



Case Report

ADENOMATOID  
TUMOUR OF THE  
FALLOPIAN TUBE

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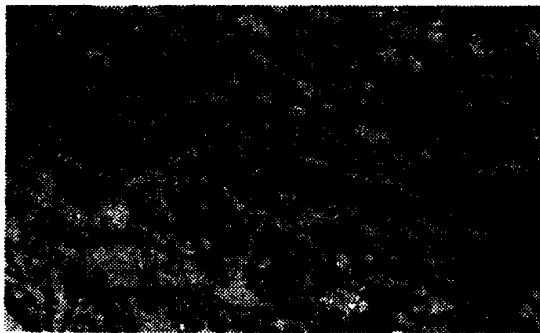
52 years old, multiparous (P0.0.2.9 - last childbirth 2 1/2 years back) menstruating woman

attended the clinic with complaints of pain - dull aching in lower abdomen, feeling of heaviness and mass coming down per vaginum, of about 7 years duration.

She was a known case of chronic bronchitis. Cardiovascular system and per abdominal examinations were clinically normal.

There was uterocervical descent - first degree with cystocele and rectocele. Uterus was in midposition bulky with irregularity on right side. Left ovary was palpable.

Pelvic ultrasonography confirmed the bimanual examination findings and showed an



Microphotographs showing glandular arrangement of benign looking flattened cells. Fig 1 Low power view

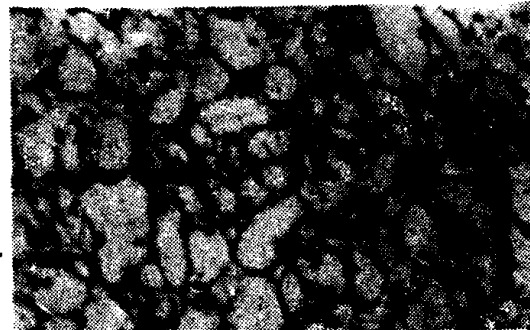


Fig 2 High power view

echo free area on the left side of the uterus as? enlarged ovary.

Laparotomy was performed on 12th post menstrual day and bilateral salpingo-oophorectomy with total hysterectomy was done.

The patient made an uninterrupted recovery and has remained well since.

**Pathological Features ;**

**Gross appearance**

The specimen consisted of uterus with bilateral adnexae. The cervix uteri was hyper-

trophied, the uterine body appeared normal with endomyometrial thickness of 2 cm. Both the ovaries looked normal, the right ovary was cystic with corpus luteum. Right tube was normal. Left tube had a nodule, greyish white on cut section.

***Microscopic appearance :***

**Tubal tumour :** glandular arrangement of benign looking flattened cells suggestive of adenomatoid tumour (Fig 1 and 2)

**Ovaries :** Sections showed follicular cysts

**Uterus :** No abnormality was found.