EP30.10. Identical ultrasound findings in a benign and in a malignant adnexial lesion – a difficult differential diagnosis
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Introduction
The ultrasound characteristics of adnexal masses have been increasingly studied. Here we present two clinical cases, with different histopathology, but with similar ultrasound appearances.

Case 1: 29 year old, 6 week pregnant
Presentation: Unilocular-solid lesion, 48x44x27mm, with irregular internal walls and a maximal thickness of 6 mm. Color score 4. (Fig. 1 A, B).
Repeat ultrasounds:
• Thickening of the lesion wall, mixed echogenicity and appearance of a blood clot inside.
• A new similar contralateral lesion.
• The hypothesis of decidualized endometriomas was entertained, but a malignant neoplasia couldn’t be excluded.
Management: By the 12th week of gestation, the patient underwent a diagnostic laparoscopy. Both ovaries had unsuspicious tumefactions, that were biopsied.
Pathology report: fibrotic ovarian stroma, with numerous luteinized cells, without atypical cells, favoring the diagnosis of pregnancy luteoma.

Case 2: 53 year-old, postmenopausal, with abnormal uterine bleeding
Presentation: Right ovary occupied by a unilocular-solid anechoic lesion, 46x36x35mm with thickened irregular wall, with an 8 mm papillary projection. Color score 4. (Fig. 2 A, B)
Management: Total hysterectomy with bilateral salpingo-oophorectomy was performed.
Frozen section: non-suspicious lesion.
Definitive pathology report: high grade serous carcinoma on the fallopian tubes, with infiltration of the right ovary with a cystic component and also some small solid foci on the left tubal fimbriae.

Conclusion: The IOTA group developed algorithms that help differentiate between benign and malignant lesions. Even with these risk models, some adnexal tumors are still difficult to safely distinguish on ultrasound.