance is often overlooked in women diagnosed with breast cancers particularly in low resourced settings.

Case

We describe the case of a 56-year-old G4P4 woman with a history of breast cancer with recurrence on prolonged adjuvant hormonal treatment, presenting with vaginal bleeding and enlarged uterus. On transvaginal ultrasound, there was a heterogenous endometrial isthmic mass with hematometra noted. She underwent surgical staging, but with advanced tumor spread noted, further workups for additional chemoradiation therapy are needed to determine prognostication.



<https://www.onlymyhealth.com/mastectomy-breast-removal-surgery-benefits-risks-1640241999>

Conclusion

Women diagnosed with breast cancer on adjuvant hormonal treatment require careful long-term surveillance, support and counselling with referral for gynaecological ultrasound given the reports of breast cancer on prolonged adjuvant hormonal therapy with association to aggressive endometrial cancer types.

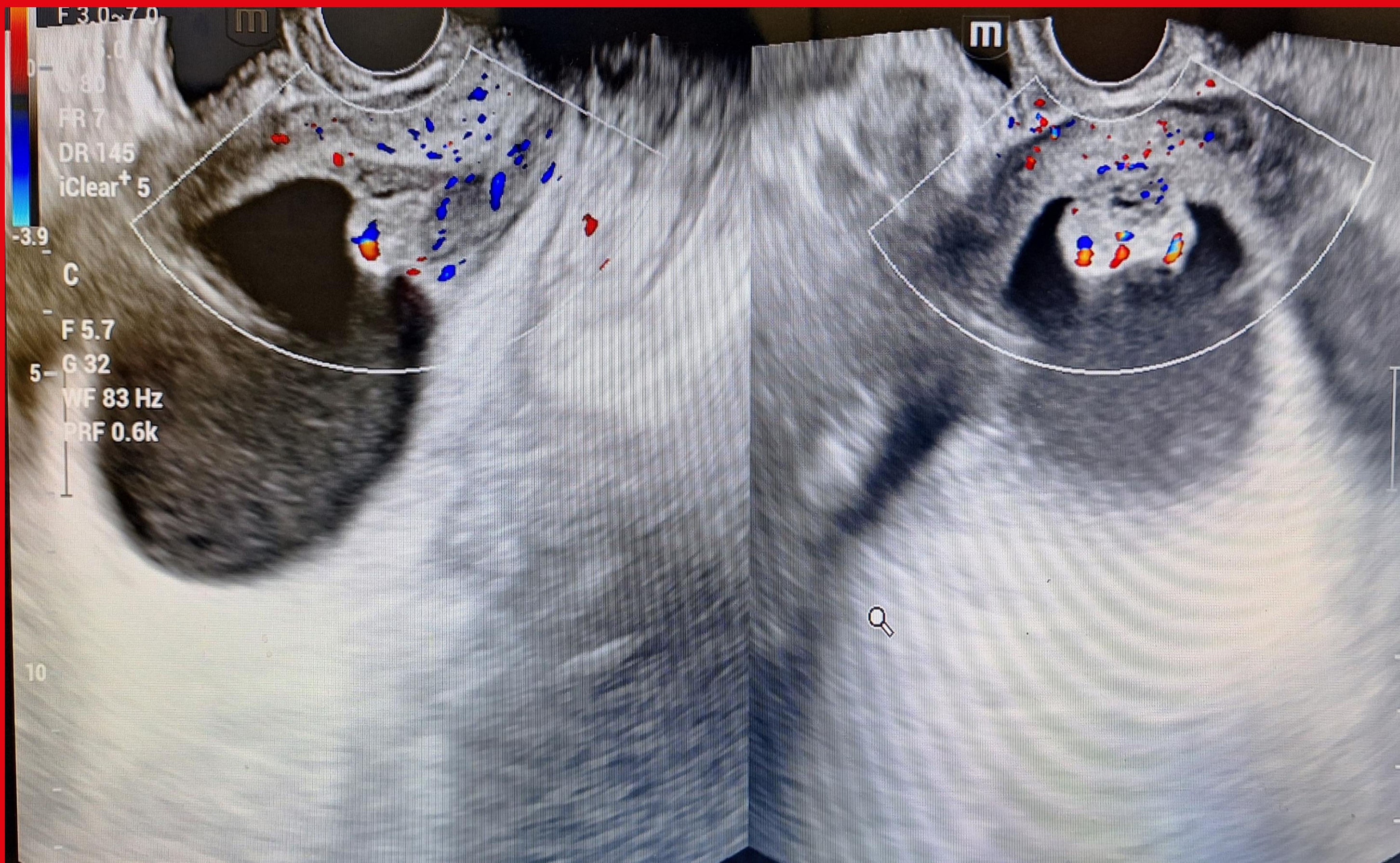


Figure 1. irregular heterogenous mass at the isthmic area 4.38 x 3.42 x 3.09 cm (vol-24.06 cm) extending to the post cervical mass with minimal color flow; endometrial cavity distended by a low to medium echo fluid

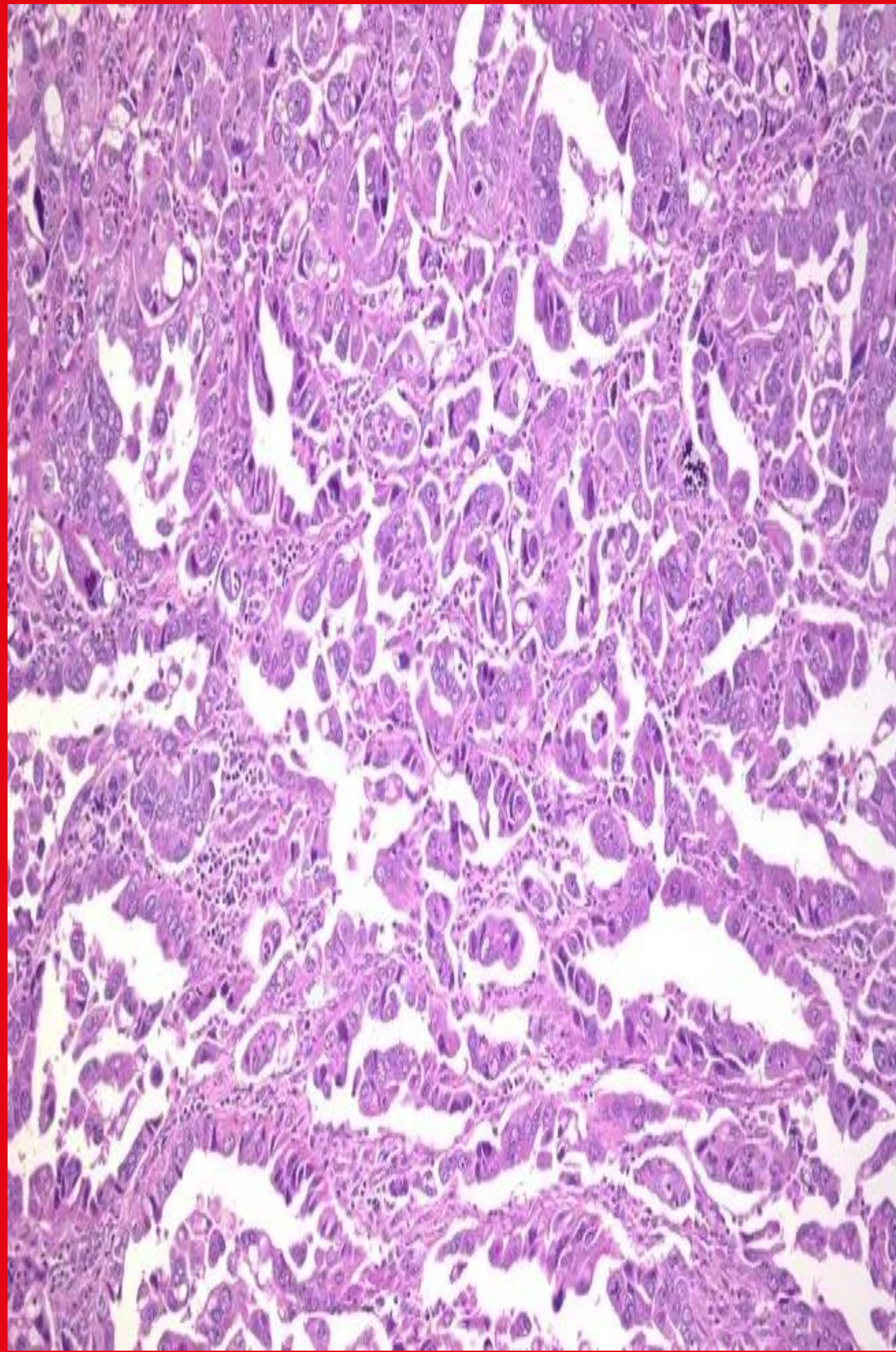


Figure 2. histopathology shoing clear cell endometrial carcinomaPET Scan extensive hypermetabolic abdominopelvic lymphadenopathy likely metastasis