

絨毛膜癌引起之產後出血:病例報告

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Objective: To report a case of choriocarcinoma presented as delayed postpartum hemorrhage.

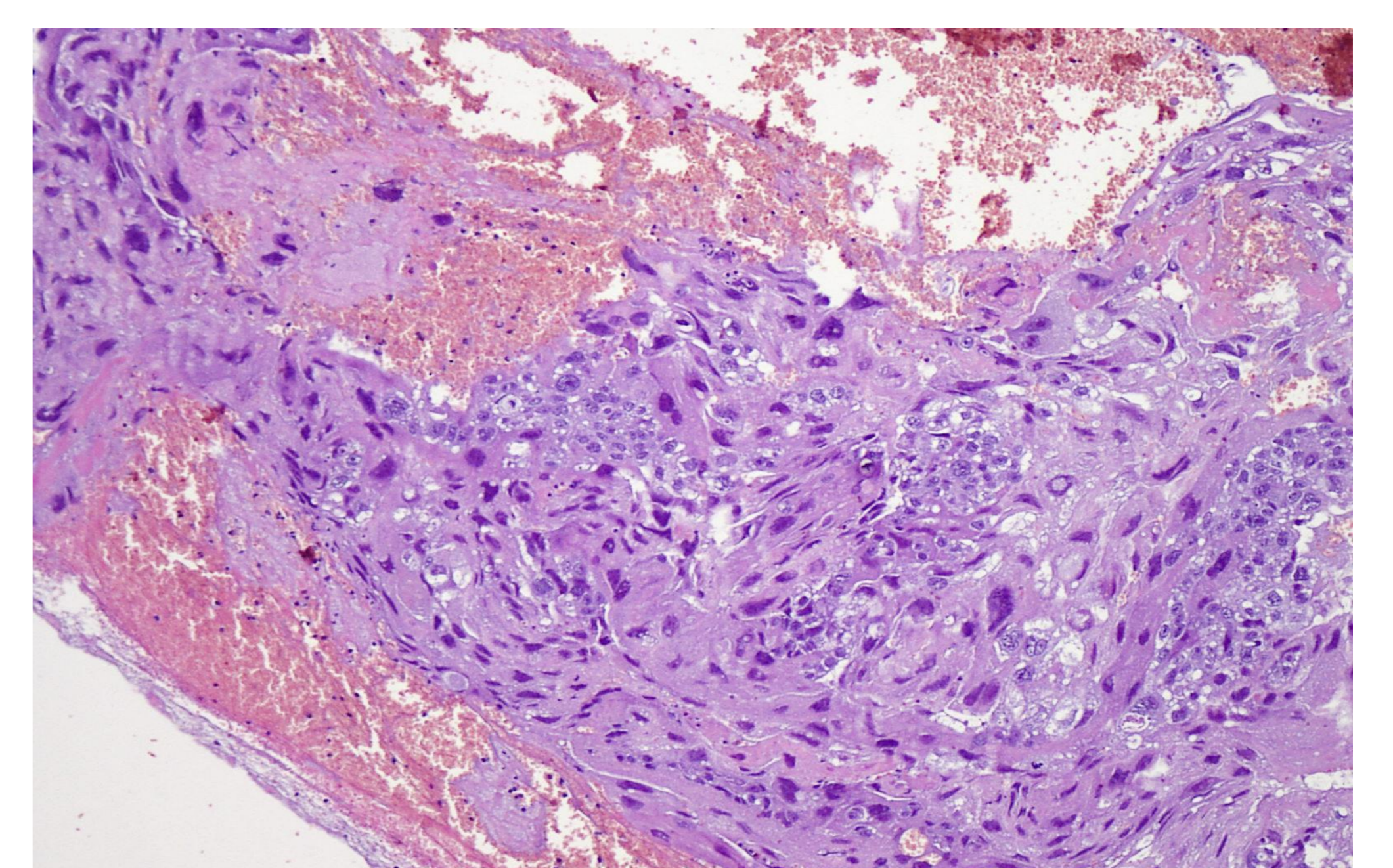
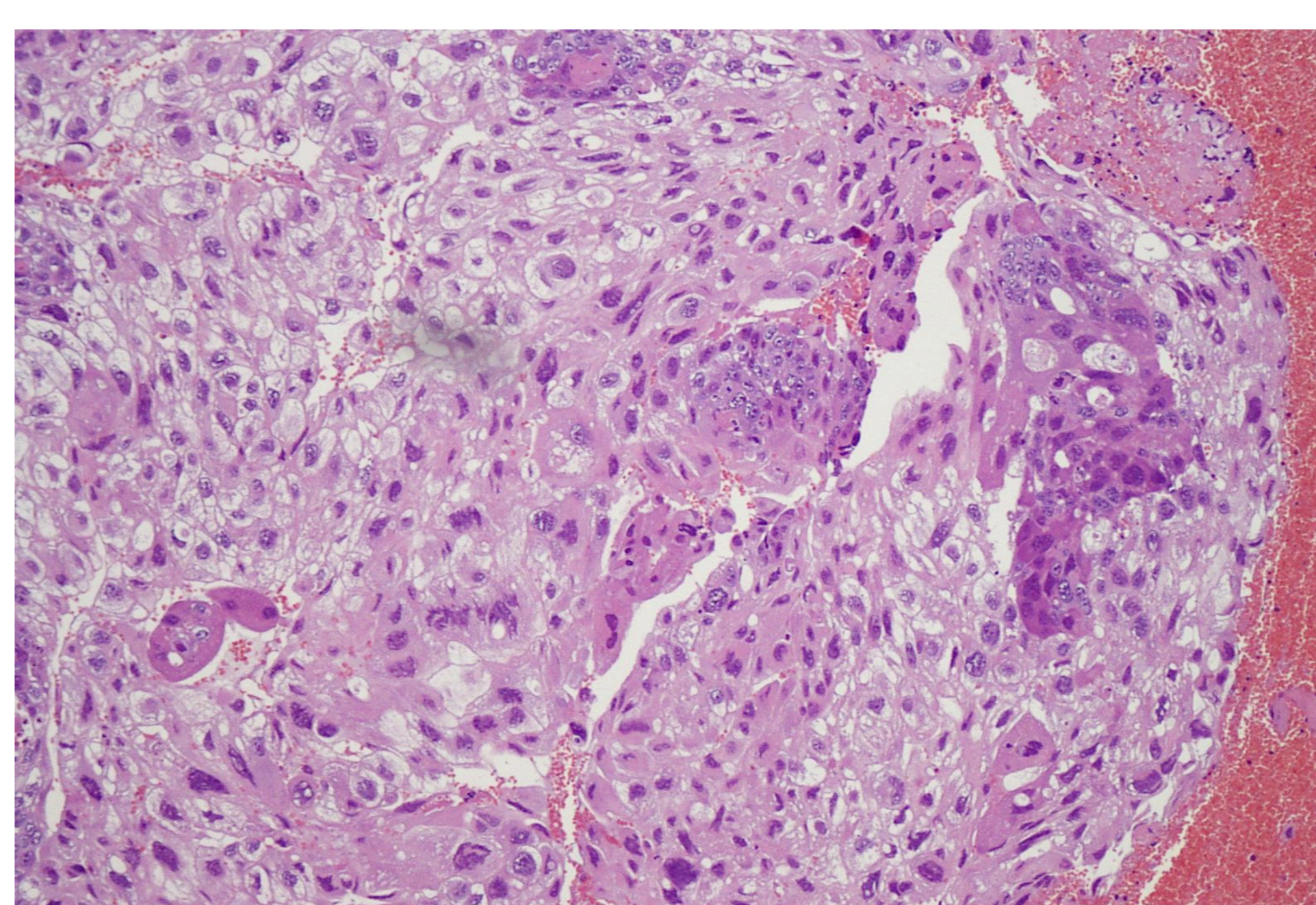
Materials&Methods: Choriocarcinoma is a rare but highly malignant trophoblastic neoplasm. We describe a case of choriocarcinoma diagnosed postpartum after term delivery of a infant. This 28-year-old housewife without systemic disease suffered massive vaginal bleeding one and half month after Cesarean section. She received Cesarean section due to cephalo-pelvic disproportion. The whole pregnant course was smooth. Two weeks after delivery, she noted intermittent vaginal bleeding and frequency of bleeding increased gradually. One day before admission, large amount of vaginal bleeding occurred. She was sent to hospital for help and accepted blood transfusion due to anemia (Hb:7 g/dl) and dilatation and curettage. β -HCG level was checked and level was 470,000 mIU/mL. The pathology of D&C showed choriocarcinoma. Whole body CT and chest X ray showed small infiltrated lesion in lung. In the fourth day of admission, ATH was performed due to persistent massive bleeding. After operation, β -HCG was downhill from 470000 mIU/mL to 90000 mIU/mL. Patient did not have bleeding after operation. But one week after operation, massive vaginal bleeding happened again and the bleeding source was from left vaginal wall where a 3cm vaginal mass was noted. Left vaginal wall lesion was sent for pathology and report was choriocarcinoma. Postoperative chemotherapy with EMA/CO with rescue of leucovorin calcium was given for six courses. After three courses of chemotherapy, β -HCG was returned to normal and patient did not have any bleeding. PET scan was performed and did not show any suspected lesion of metastasis when patient completed the six course of EMA/CO chemotherapy. There was no lesion of left vaginal wall noted after six courses of chemotherapy. Patient's performance is well and β -HCG is normal until now.

Conclusion: For patient with delayed massive postpartum hemorrhage, presentation of choriocarcinoma should be considered and warrant detailed examination.

Chest X-ray: Increased density in lungs

Chest CT: Patch pulmonary infiltration with several nodular lesions were seen in the both lower lungs.

PET/CT: No definitely and focally hypermetabolic lesion is found in the whole body scan.



H&E \times 100: Biphase tumor tissue with neoplastic syncytiotrophoblast and neoplastic cytotrophoblast (left :uterus, right :vagina)