

Invasive Villoglandular Adenocarcinoma Of The Cervix With Unusual Clinical Presentation: A Rare Case

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Abstracts: The incidence of cervical adenocarcinoma has increased over the last several decades. Villoglandular adenocarcinoma of the cervix (VGA) is a distinct subset of cervical adenocarcinoma, is very rare and occurs in young women. We report an extremely rare case of invasive villoglandular adenocarcinoma of the cervix in a 75 year old woman with unusual clinical presentation. [Kaore B et al NJIRM 2013; 4(1) : 140-141]

Key Words: Cervical Adenocarcinoma, Villoglandular Adenocarcinoma of the Cervix, incidence, invasive

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Introduction: Pap Smear Screening programs have reduced the incidence of squamous carcinoma of cervix¹. But incidence of adenocarcinoma of cervix has increased by even up to 15% and carries worse prognosis than squamous carcinoma^{2,3}. This shows that even well organized pap Smear Screening programs have failed to protect women from the development of adenocarcinoma of cervix⁴.

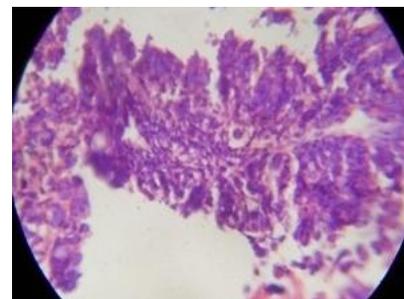
Furthermore there are reports of increased incidence of adenocarcinoma of cervix in younger women less than 55 years age with suggested link between the development of disease and oral contraceptive use and human papilloma virus^{5,6}. Although the incidence of adenocarcinoma of cervix is increasing, the absolute number of cases remains relatively small and only 154 cases have been described in literature of micro invasive adenocarcinoma of cervix.

Further Villoglandular Papillary Adenocarcinoma (VGA) of the uterine cervix is a distinct subset of adenocarcinoma of cervix which occurs primarily in young women and has an excellent prognosis^{3,7}. VGA - Villoglandular Papillary Adenocarcinoma is very rare, only about 56 cases of VGA have been reported so far in world literature³.

VGA is extremely rare in older age group. We report an extremely rare case of invasive Villoglandular Adenocarcinoma of the Cervix in a 75 year old female with unusual clinical presentation

Case study: A 75 year old female presented with history of blood spotting (not bleeding) per vagina twice or thrice a month since last six months. Clinical examination of the patient showed cervix was slightly hypertrophied, no evident bleeding per vagina, no areas of ulceration or hemorrhages. No tumour mass was seen over the cervix except a tiny 2-3mm raised area over Endocervix, Biopsy included this part of cervix. Biopsy was taken from 1) Endo Cervix 2) external os of cervix 3) Endometrium. It was subjected for histopathological examination

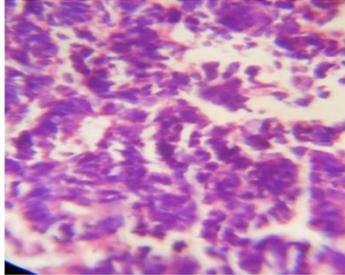
Histopathological examination showed: The biopsy tissue from the cervix showed glands lined with compactly placed malignant cells. Some glands showed marked proliferation of malignant cells forming villous pattern. some areas showed solid masses of malignant cells in the stroma. (photograph no.1)



Photograph no 1. Showing glands lined with proliferated malignant cells forming villous pattern

The biopsy tissue from the external os of the cervix showed malignant cells in alveolar pattern with marked proliferation of malignant cells forming villi. (photograph no .2) The biopsy tissue from

the Endometrium showed marked atrophied glands with fibrocollagenous tissue in stroma (senile atrophic changes of Endometrium)



Photograph no. 2 showing glands lined with malignant cells and groups of malignant cells invading stroma

Discussion: The incidence of adenocarcinoma of cervix is increasing but absolute number of cases remains relatively small. Villoglandular adenocarcinoma of Cervix (VGA) is a distinct subsett of Cervical adenocarcinoma that occurs in young women. About 56 cases of VGA have been reported world wide with occasional cases showing disease spread³. Thus VGA is a very rare entity.

Young and Scully⁸ presented clinicopathologic features of VGA in 13 patients. Similarly clinicopathological study of VGA was done by Jones MW et al in 24 cases⁹.

Histopathological findings in the present case are similar to that presented by above authors. Thus even though VGA is very rare in older women, any post menopausal bleeding / spotting should be thoroughly investigated including biopsy from cervix so that any malignancy of cervix can be detected and managed at an earlier stage

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