

Case Report

An Incidental Discovery of Mucinous Cystadenoma of Undetermined Malignant Potential: Ileo-caecal junction cystic mass: A Case Report with Review of Literature

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ABSTRACT:

Mucinous cystadenoma of undetermined malignant potential of ileocaecal junction is an uncommon low-grade neoplasm that develops in 0.004-4% of all the appendectomies. It is characterized by submucosal tumour in the ileo-caecal region along with cystic mass with mucin collection involving muscularis propria. In later stage, it can lead to perforation/ spillage of the content in the peritoneal cavity causing pseudomyxoma peritonei. In our case, patient is a 55-year old, postmenopausal female who presented with caecal mass and progressive abdominal pain with recent history of laparoscopic appendectomy done two months ago and histopathology report was given as fibromuscular structure. Exploratory laparotomy was done and we received specimen of caecum and part of ileum, after histopathological and other significant correlation, case was suggestive of "Mucinous Cystadenoma of Undetermined Malignant Potential- Ileo-caecal Junction Cystic mass", a rare entity of probable appendiceal origin.

Key words: Mucinous cystadenoma, cystic mass, ileo-caecal junction.

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INTRODUCTION:

Low-grade mucinous cystadenoma of undetermined malignant potential is a rare benign tumour that is known to be associated with appendiceal tumour. [1][2]

Occurrence of this disease in the ileocaecal junction has been reported rarely and that's why need to identify this entity separately. [1-3]

It develops in 0.004-4% of all the appendectomies, as a cystic mass filled with mucin and is characterized by submucosal tumour. [2][3]

This condition still remains a diagnostic challenge. Therefore, histopathological confirmation is important for the confirmatory diagnosis.

CASE REPORT:

A 55-year old postmenopausal female came with complaints of progressive pain and lump in right iliac fossa. Abdominal examination revealed mass in the right iliac fossa. Ultrasound revealed well defined thick walled cystic mass measuring: 4x3x2 cm. History of recent appendectomy.

GROSS:

Received segment of ileo-caecal junction with attached cystic mass measuring: 14x3.5x2.5 cm. [Figure 1]

Cut surface: Well circumscribed cystic mass filled with mucin was seen situated in the wall of caecum measuring: 3.5x3x1.5cms. Cyst wall was thickened.



Figure 1: External surface: 14 X 3.5 X 2.5 cm Ileo-cecal junction with attached cystic lesion

MICROSCOPY:

Section from Ileo-caecal cystic mass show caecal lining epithelium.

Muscle layer shows a cystic mass lined by dysplastic mucinous lining epithelium containing mucin. [Figure2] [Figure3].

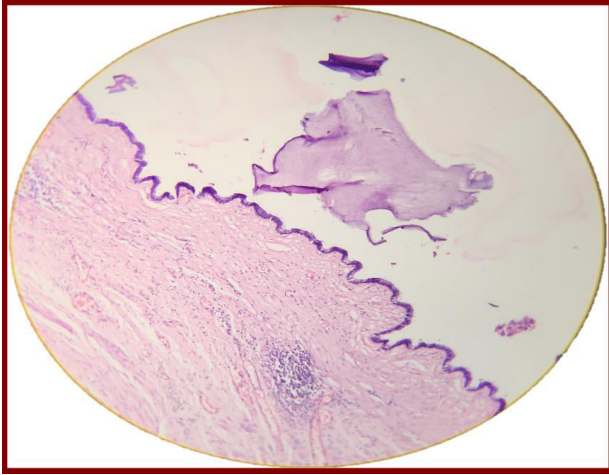


Figure 2: H & E Section (10X) Section Showing Cystic Mass Lined By Dysplastic Mucinous Lining Epithelium Containing Mucin

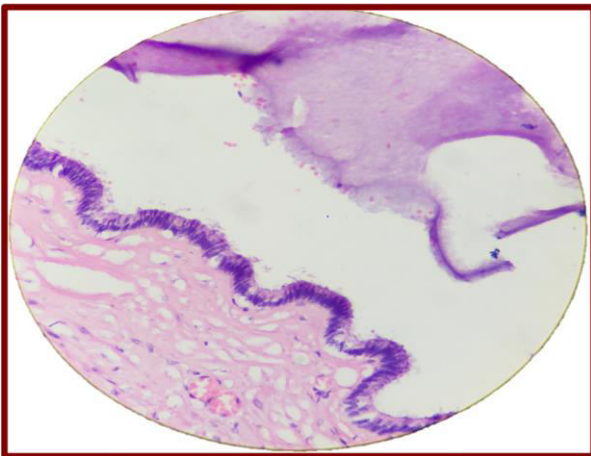


Figure 3: H & E Section (40X) Section Showing Cystic Mass Lined By Dysplastic Mucinous Lining Epithelium Containing Mucin

Submucosa and resected margins were unremarkable. Based on these findings a diagnosis of Histopathological diagnosis of Mucinous cystadenoma of undetermined malignant potential- ileocaecal junction cystic mass was made.

DISCUSSION:

Mucinous cystadenoma of undetermined malignant potential is a rare entity, approximately 25-50% are incidental finding during radiological/ endoscopic examination.^{[1][2]}

Presentation may vary from being asymptomatic to right lower quadrant abdominal pain or palpable abdominal mass. More common in women(4:1) ratio and age more than 50 years.^[1-3]

Differential diagnosis include acute appendicitis, diverticulitis, peritoneal carcinomatosis, ovarian mass(women), large caecal mass, retroperitoneal cyst.^{[2][3]}

As this mass has potential for malignant transformation, follow-up is recommended in six months.^[1-3]

Patients with benign mucocele have excellent prognosis(5-year survival rate of 91-100%) even with extension into the extra appendiceal space. However, 5-year survival rate falls to approximately 25% in malignant mucocele.^[2]

Complications include perforation and pseudomyxoma peritoneum.^{[1][3]}

Therefore, histopathological confirmation is needed to exclude other differential diagnosis and in such suspicious cases.

CONCLUSION:

Even though mucinous cystadenoma of undetermined malignant potential is rare, recognition of this lesion and surgical resection is important as they have potential for malignant transformation.Hence, awareness of this condition is important for reducing its associated morbidity and mortality.

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