

EP 1592 : A Case series of Smooth Muscle Tumor of Uncertain Malignant Potential (STUMP): A Rare Entity

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Introduction

Smooth Muscle Tumour of Uncertain Potential (STUMP) is a group of uterine neoplasm which cannot be definitely classified as benign or malignant according to histology criteria. The incidence of STUMP is reported as 0.01% in the literature. However due to rarity and dilemma in diagnosis, real incidence of this tumour is unknown. This thought to be a transition between leiomyoma and leiomyosarcoma or possibly undiagnosed low grade leiomyosarcoma. We present two case reports of STUMP.

Discussion

STUMP presents with the symptoms similar to leiomyoma. The mean age of presentation is reported as 43 years. Due to rarity of the disease, demographic data and data on risk factors are limited. All these make the pre-operative diagnosis impossible and most of the time it's diagnosed post hysterectomy, myomectomy or polypectomy.

STUMP has been shown to recur, metastasize and transform to leiomyosarcoma. However, they are slow growing and metastasize later when compared to leiomyosarcoma. Studies reported recurrence rate of 11% with the duration of 51 months (range from 15 months to 9 years). Therefore, follow-up recommended at least 6 monthly for 5 years and annually for 5 years after hysterectomy.

Conclusion

STUMP is a rare uterine neoplasm with paucity of literature available to plan follow-up and definitive treatment plan especially in young woman who desire fertility.

Case Series

Our first patient is a 49-Year old multiparous woman, presented with history of regular heavy menstrual bleeding for 2 years, which was affecting her quality of life. On examination patient was pale, found to have an 18 weeks size anteverted uterus. Ultrasound scan revealed a multiple fibroid uterus and her hemoglobin was 93 g/dL. She underwent Total Abdominal Hysterectomy and Bilateral salpingectomy and recovered without any complications. Histology revealed multiple intramural leiomyoma with one of them was STUMP. Patient was counselled, referred to gynec oncology team and planned to follow-up 6 monthly for recurrence or distant metastasis.

Second patient is a 40-year-old multiparous woman presented with incidental finding of a large cervical polyp during routine pap smear. Her only symptom was discomfort during sexual intercourse. USS pelvis showed a normal uterus and ovaries. She had a cervical polypectomy and histology confirmed 40x35x20 mm lesion with features of STUMP. Patient further counselled on the condition and patient decided to go ahead with hysterectomy as no further fertility wishes. She underwent total abdominal hysterectomy and bilateral salpingectomy. Further plan was made with gynec oncology team to follow her up 6 monthly for recurrence and metastasis.