

## BROAD LIGAMENT FIBROID

**INTRODUCTION** – Myoma is the most common tumor of broad ligament, located between two layers of broad ligament, they are of two types true and pseudo fibroid, because of its rarity it poses both clinical and radiological difficulties in differentiating from ovarian tumor.

**AIM:** To share a rare case of huge broad ligament fibroid mimicking ovarian tumor both radiologically and clinically

**CASE REPORT:** A 45 year old lady admitted to OPD of IMS & SUM Hospital, with **c/o** mass per abdomen with abdominal discomfort which was gradual on onset & progressed gradually in past 6 months, she had no history of weight loss, fever, bladder bowel disturbance.  
**G/E:** Patient was vitally stable with no significant lymphadenopathy

**P/A:** Mass of around 32-34 week size, firm to hard consistency with restricted mobility non tender, felt arising from the pelvis and lower pole could not be reached, there were no dilated / engorged veins nor any visible peristalsis nor shifting dullness seen

**P/S**—cervix and vaginal healthy but **cervix was deviated to right side**

**P/V** – A mass corresponding to 34 week size gravid uterus with restricted mobility, regular margin, firm to hard consistency, non tender noted



**INVESTIGATION** – Hemoglobin was 12 g/dl and routine investigations were within normal limits

**USG** – A solid cystic mass of size 22x 16 cm in abdominal cavity

**NCCT** – Lobulated heterogeneous hypodense lesion (size 22x16 cm) in abdominal cavity (? Ovarian mass)

**CEA, CA-125, AFP** were within normal limits.

**INTRAOPERATIVE FINDINGS** – Following midline incision, a huge left sided broad ligament fibroid of size 25x15cm with distorted anatomical structure noted. Uterus was of normal size and pushed to right side. B/L ovary, tube and round ligament looked grossly normal. Ureter was located and dissected out of the operative field, then uterine clamp was given, careful excision of tumor with total abdominal hysterectomy and b/l salpingo-oophorectomy was done

**RESULT:** Microscopic Appearance – Interlacing smooth muscle bundles with swirled pattern are seen without any degeneration

**CONCLUSION:** Broad ligament fibroid of huge size can displace the uterus & distort the pelvic anatomy. If allowed to reach an enormous size, it can present with pressure symptoms, pelvic pain, bladder & bowel dysfunction, can mimic ovarian tumor both clinically & radiologically. Extreme surgical expertise is required for successful outcome.

**Reference:** Jeffcoate N. Tumors of corpus uteri. in: batla n.ed. Jeffcoates principle of gynaecology, 6<sup>th</sup> edition :Delhi, Arnold Publication, 2001, pp.466-497