

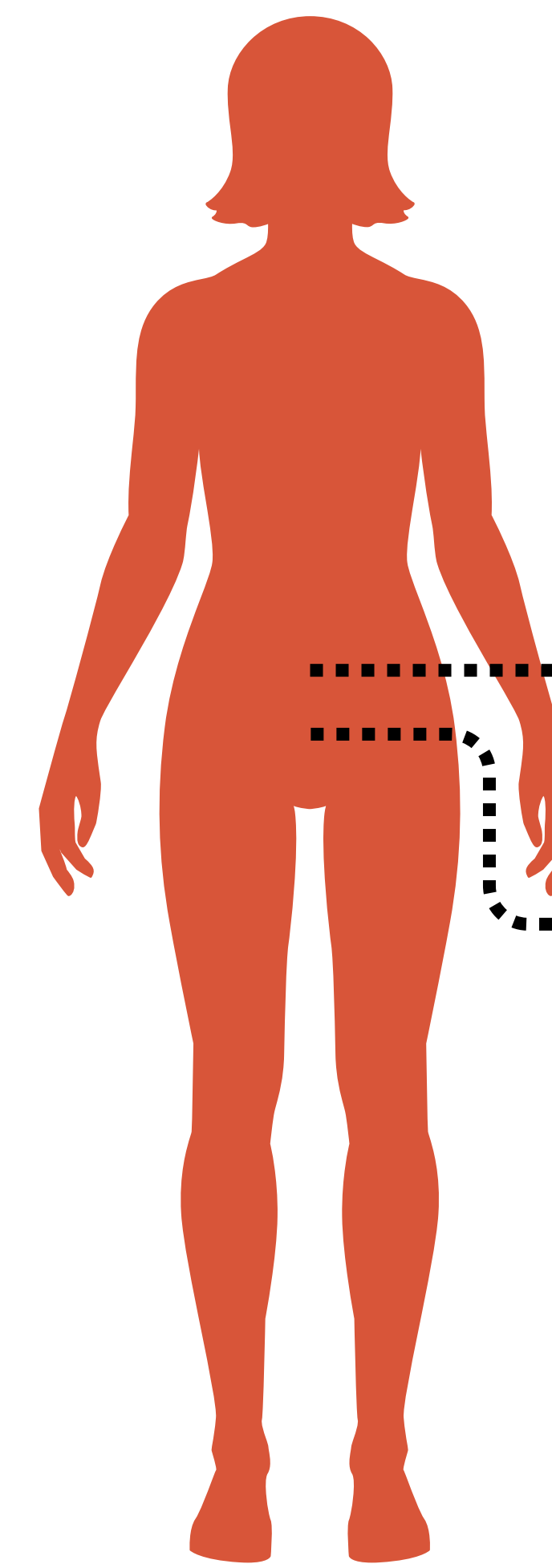
WHEN THREE WORLDS COLLIDE: A RARE CASE OF TRIPLE COLLISION TUMOR OF THE OVARY

Principal Author: Mea Janelle F. Sarmiento-Babiera, MD, FPOGS
Adviser: Ma. Anna Luisa Festin-Dalawangbayan, MD, FPOGS, FPSUOG

BACKGROUND

-  **Collision tumors:** ≥2 distinct neoplasms in the same organ without histologic admixture.
-  **Ovarian triple collision tumors:** Extremely rare.
-  **Case:** Mature cystic teratoma + endometriotic cyst + mucinous neoplasm.
-  **Significance:** Highlights diagnostic challenges and the need for multidisciplinary management.

CASE PRESENTATION



Patient Profile

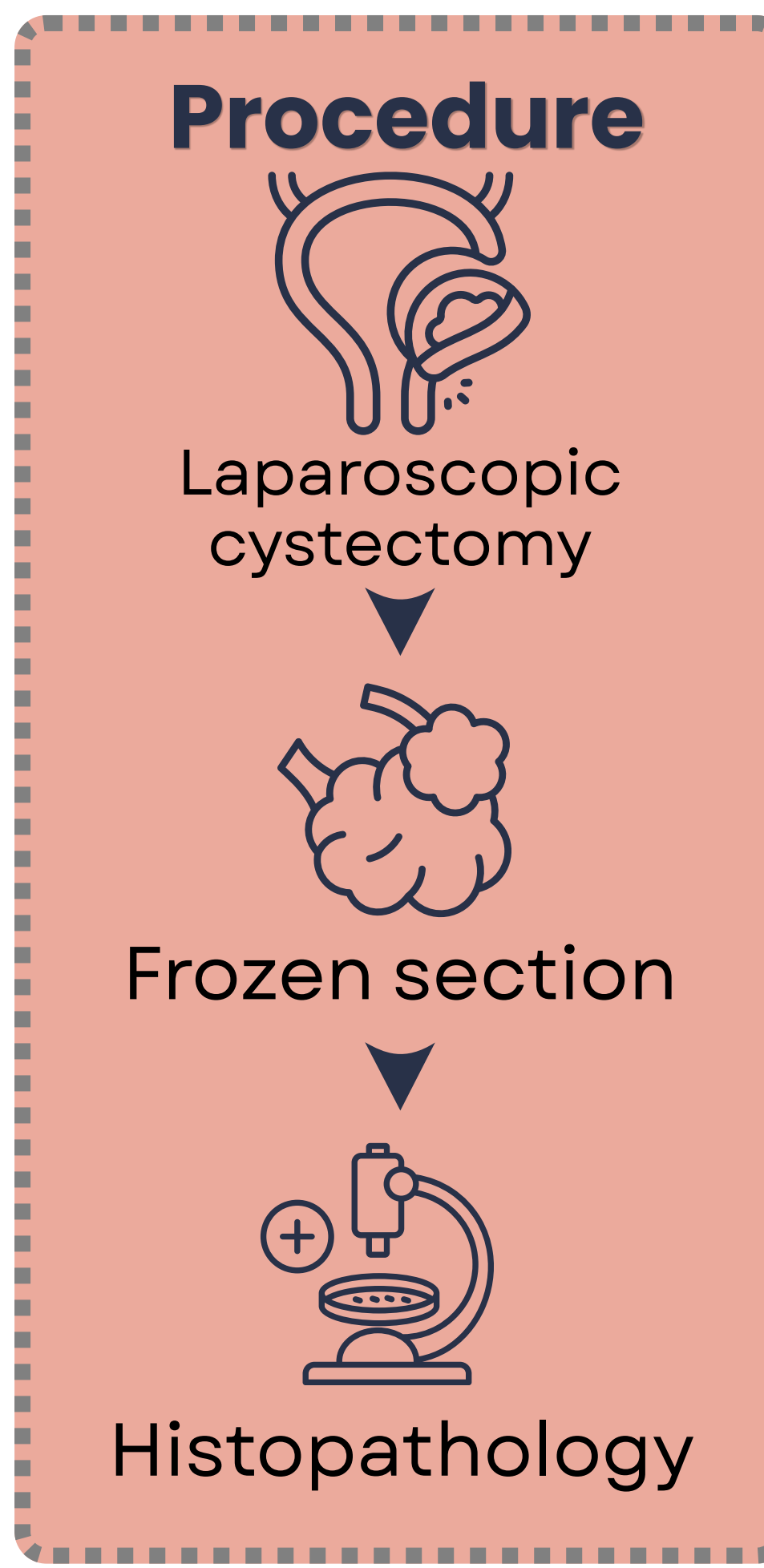
- 39-year-old
- Nulligravid female
- Primary infertility (2 years)

Presenting Symptoms

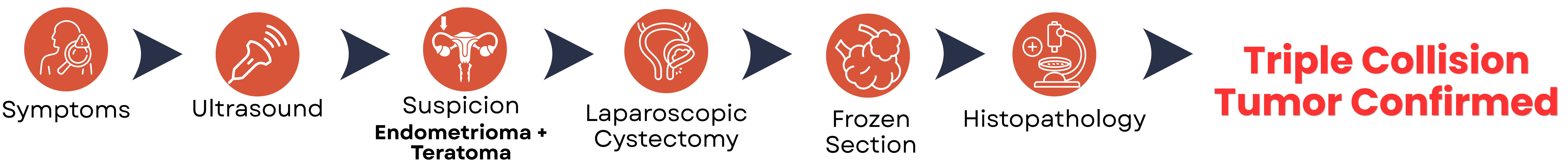
- Chronic hypogastric pain
- Dysmenorrhea
- Amenorrhea

Clinical Findings

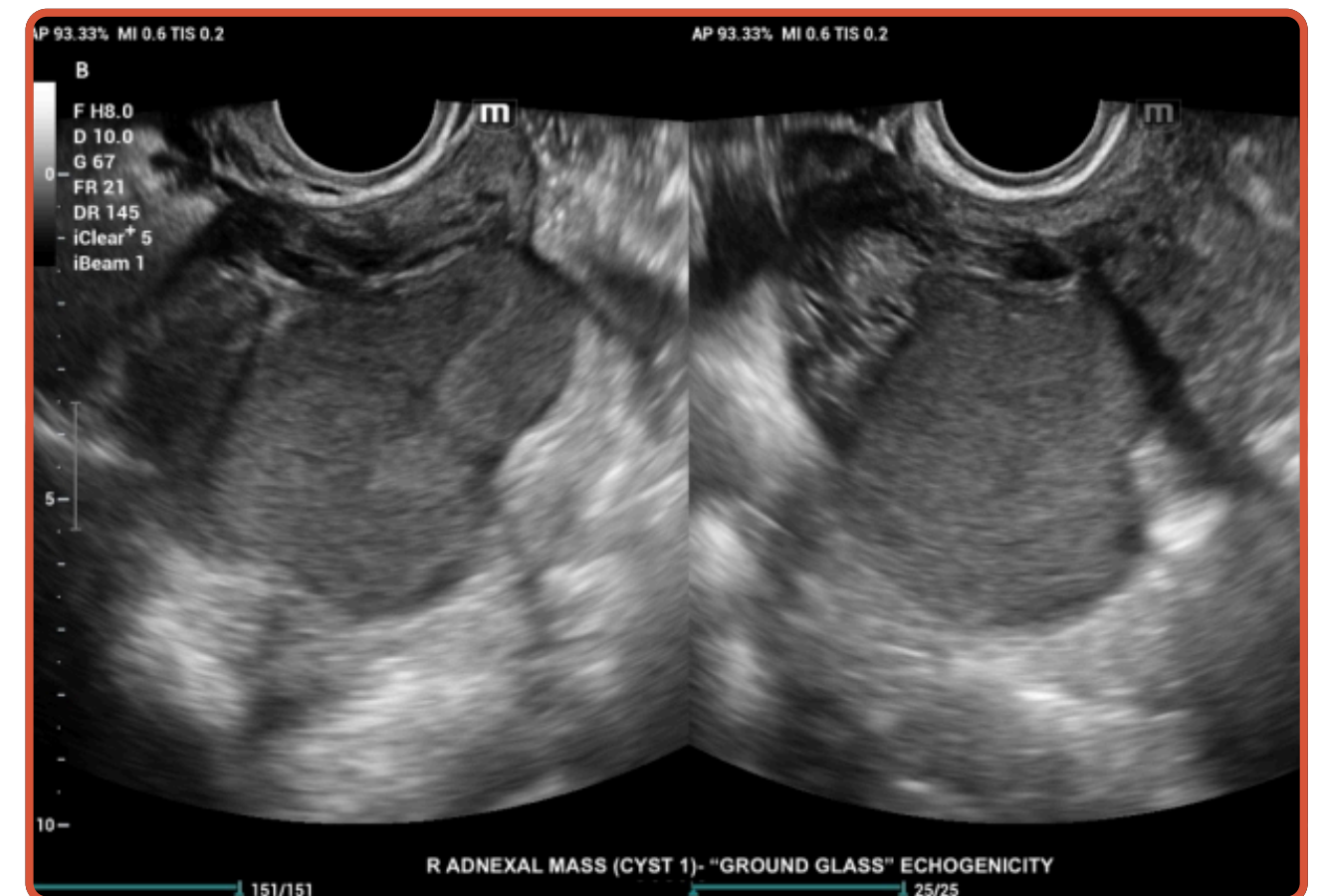
- AMH: 0.78 ng/mL
- Fixed 8-cm right adnexal mass
- Bilateral adnexal masses



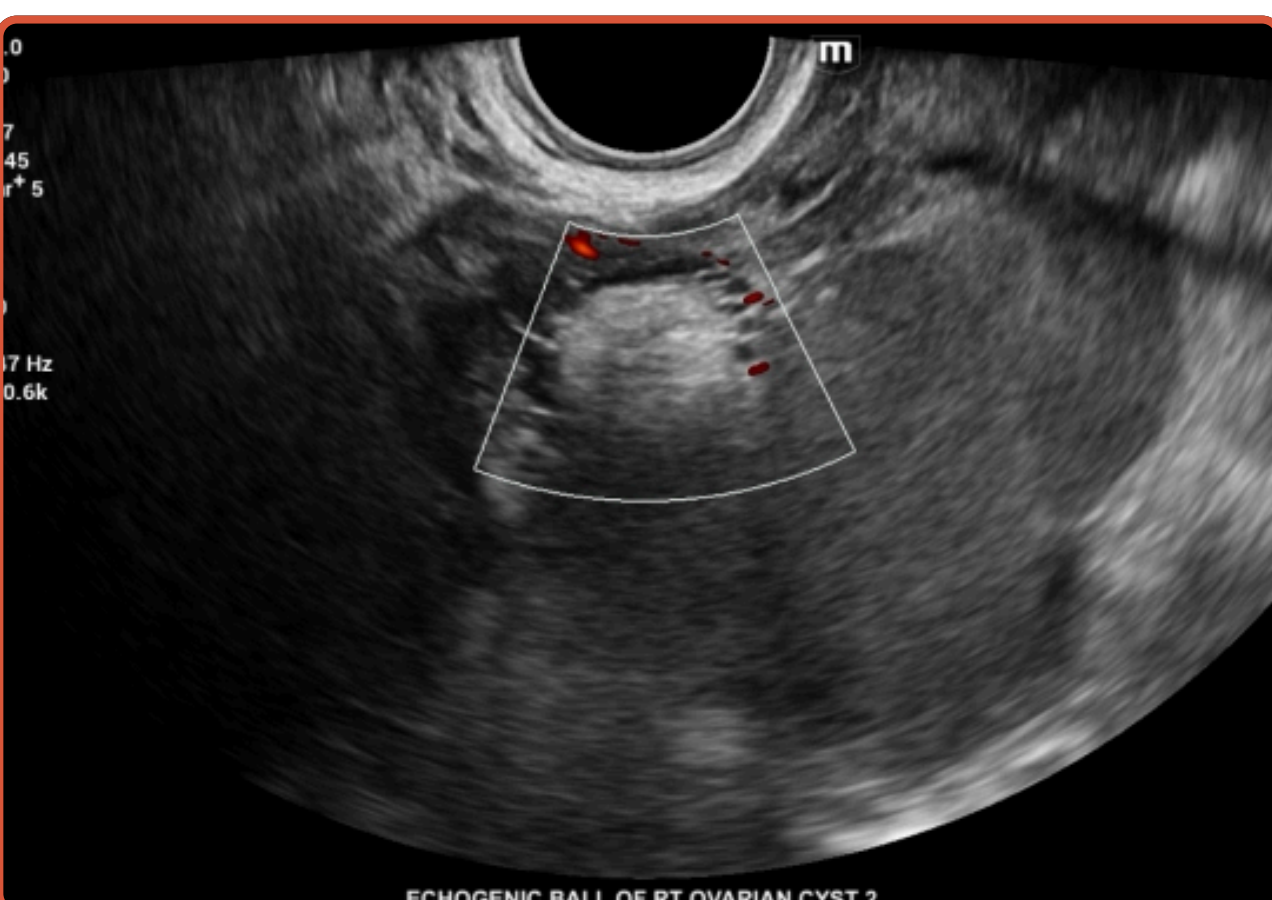
DIAGNOSTIC TIMELINE



IMAGING FINDINGS



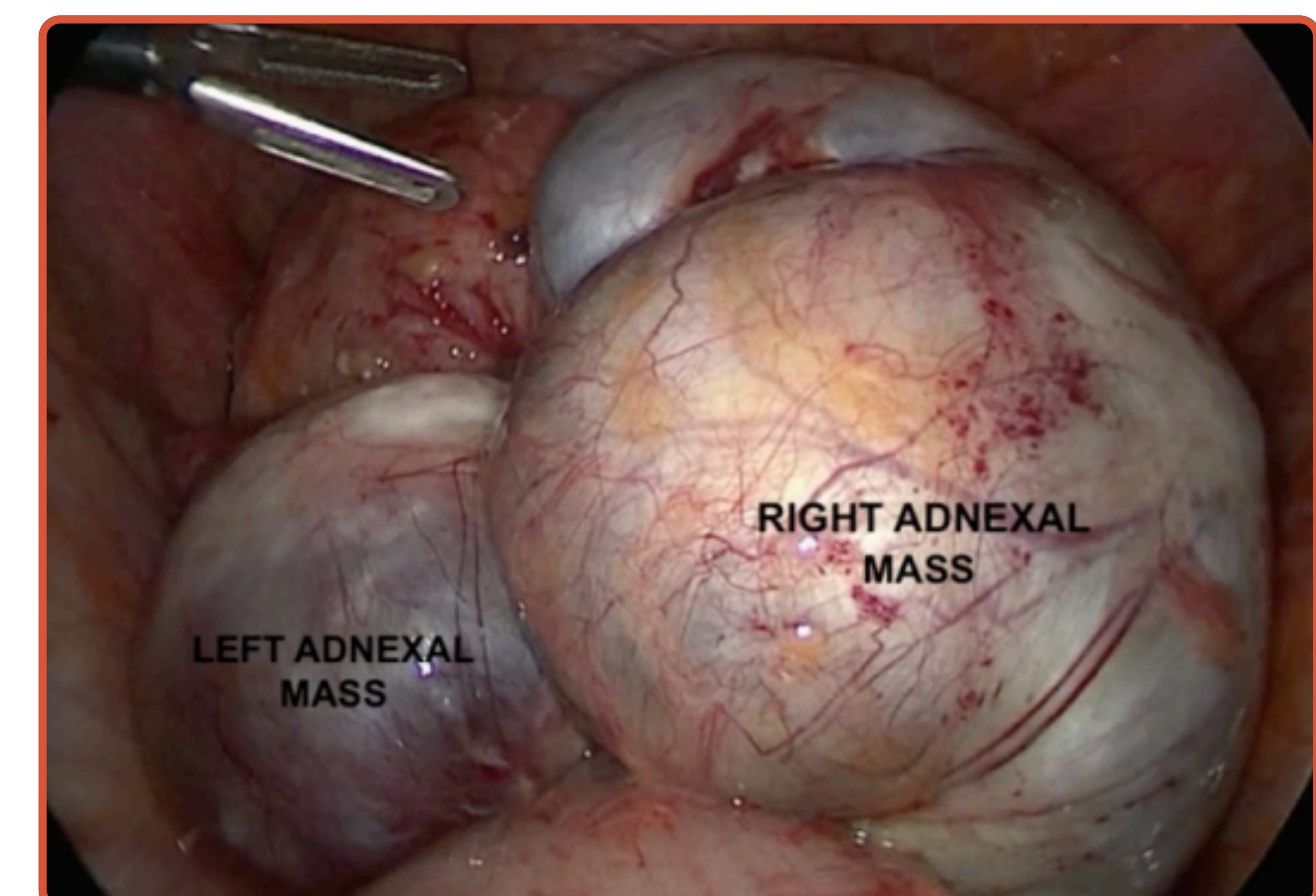
Right ovarian cyst 1 showing "ground glass" echogenicity



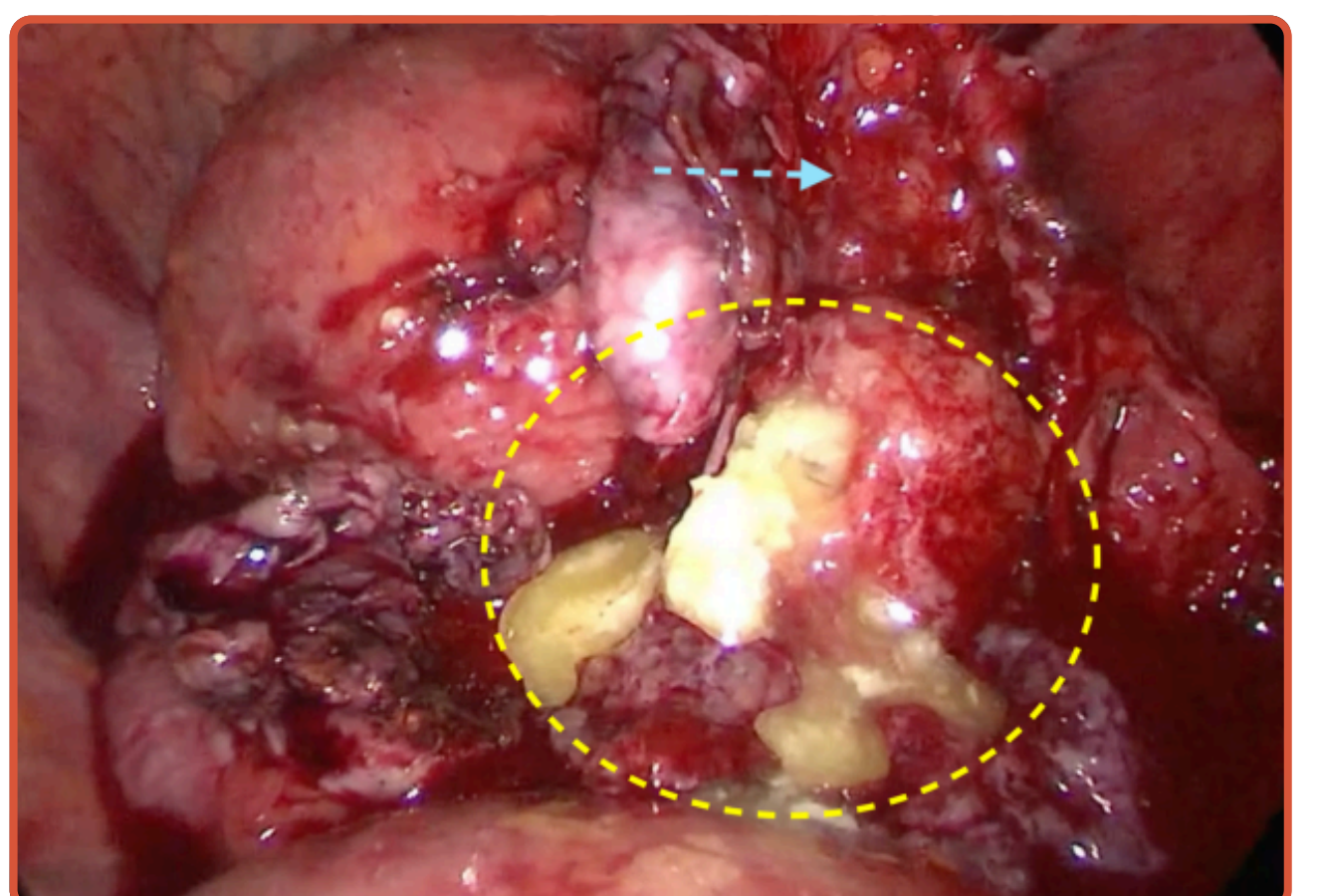
Echogenic ball of right ovarian cyst 2



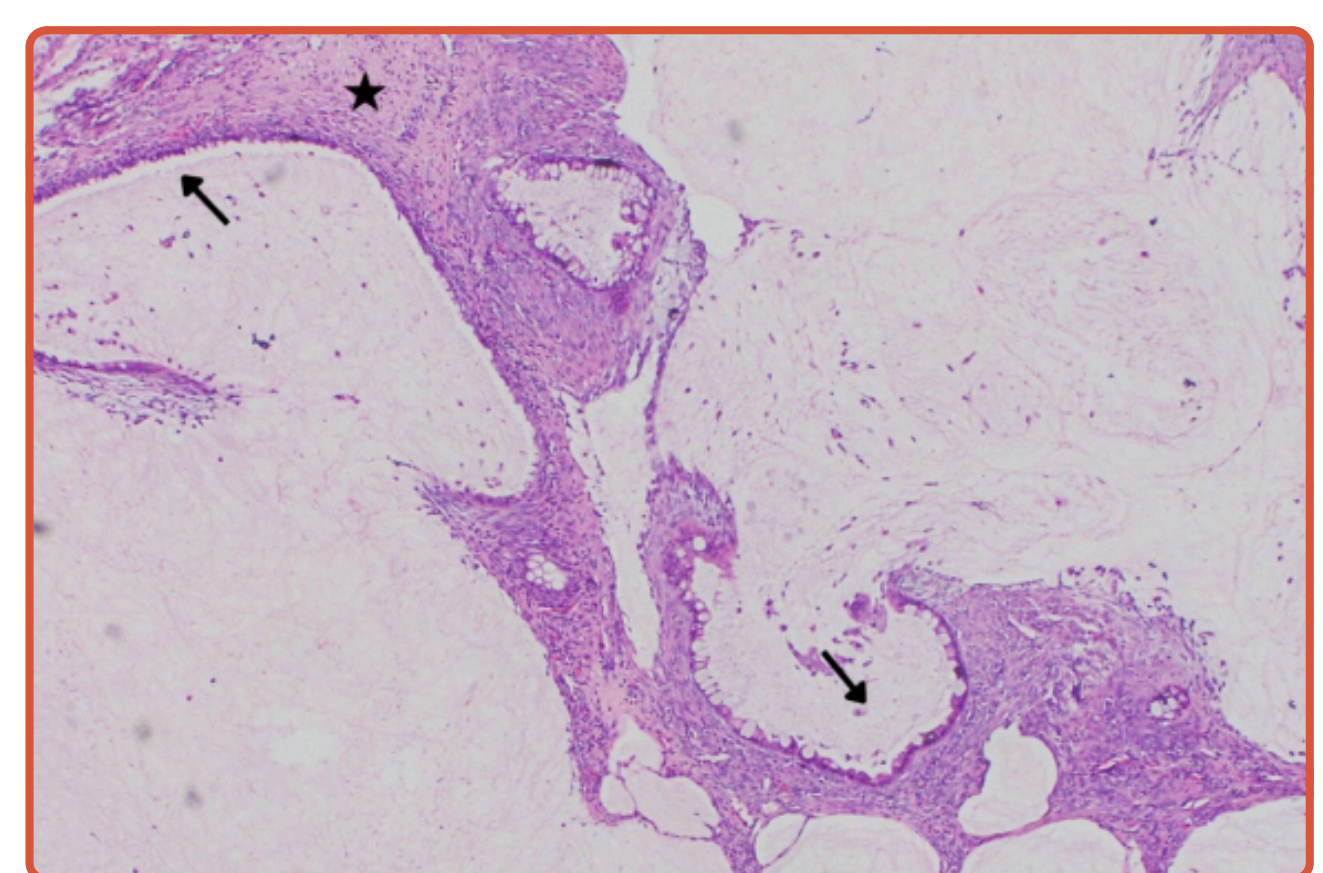
Right ovary with 2 co-existing ovarian cysts. Ovarian Collision Tumor



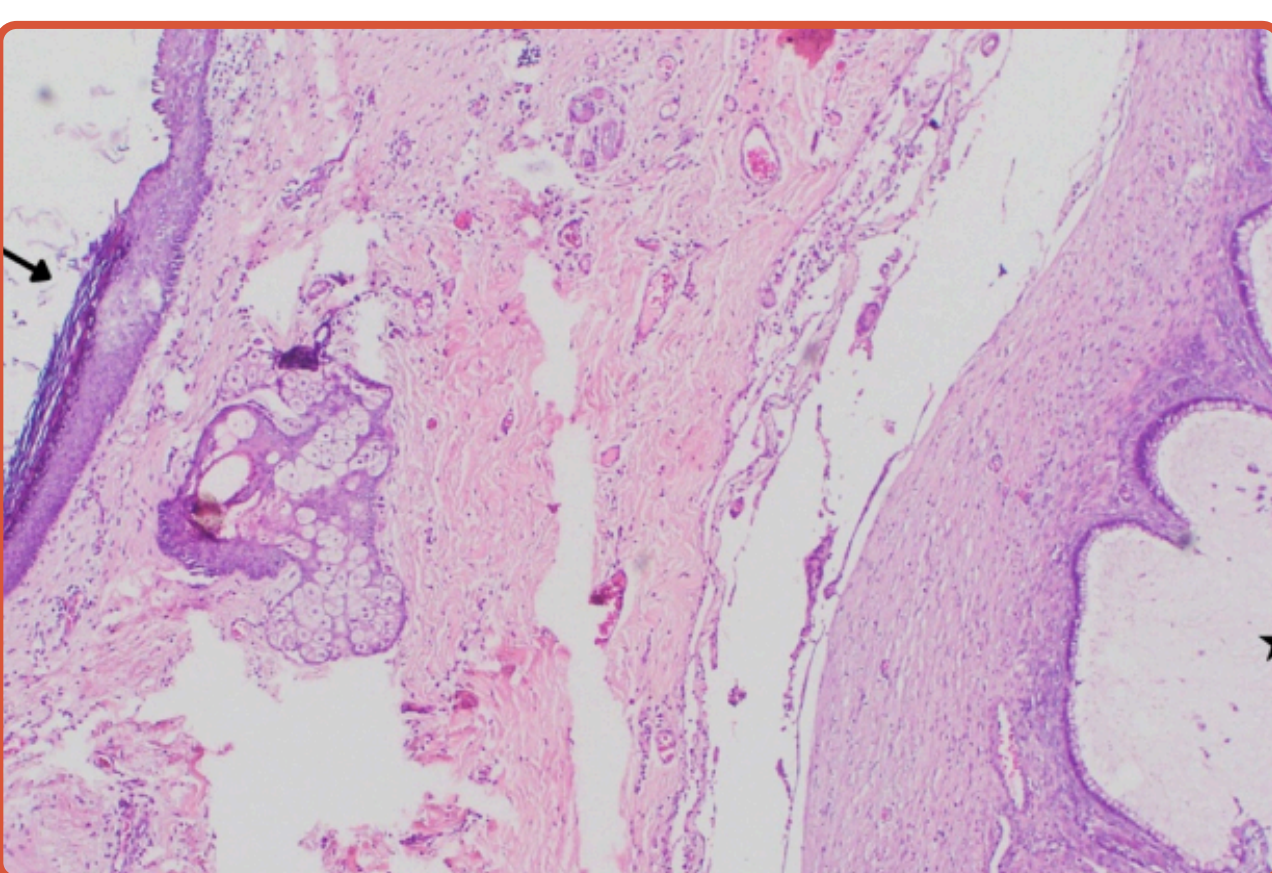
Intraoperative gross finding of the bilateral ovarian cysts



Dermoid locule showing sebum, tufts of hair, and gelatinous fluid.



Pools of mucin dissecting the ovarian stroma lined by mucinous epithelium (H&E, x400).



Mature cystic teratoma adjacent to mucin pools (H&E, x400).

DISCUSSION

-  Rare **triple collision tumor**.
-  Histopathology confirmed **three distinct tumors**.
-  Imaging suggested **dual pathology**.
-  **Multidisciplinary management** enabled accurate diagnosis and complete excision.

CONCLUSION

This rare triple collision tumor highlights the importance of meticulous histopathological evaluation and multidisciplinary management for accurate diagnosis, complete excision, and long-term surveillance.