

Clinical Image

A Rare and Aggressive Uterine Cancer: Carcinosarcoma

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1. Case Presentation

Uterine carcinosarcoma (UCS), previously known as malignant mixed Mullerian tumor, is a very rare tumor of the female reproductive tract, composed of both high-grade sarcomatous and carcinomatous elements [1]. In the United States its incidence is 1-4 per 100,000 women, is more frequently found in black women and the median age at diagnosis is between 62-67 years old [1]. Risk factors for developing UCS include advanced age, obesity, nulliparity, exogenous estrogen use, pelvic radiation, and tamoxifen [2]. Due to its aggressive nature, up to 60% have an extrauterine disease at presentation [3]. A pelvic ultrasound is the first-line imaging study. The typical

appearance is a heterogeneous solid intrauterine mass with an irregular shape, hypoechoic and septated cystic echotexture, an ill-defined boundary, possible expansion of the endometrial canal, and abundant blood flow signals [4, 5]. UCS has a worse prognosis compared to other high-risk uterine endometrial cancers, with reported five-year disease-specific survival rates of 59% for stage I/II disease, 22% for stage III disease, and 9% for stage IV disease, regardless of therapy [2].

This image concerns a 58-year-old P1G1 woman with postmenopausal uterine bleeding and pelvic pain over the past 2 months. Ultrasound assessment, with endovaginal (Figure 1) and abdominal probes, revealed an enlarged uterus reaching the supraumbilical level and bearing a solid tumor with

multiple cystic areas and a color Doppler score 4. The Pipelle sampling confirmed the diagnosis of

carcinosarcoma in this patient who died two days later.

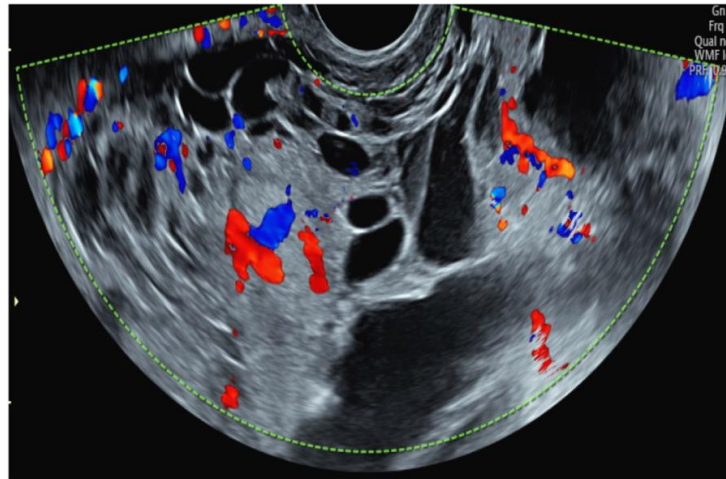


Figure 1: Ultrasound assessment, with endovaginal.

Transvaginal ultrasonography is appropriate for an initial evaluation of postmenopausal bleeding. Endometrial thickness of 4 mm, or less, has a greater than 99% negative predictive value for endometrial cancer [6]. The ultrasound is not accurate to distinguish carcinosarcomas from other endometrial malignancies since the features of high-grade endometrial cancer also include heterogeneous echogenicity, high Color Doppler score, multifocal vessel pattern, and irregular myometrial-endometrial junction [6]. However, symptoms and clinical signs, along with the recognition of suspected ultrasound features presented here, should trigger prompt medical assistance to improve patient survival.

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