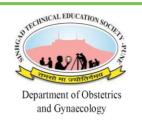


Poster Number: EP102

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Title: Unusual Presentation of Metastatic Carcinoma Cervix With Clinically Silent Primary





Introduction

• Carcinoma Cervix: Most common gynecological malignancy in Indian women. Common Symptoms: Abnormal vaginal bleeding. Unusual vaginal discharge. Post-coital or postmenopausal bleeding. Rare Presentation: Distant metastases without local symptoms. Histology: Squamous Cell Carcinoma: 70%. Adenocarcinomas: 25%.

Case report & investigation

Patient Presentation & History:

Patient: 45-year-old female.
 Symptoms: Neck swelling for 2 months. Dysphagia for 20 days.
 LMP: 20 days ago.



Gynecological Examination:

OBGYN Consult: To rule out malignancy. Complaints: No P/V bleeding or discharge. P/S Exam: Cervix and vagina healthy, white discharge (+), non-tender. P/V Exam: Uterus 6 weeks anteverted, bilateral fornices free.

Physical Examination:

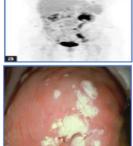
• Vitals: Stable. Neck Exam: 1x1 cm firm swelling (left side), multiple mobile, non-tender lateral swellings. Abdomen: Unremarkable. P/R Exam: Normal rectal mucosa with bulky cervics

Diagnostic Imaging & Findings:

 Histopathology: Cervical lymph node metastasis from SCC with perinodal spread. Ultrasound: Cervical lymphadenopathy. CT (A+P): Conglomerated, non-necrotic abdominal lymphadenopathy. Ill-defined lesion in posterior & left lateral wall of urinary bladder (suggestive of neoplastic etiology, possibly lymphoma). Bulky uterus.

Pap Smear Results & Histopathological Findings

- Pap smear –s/o LSIL
- Colpo-positive for acetowhite area
- An F18-FDG PET-CT avid lesions in the uterine cervix & body (multifocal primary)
- Type of Histopathology Specimen:- I)
 Endometrial curettage -Proliferative endometrium
 II) Cervical biopsy-Squamous Cell Carcinoma



Result:

• Squammous cell Carcinoma of cervix with distant metastasis to cervical lymph nodes belongs to stage 4B

Follow up

The patient was referred to Cancer Institute for further treatment with chemoradiation therapy. The treatment plan includes 7 cycles of concurrent chemoradiotherapy. The patient has completed 2 cycles of therapy so far & is currently experiencing nausea ,vomiting & generalized body weakness

Discussion

Cervical cancer, though preventable with screening, remains a major cause of morbidity & death, especially in developing countries like India, where many cases are diagnosed late. In carcinoma of unknown primary, the primary site is often asymptomatic. Recent advances have made PET/CT a crucial & cost-effective tool for detecting unknown primary cancers. However, except for sporadic reports, there are no data available regarding the incidence of primary gynecological malignancies identified by PET in patients with unknown primary.

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