Intradecidua submucosal leiomyoma included in the placenta

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RESUMEN

Se comunica el caso de un leiomioma uterino submucoso incluido en la decidua, que se desprendió en el momento del parto. La lesión era de 5 x 2.5 x 2 cm y estaba adherida laxamente al lado materno de la placenta. El estudio histológico reveló haces de células fusiformes dispuestas en un estroma laxo y edematoso que también contenía pequeños vasos, algunos con reemplazo de sus paredes por trofoblasto intermedio. Ambas caras de la lesión tumoral estaban cubiertas por decidua. En el examen inmunohistoquímico las células fueron positivas para alfa-actina de músculo liso y negativas para CD10. Sólo se han encontrado otros tres casos similares relatados en la bibliografía.

Palabras clave: leiomioma, placenta, útero.

ABSTRACT

We present a case of submucosal uterine leiomyoma included in the decidua tissue which shedded during delivery. The tumor measured 5 x 2.5 x 2 cm, was loosely attached to the maternal aspect of the placenta. The histology revealed thin spindle-shaped cells arranged in bundles in a loose, edematous intercellular stroma, which also contained small vessels some with intermediate trophoblast replacement of the walls. Decidua cells covered both sides of the mass. Immunohistochemistry showed that the cells were positive for smooth muscle actin and negative for CD10. We found only three previously similar cases reported.

Key words: leiomyoma, placenta, uterus.

A case report is presented exemplifying the rare event of a leiomyoma included in the placenta. To our knowledge only three similar cases have been reported in the literature.1-3

CASE REPORT

A 35 year-old woman delivers a 2,645 g full-term male newborn by cesarean section, uneventfully. Ultrasound showed that the placenta was implanted dorsally and previa grade I. The umbilical cord contained three vessels. The amniotic fluid was normal. On gross examination the placenta revealed an ovoid, 5 x 2.5 x 2 cm mass loosely attached to the maternal aspect of the disk (figure 1).

Figure 1. Gross features of the tumor attached to the maternal side of the placenta.

Histologic examination showed a normal full-term placenta. The tumor was constituted by a proliferation...
of spindle-shaped cells having cigar-shaped nuclei with medium-sized chromatin granules and bipolar thin cytoplasmic processes. The cells arranged in short fascicles in an edematous stroma. Remarkably, the cells possessed scant cytoplasm and were at divergence with the well-differentiated and recognizable smooth muscle cells of local vessels. Local intralesional vessels were wide-open and small arterioles exhibited intermediate trophoblast cells replacing its walls (figure 2). A thin but obvious decidual layer was present on both sides of the tumor (figure 3). There were neither villi nor glandular structures within the tumor.

Immunohistochemistry for alpha-smooth muscle actin proved to be positive in the spindle cells (figure 4). Local vessels walls acted as positive internal control. CD10 was negative.

The finding was interpreted as a submucosal uterine leiomyoma incorporated to the decidual plate of the placenta.

**DISCUSSION**

The peculiar finding described above seems to represent the fourth case referred in the literature and consistently reproduced the descriptions of those cases. Two of the previously reported cases were male newborns; further studied by PCR demonstrated that the tumor did not contain Y chromosome sequences indicating that they belonged to the mother’s uterus.

Although rarely, submucosal uterine leiomyomas may become included in endometrial decidua tissue mimicking a placental tumor recognized at birth.

**REFERENCES**