jmr Junior Medical Research

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Images in clinical practice

Ovarian Yolk Sac Tumor: Report of two cases.

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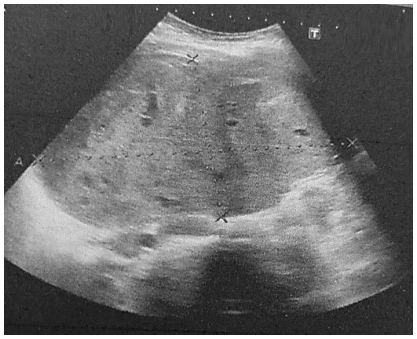
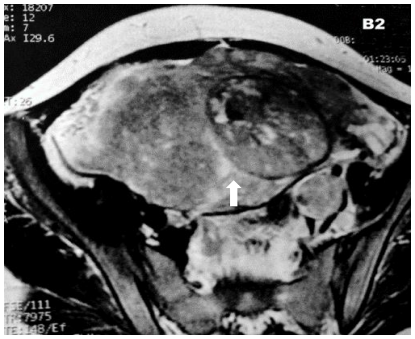
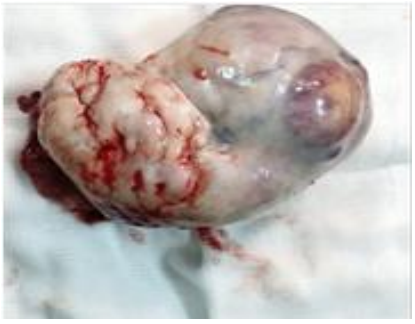
Publication Data:
Submitted: February 2,2022
Accepted: April 27,2022
Online: June 30,2022

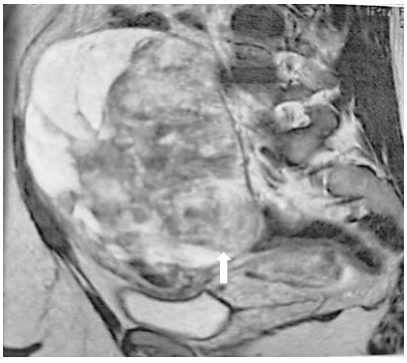
This article was subject to full peer-review.

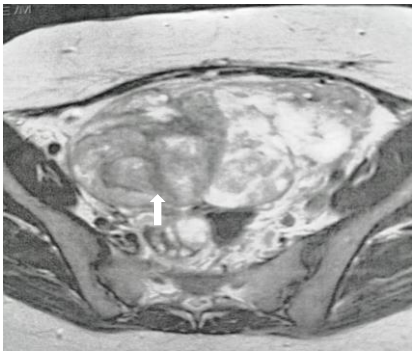


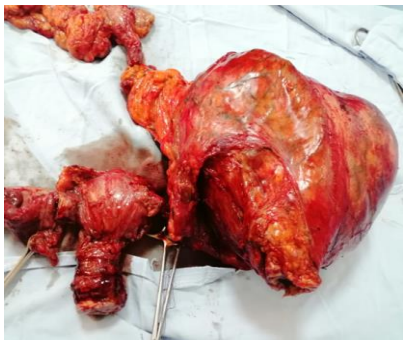




Case 1
A 14-year-old girl presented with a large palpable pelvic mass. The ultrasonography and pelvic MRI revealed a huge ovarian suspicious mass. The patient underwent left salpingo-oophorectomy and histopathology findings were consistent with ovarian yolk sac Tumor. Initial postoperative course was uneventful. Adjuvant cisplatin-based chemotherapy was indicated. The patient died from severe sepsis after the first sessions.







Case 2
A 28-year-old female presented with abdominal distension and pelvic recurrent pain. Ultrasound and pelvic MRI revealed left huge solid adnexal mass. A scan-guided biopsy confirmed yolk-sac ovarian tumor. Intraoperative findings were a voluminous ovarian of 20 cm adherent to the sigmoid and small bowel. A monobloc resection was performed.
The postoperative course was uneventful. Adjuvant cisplatin-based chemotherapy was indicated. Currently the patient is in complete remission at one year follow up.

Citation: Zgaya R, Abid S, Abdelmoula G, Smida S, Sassi B, Khairi H. Ovarian Yolk Sac Tumor: Report of two cases.Jr.med.res.2022;5(1): 16-17.
 https://doi.org/10.32512/jmr.5.1.2022/16.17
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Comments

Yolk sac tumor (YST) is a rare malignant tumor accounting for less than 1% of all ovarian malignancies. YST are the second most common malignant ovarian germ cell tumor (MOGCT). More than two third f cases are diagnosed in young female patients. Typical clinical presentation is an abdominal painful mass. Ovarian YST is usually large on presentation. The diameter may reach 50 cm in some cases [1]. Elevated AFP is almost high in YST and maybe useful for the postoperative remission monitoring. Magnetic resonance imaging is the most accurate radiological investigation. Despite the high malignancy character, these tumors are curable by complete surgical excision combined with chemotherapy specially in early diagnosis cases [2]. Adjuvant chemotherapy should be selected to simultaneously target epithelial ovarian tumors and germ-cell tumors due to the probability of histological association. Platinum-based chemotherapy is recommended. The overall 5 years survival may reach 90% for treated cases [3].

Conflict of Interest: None

References

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