Liposarcoma of the Uterine Cervix in Nigeria: Case Report

Wilson Onuigbo¹* and Obioma Okezie²

¹Department of Histopathology, University of Nigeria Teaching Hospital, Nigeria
²Department of Obstetrics and Gynaecology, University of Nigeria Teaching Hospital, Nigeria

*Corresponding author: Wilson Onuigbo, Department of Histopathology, University of Nigeria Teaching Hospital, Enugu 400001, Nigeria, Tel: 2348037208680; E-mail: wilson.onuigbo@gmail.com

Received: 20 Sep, 2016; Accepted: 26 Oct, 2016; Published: 31 Oct, 2016


Abstract

A case of primary liposarcoma of the uterine cervix is described in a 65-year-old woman of the Igbo Ethnic Group in Nigeria on the basis of cytological features following cervical cone biopsy. This appears to be the second Nigerian case. She complements the recent cases from other parts of the world.

Keywords: Uterus; Cervix; Liposarcoma; Epidemiology; Nigeria

Introduction

A massive review of uncommon sarcomas of the uterine service was carried out by Fadare [1]. Concerning liposarcoma, it was concluded that they are “extraordinarily rare.” Moreover, it was stated that “only four cases of pure liposarcoma of the cervix have been reported in the English literature.” These four had an average of 54 years (range 45–62). Therefore, it is of interest that the local case about to be presented was aged 65 years. Its appreciation was facilitated by a Birmingham (UK) group [2], which postulated that a histopathology data pool can facilitate the prosecution of epidemiological analysis. Such a pool, established by the senior author (WO), was used here and is deemed to be worthy of documentation.

Case Report

NI, a 65-year-old, Para 8, Nigerian woman of the Igbo Ethnic Group [3], consulted one of us (OO) with the complaint of bleeding through the vagina for 3 months. She had been postmenopausal for 10 years and the cervix was tumorous. After obtaining her consent, the necessary preliminary investigations were carried out. As all were negative, cervical cone biopsy was carried out.

Numerous crumbly pale masses up to 3.5 cm across were obtained and submitted to the Senior author (WO). At microscopy, after routine processing, normal tissue was not seen. Rather, there was replaced by a sarcomatous growth whose vacuolatory differentiation was striking. See accompanying Figure 1. Liposarcoma was therefore diagnosed. Unfortunately, as so often happens in the locality [4], she was lost to follow-up.

Figure 1 Liposarcoma of uterine cervix showing characteristic vacuolatory look.

Discussion

Literature search revealed some recent single case reports including the one from the Northern Region of this country, Nigeria [5]. Aged 45 years, her lipomatous growth was fungating and was deemed to be probably the first documented in the African literature.

Elsewhere, Karateke’s group [6] reported the case of the 23-year-old woman. She was presented as the first case detected as having occurred in the productive period.
From Japan, Takeuchi et al. [7] described the 49-year-old woman whose case was distinguished on the ground that “Most of the adipocytes and vacuolated lipoblasts were positive for S-100 protein.” Perhaps, I should add here the group [8] that considered their patient as being “the exceptionally rare case of a low-malignant liposarcoma of the uterus.”

In the case from Poland [9], the woman was aged 71 years and had isolated liposarcoma of the uterine corpus in association with preinvasive cervix cancer. From India [10], liposarcoma was regarded as the least common of the uterine cervical sarcomas, the others being, in descending order, embryonal rhabdomyosarcoma, leiomyosarcoma, undifferentiated endocervical sarcoma, alveolar soft part sarcoma, and Ewing’s sarcoma.

The only case with clear antecedent was that in which Tamoxifen treatment was mentioned [11]. In our case, such esoteric treatment did not take place. Unfortunately, follow up was not possible.

References