Laparoscopic Hysterectomy as Initial Treatment for Primary Cervical Choriocarcinoma: A Case Report

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HISTORY

Patient 19 y.o., White, BMI 34 kg/m²

G 2 P 1 A1 C1; RN born at term delivered on Sept 2020, LGA (3960g)

5-week abortion (?) in August 2023

- complete abortion (?) – without US & histology
- Primary complaint:
- intermittent vaginal bleeding (April 2024 – April 2025)
- combined oral contraception did not stop the bleeding

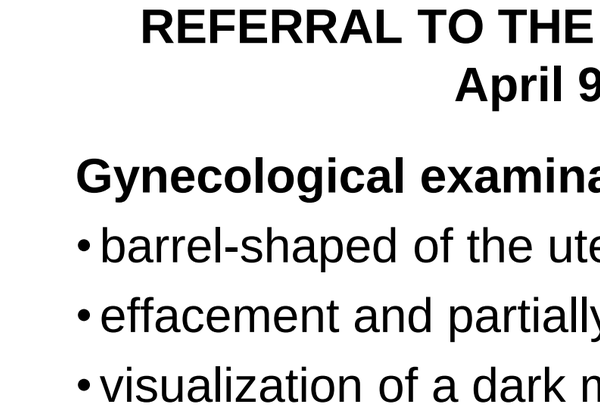
REFERRAL TO THE BOTUCATU TDC on April 9th 2025

Gynecological examination:

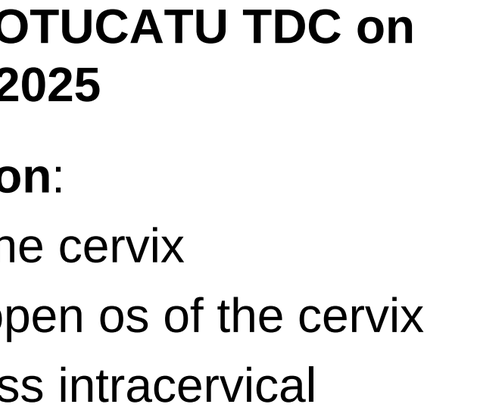
- barrel-shaped of the uterine cervix
- effacement and partially open os of the cervix
- visualization of a dark mass intracervical

- **Diagnostic impression:**
- Gestational trophoblastic neoplasia (GTN)
- Germ cell tumor (GCT)
- Cervical ectopic pregnancy (???)

INVESTIGATION BIOMARKERS & IMAGING



Pelvic US
Heterogeneous mass within the cervix
(60 x 54 x 49 mm)



MRI of pelvis
Expansive lesion in the cervix with plane of cleavage seen

BIOMARKERS

hCG quantitative test (23/04/2025) = 19 816 IU/L

(29/04/2025) = 19 742 IU/L

Other germ cell tumor markers: negative

(alpha-fetoprotein, cancer atigen 125, lactate dehydrogenase)

FIGO ESTAGING FOR GTN

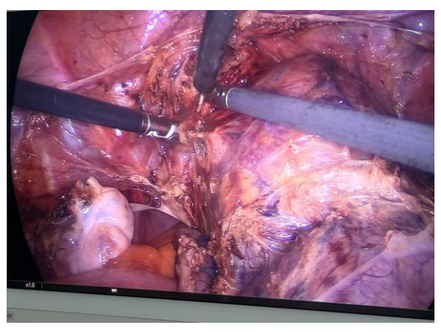
Considering potential GTN the FIGO staging/risk score was established ESTAGE I: RISK SCORE 9

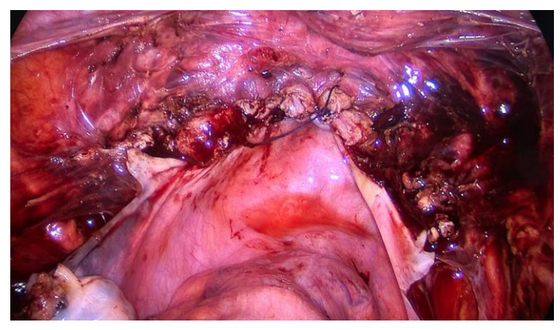
TREATMENT

Shared treatment decision-making

Multiagent chemotherapy or

Laparoscopic hysterectomy and postoperative close hCG monitoring





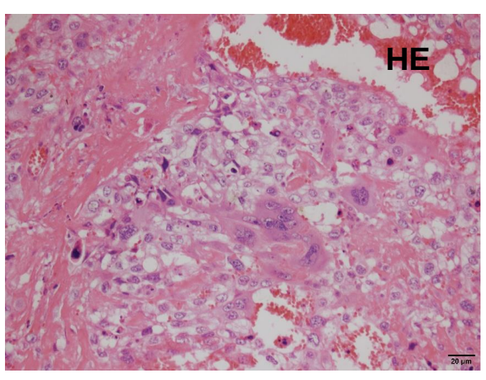
Patient's choice was video-laparoscopic hysterectomy

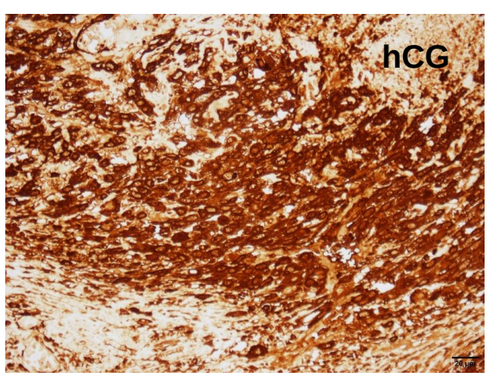


Uterine corpus, fallopian tubes, and distended cervix
Choriocarcinoma



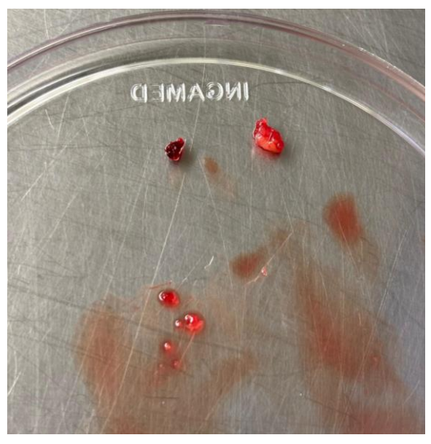
Opened uterus and cervix: dark purple mass filling the cervix





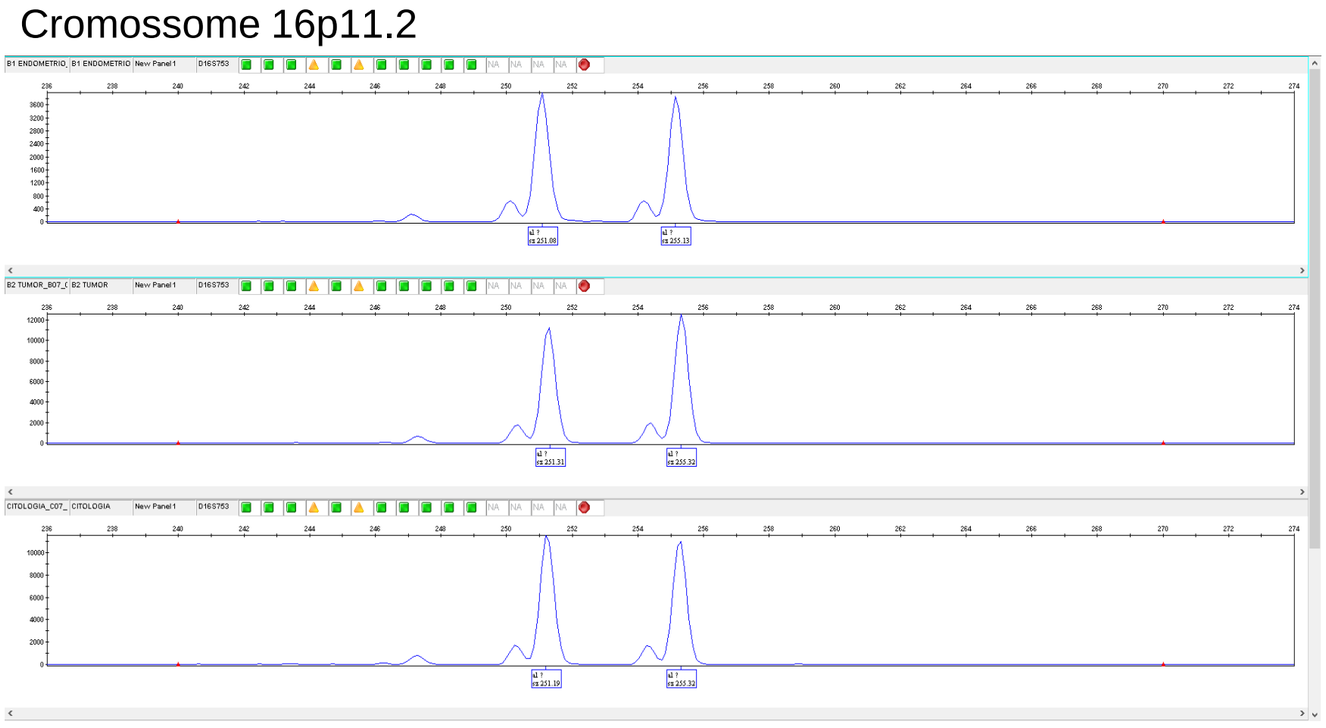
Histopathological & Immunohistochemical examination:
Phenotype of choriocarcinoma





Genetic analysis Samples: tumor, buffy-coat, and cervix

Cromossome 16p11.2



STR Genotyping: The tumor genotype was identical to the patient's own genotype, confirming a non-gestational origin.

COMMENTS

Choriocarcinoma affecting the female genital tract is categorized as gestational or non-gestational.

This case highlights the importance of genetic analysis in distinguishing between trophoblastic neoplasms of gestational and non-gestational origin.