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A Rare Case of Giant Endometrial Polyp with Hematometra with Old Healed Endometriotic Lesions: A Case Report

By Dr. Tanu Bhati, Dr. Sunil Takiar, Dr. Kalpana Kulshreshtha & Dr. Anjali Kumari

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A Rare Case of Giant Endometrial Polyp with Hematometra with Old Healed Endometriotic Lesions: A Case Report

Dr. Tanu Bhati [α], Dr. Sunil Takiar [σ], Dr. Kalpana Kulshreshtha [ρ] & Dr. Anjali Kumari [ω]

Abstract- **Giant endometrial polyp with hematometra with old healed endometriotic lesion is a rare case. We present a case of old patient presented with complaint of pain in lower abdomen, but after clinical evaluation , USG and MRI report, the case diagnosed early as endometrial polyp, incidentally find hematometra and old healed endometriotic lesion at the time of hysterectomy.**

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I. Introduction

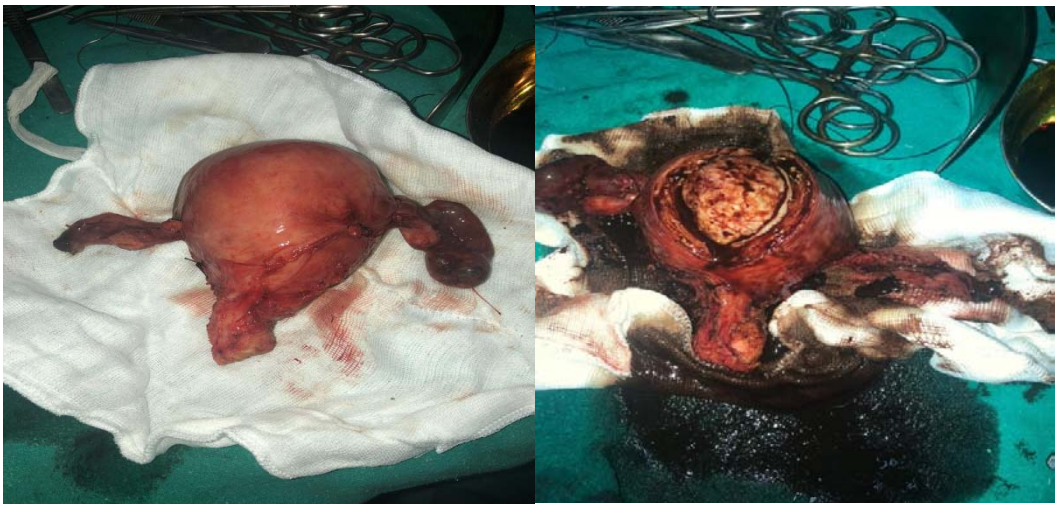
Endometrial polyps are benign masses that protrude into uterine lumen. They can be single or multiple, sessile or pedunculated[1]. Their size vary from millimeters to centimeters, size more than 4cm are considered to be giant one[2]. Here, we report a case of 70year old patient with endometrial polyp with hematometra with old healed endometriotic lesion. Endometriosis occurs in 6-10 % during reproductive period and 2-5% of postmenopausal women[3-4]. Hematometra in a postmenopausal woman is generally associated with cervical stenosis from senile atrophy, radiotherapy or a neoplastic lesion involving the lower uterine cavity or cevix[5].

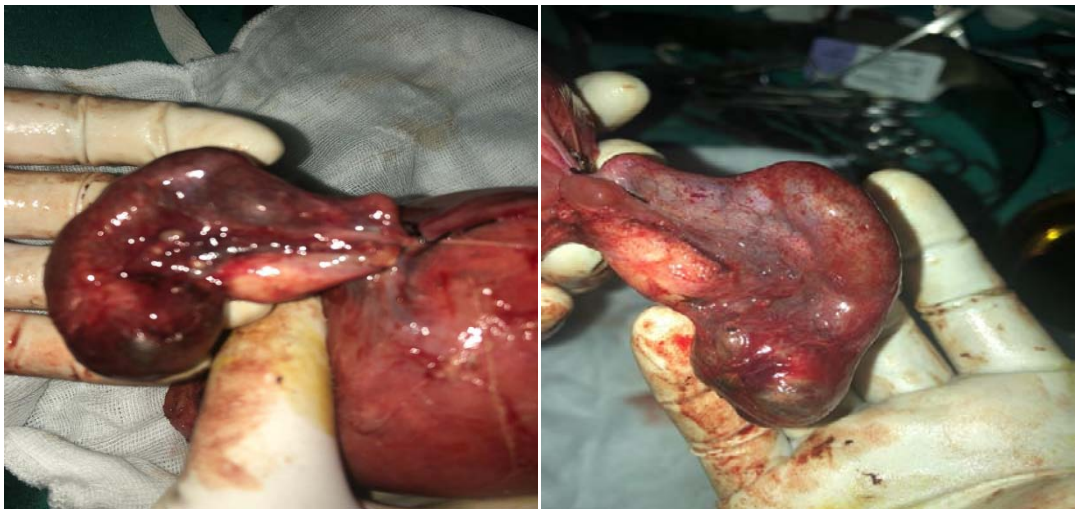
II. Case Report

A 70-year- old woman $P_7L_4A_1$, presented to our department with complaints of pain in lower abdomen. She had menopause since last 10 years. She had intermittent pain in lower abdomen since one month. General clinical examination was essentially within normal limits. Pelvic examination revealed cervix unhealthy with multiple nabothian cyst on per speculum examination and bulky uterus approx size 6 weeks, non tender on per vainum examination. There were no history of prior surgery. Abdominal ultrasound showed submucosal fibroid. Pap smear taken from cervix which revealed atypical squamous cells. All routine blood investigations were within normal limits. MRI Pelvis revealed submucosal fibroid/ endometrial polyp with degenerative changes. Transabdominal hysterectomy with bilateral salpingo-oopherectomy done in which per op findings suggested endometrial polyp approx size 6 * 6cm inside uterus present on cut section, hematometra was present inside uterus and healed endometriotic lesion present around fallopian tubes. Histopathology report revealed atrophic endometrial glands with endometrial polyp in endometrium with no evidence of granuloma or malignancy.

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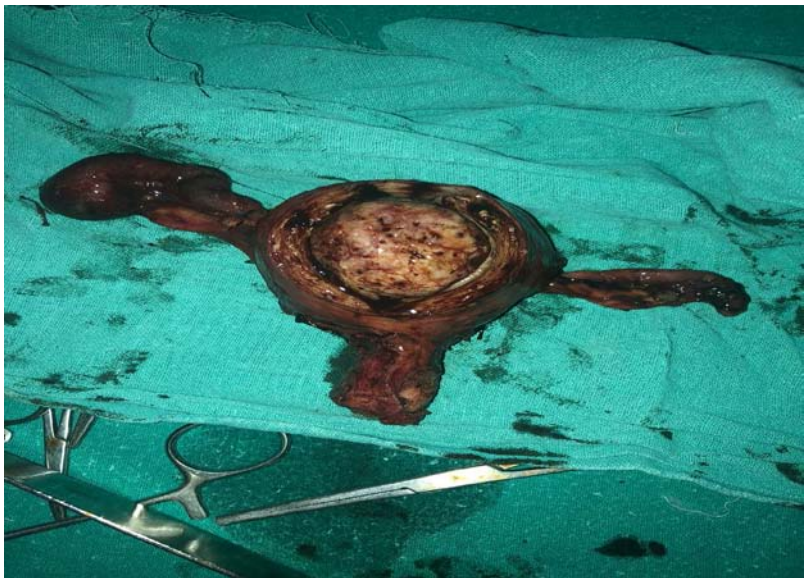


Fig. 1-5: Endometrial polyp with hematometra with old healed endometriotic lesion.

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III. Discussion

Endometrial polyps are composed of endometrial glands, fibrous tissue and can contain smooth muscle[6]. These polyps can occur at any age but frequently occurs around menopause[7]. In this case, patient have hematometra may be due to endometrial polyp.

IV. Conclusion

Giant endometrial polyp, as seen in this case, are exceedingly rare variants of classical polyp. Associated with hematometra. To the best of my knowledge, this is a rare case of postmenopausal women with giant endometrial polyp with hematometra with old healed endometriotic lesion.

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