Unusual Cause of Post-Menopausal Metrorrhagia: Uterine Choriocarcinoma

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Clinical Image

We present the case of a 64-year-old woman with no significant medical history admitted for post-menopausal metrorrhagia associated to pelvic pain. Clinical examination was normal.

The abdominal and transvaginal ultrasound revealed a huge hypervascularized tumor occupying the corpus of uterus and extended to the isthmus and the cervix. The pelvic MRI showed a heterogeneous mass of the corpus extended to the cervix of uterus. The T2-weighted imaging showed variable signal intensities including hyperintense and hypointense areas (Figure 1). Dynamic MRI revealed early enhancement of the peripheral zone of the tumor and no enhancement of the central zone (Figure 2).

For that a cervical biopsy was performed which was in favor of a choriocarcinoma. The patient underwent a thoraco-abdomino-pelvic CT scan which showed no distant metastasis. The patient received multiple agent chemotherapy with EMACO regimen which is the most commonly used initial regimen for high-risk disease. The clinical and radiological evaluations showed a progression of disease.

Keywords: Abdomen; Tumor; Metrorrhagia

Figure 1: The T2-weighted imaging showed variable signal intensities including hyperintense and hypointense areas.

Figure 2: Dynamic MRI revealed early enhancement of the peripheral zone of the tumor and no enhancement of the central zone.

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