## **Case Report**

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# Cervical cancer mimicking cervical myoma a rare clinical situation

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#### **ABSTRACT**

This article discusses the rare clinical situation where cervical cancer mimics the symptoms of a cervical myoma. Cervical cancer is a prevalent cancer in women, often caused by HPV infection, and can cause symptoms such as abnormal vaginal bleeding and pain during sexual intercourse. However, cervical myoma can also cause similar symptoms, making it difficult to differentiate between the two conditions. Delayed diagnosis and treatment of cervical cancer can lead to a poorer outcome for patients, highlighting the importance of accurately identifying the disease. Healthcare professionals should be aware of this rare clinical situation and conduct thorough examinations to differentiate between cervical cancer and cervical myoma. Early diagnosis and appropriate treatment can improve the prognosis for patients with this disease. Women should also be aware of the potential symptoms of cervical cancer and consult a healthcare professional if they experience abnormal vaginal bleeding or pain during sexual intercourse. Vaccination against HPV can help prevent cervical cancer, making it important for women to discuss this option with their healthcare provider. This article reports a case of cervical cancer mimicking a cervical myoma, highlighting the importance of considering this rare clinical situation in differential diagnoses.

Keywords: Cervical cancer, Cervical myoma, HPV, Differential diagnosis, Abnormal vaginal bleeding

### INTRODUCTION

Cervical cancer is a common cancer among women worldwide. Although it is often caused by HPV infection, it can be misdiagnosed as a cervical myoma, leading to delayed diagnosis and treatment. Cervical myoma is a benign tumor that can cause similar symptoms to cervical cancer, making it challenging to differentiate between the two. This rare clinical situation can compromise the prognosis of patients with cervical cancer, making early diagnosis and appropriate treatment crucial.

In this article, we discuss the importance of accurately diagnosing cervical cancer mimicking cervical myoma,

highlighting the role of healthcare professionals in conducting thorough examinations and utilizing imaging techniques to establish an accurate diagnosis. We also report a case of cervical cancer mimicking cervical myoma, stressing the need to consider this rare clinical scenario in differential diagnoses.

### **CASE REPORT**

We present the case of a 48-year-old nulliparous woman, without any particular medical history, who consulted our medical facility for dyspareunia with post-coital metrorrhagia. The clinical examination revealed a rounded mass suspected to be a myoma that filled the vagina.



Figure 1: MRI showed a tissue mass in the cervix, with a "bell-clapper" appearance measuring 60×40 mm.



Figure 2: macroscopic appearance of the resected mass.

Endovaginal ultrasound could not be performed due to the presence of the intravaginal mass. An MRI was performed and showed a tissue mass in the cervix, with a "bell-clapper" appearance measuring 60×40 mm in diameter with clear borders, and no lymph nodes (Figure 1).

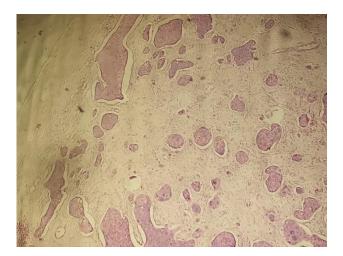


Figure 3: microscopic aspect of the non-keratinizing, and invasive squamous cell carcinoma (x50).

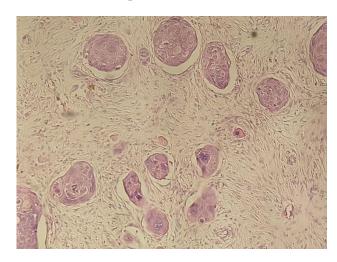


Figure 4: microscopic aspect of the non-keratinizing, and invasive squamous cell carcinoma (x100).

The patient then underwent vaginal myomectomy by torsion at the operating room without postoperative complications (Figure 2). However, histological examination of the mass revealed a moderately differentiated, non-keratinizing, and invasive squamous cell carcinoma. This discovery led to a re-evaluation of the initial diagnosis and appropriate therapeutic management for cervical cancer (Figure 3 and 4).

A re-evaluation of the MRI was requested, with the realization of a PET-scan, which confirmed pathological hypermetabolism at the level of the cervix extending to the isthmus. After a multidisciplinary consultation meeting, the tumor was classified as T3AN0M0. The

patient received concurrent radiotherapy and chemotherapy.

#### DISCUSSION

Cervical cancer is one of the most common cancers in women. It is often caused by an infection with the human papillomavirus (HPV) and can cause symptoms such as abnormal vaginal bleeding and pain during sexual intercourse. Treatment of cervical cancer depends on the severity of the disease and may include surgery, radiotherapy, and chemotherapy.<sup>1</sup>

However, in some cases, cervical cancer can mimic the symptoms of a cervical myoma. This clinical situation is rare but can lead to a delay in the diagnosis and treatment of cervical cancer.<sup>2</sup>

Cervical myoma is often asymptomatic but can cause abnormal vaginal bleeding and pain during sexual intercourse. However, these symptoms can also be caused by cervical cancer, making it difficult to differentiate between the two conditions.<sup>3</sup>

In cases where cervical cancer is misdiagnosed, the delay in treatment can lead to the spread of the disease to other parts of the body, which can make treatment more difficult and compromise the prognosis.

It is therefore important that healthcare professionals are aware of this rare clinical situation and conduct thorough examinations to differentiate between cervical cancer and cervical myoma. Imaging techniques such as ultrasound, computed tomography (CT), and magnetic resonance imaging (MRI) can help establish an accurate diagnosis and determine the severity of the disease.<sup>4</sup>

The treatment of cervical cancer mimicking cervical myoma depends on the severity of the disease. In cases where the disease is diagnosed at an early stage, surgery may be an effective treatment option. In more advanced cases, radiotherapy and chemotherapy may be necessary.<sup>5</sup>

#### **CONCLUSION**

In conclusion, cervical cancer mimicking cervical myoma is a rare but important clinical situation to be aware of. Healthcare professionals should be aware of this possibility and conduct thorough examinations to differentiate between cervical cancer and cervical myoma. Early diagnosis and appropriate treatment can help improve the prognosis for patients with this disease. Women should also be aware of the potential symptoms of cervical cancer and consult a healthcare professional if they experience abnormal vaginal bleeding or pain during sexual intercourse. Together, early and appropriate management can help improve outcomes for women with this rare but important disease.

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