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Gynaecological Ultrasound Case 2

October 2021

Clinical details:

GP patient.

56 y/o female. RIF pain. Persistent bloating. Generally lethargic.

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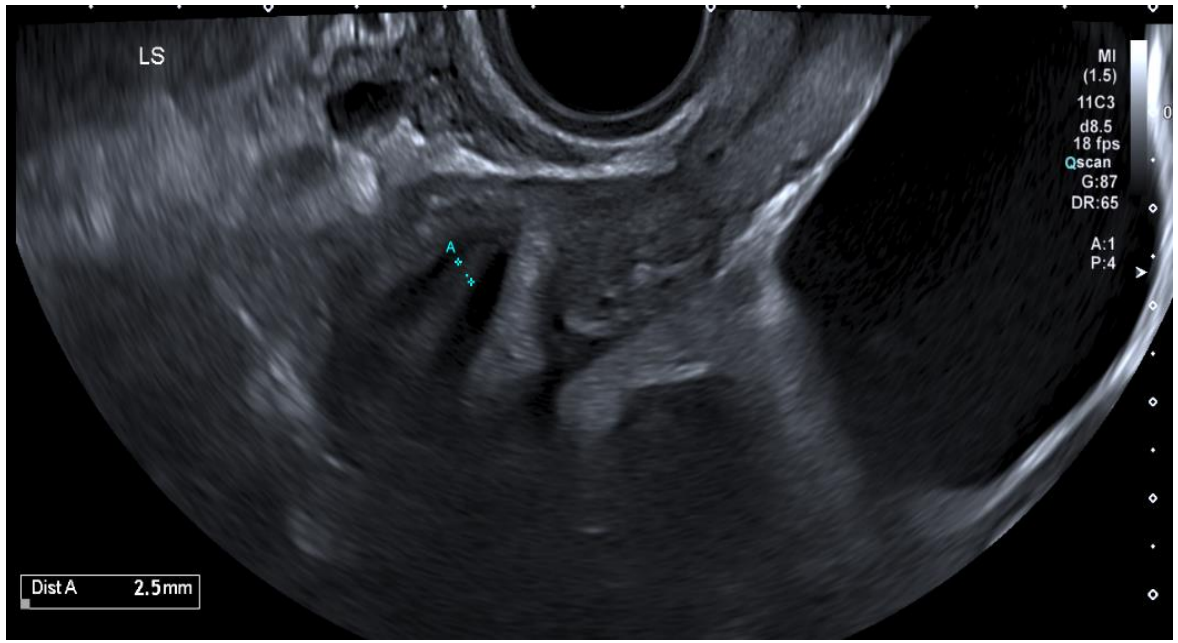
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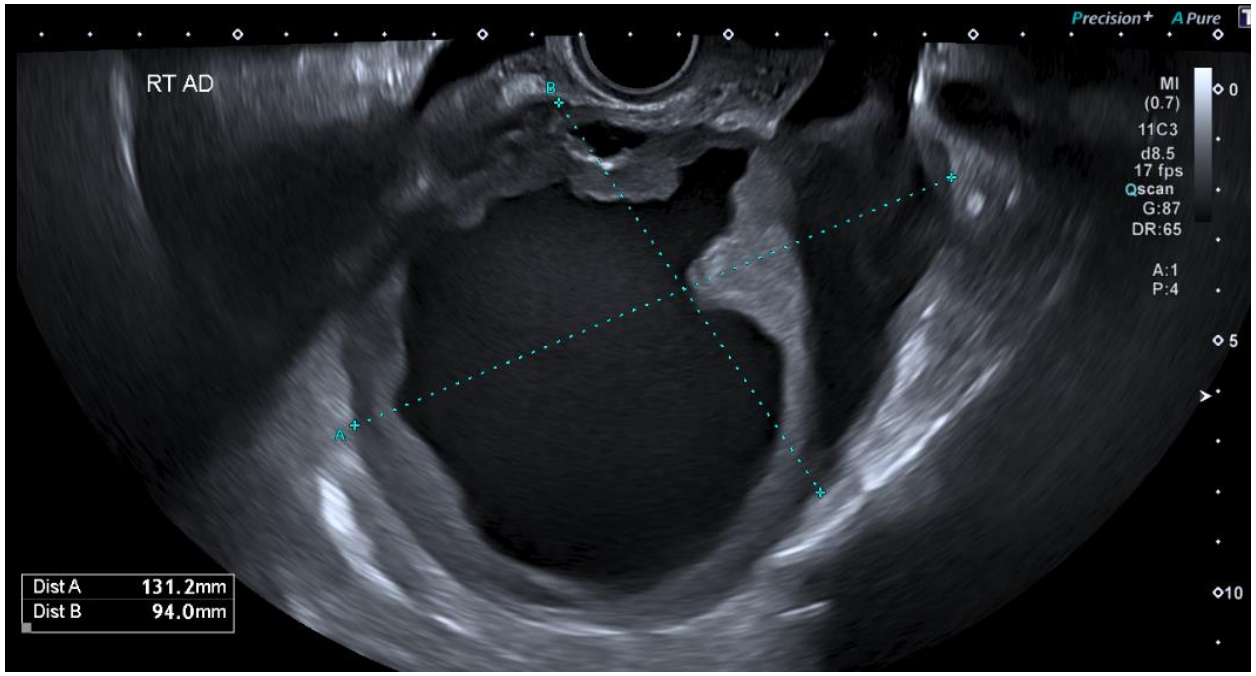
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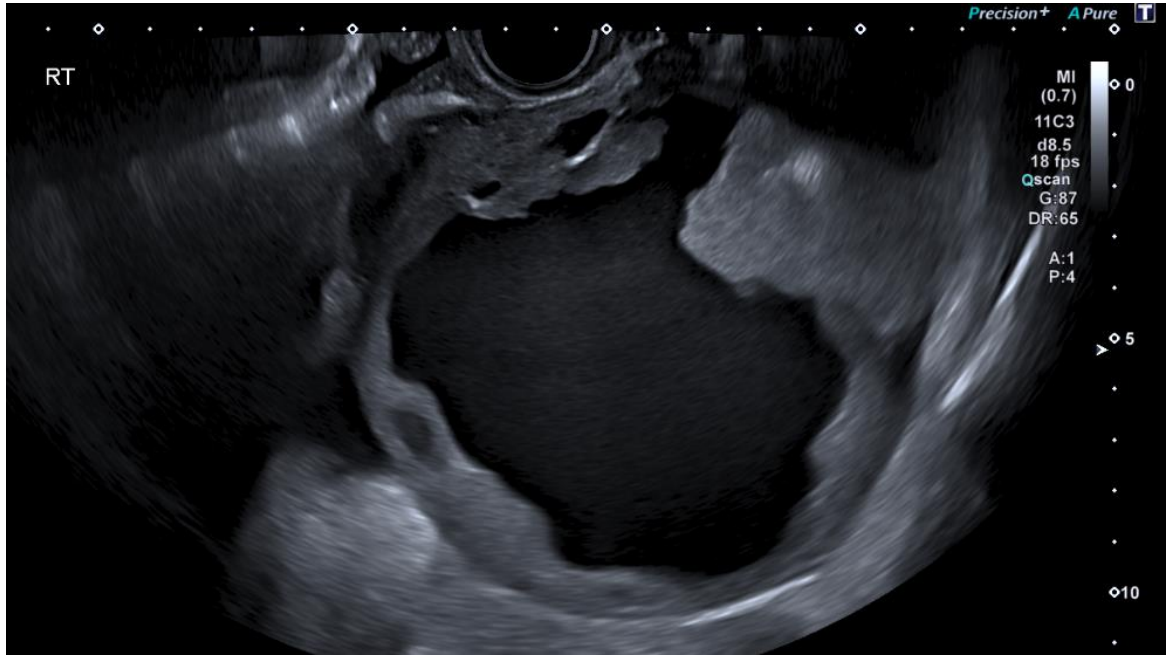
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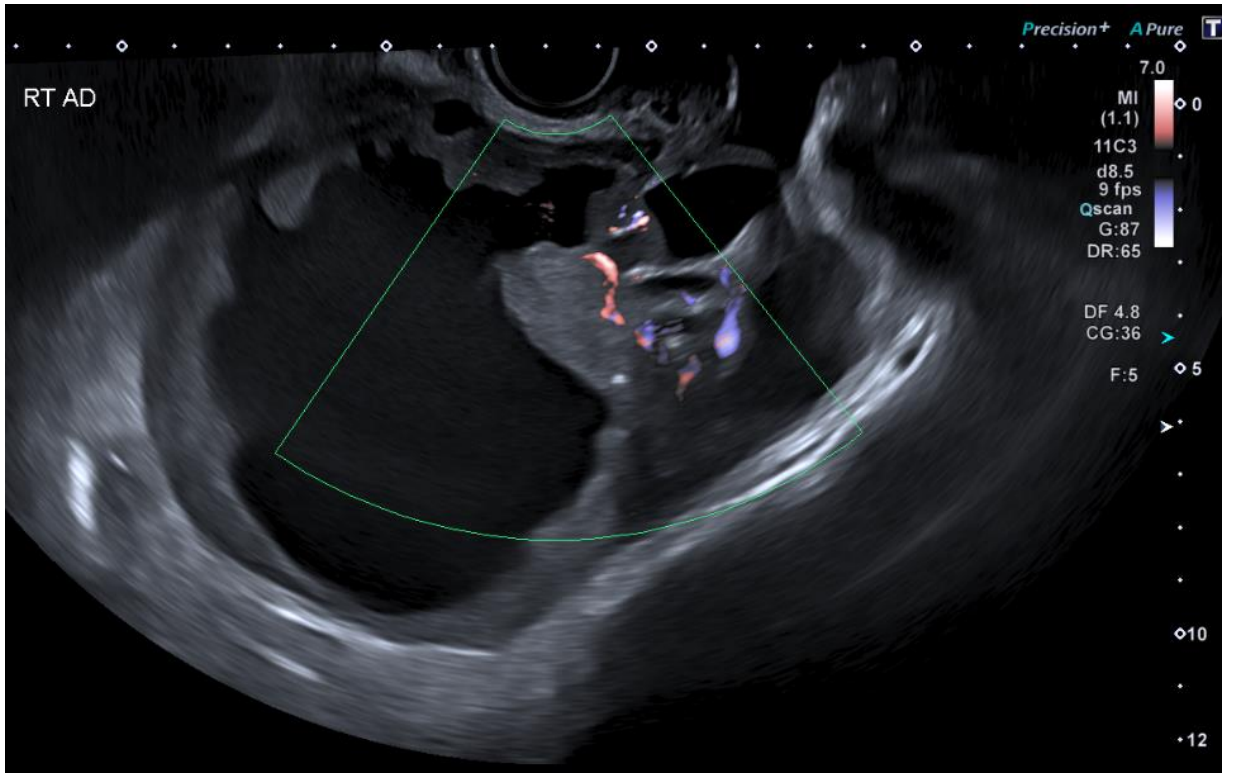
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12

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Do not progress to next slide until you have attempted to write a report

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US Report:

Arising within the right adnexa there is a 13 x 9 cm unilocular mass with irregular and large vascular papillary projections. Appearances are highly concerning for ovarian malignancy.

Conclusion:

Grossly abnormal appearance of the right ovary suspicious for malignancy. Urgent gynaecological referral required.

Patient is aware there is an ovarian abnormality, however is unaware that the differential diagnosis is malignancy.

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Ovarian Cancer Fact File

Epidemiology:

Incidence increases over the age of 50 and is usually seen in postmenopausal women

Risk factors:

Family history (genetics - BRCA gene mutation), HRT, endometriosis, obesity/raised BMI, smoking, asbestos exposure

Symptoms:

Red flag symptoms (early satiety, weight loss, lethargy), persistent bloating, abdominal pain, increased urinary frequency

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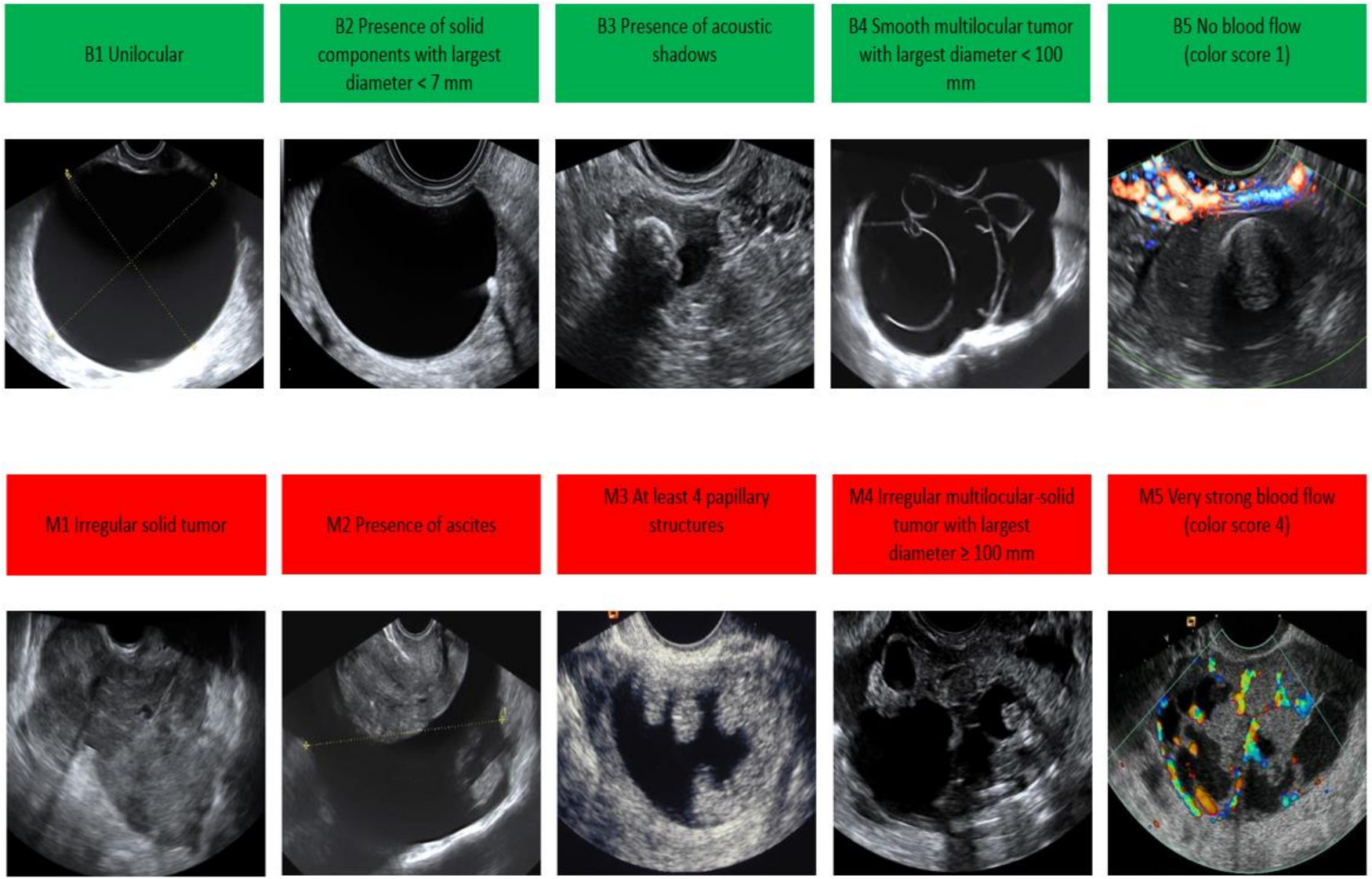
Malignant vs Benign Ultrasound Features

The ‘IOTA rules’ offer a reliable tool for determining whether ovarian lesions are malignant or benign. If the lesion has all M features – it is malignant. If it has all B features, then it is benign. If it has features of both then it is equivocal and requires further investigation