ISP404 Late recurrence of stage Ia ovarian mucinous cystadenocarcinoma in teenage patients: Case report and review of the literature
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Background: Epithelial ovarian carcinomas are uncommon in pediatric and adolescent patients. Fertility preservation is a topic of concern for teenage patients, and fertility-sparing surgery has been accepted for early-stage epithelial ovarian carcinomas in patients of reproductive age.

Case report: We report the case of a 21-year-old woman with recurrent ovarian mucinous cystadenocarcinoma originally diagnosed as stage Ia. At the age of 13 years old, this patient underwent a right salpingo-oophorectomy, and was diagnosed with right ovarian tumor. Pathological findings suggested ovarian mucinous cystadenocarcinoma with FIGO stage Ia (T1a, N0, M0). Nine years after complete resection, she was referred to our hospital with a complaint of respiratory discomfort. Chest radiograph and computed tomography (CT) scans confirmed multiple coin lesions in the bilateral lung. Transbronchial lung biopsy findings suggested metastasis of the previously resected ovarian mucinous cystadenocarcinoma. Fluorine-18 fluorodeoxyglucose positron emission tomography and computed tomography (FDG PET/CT) scans and bone scintigram showed multiple metastases. Despite receiving combination chemotherapy using carboplatin and paclitaxel, she died of disease at 5 months after the diagnosis of recurrence.

Conclusion: Although minimally invasive surgical treatment and adjuvant chemotherapy are feasible for reproductive age patients, several cases of recurrence of early-stage epithelial ovarian carcinoma treated with fertility-sparing surgery without adjuvant therapy in teenage girls have been reported. Long-term prognosis of teenage patients is not favorable as compared to that of adult patients. The strategy of surgical treatment, adjuvant therapy, and planning of further follow-up are important for teenage girls with early-stage epithelial ovarian carcinoma.