A Case of Tuberculosis Mimicking Ovarian Malignancy

Jonathan Stanleigh and Oshri Barel*

*Correspondence: Oshri Barel, Department of Obstetrics and Gynecology, Monash Health, Australia, Tel: 61459522072; Fax: 6199288587; E-mail: barelod@gmail.com

Received Date: 27 May 2019
Accepted Date: 14 Jun 2019
Published Date: 25 Jun 2019

Clinical Image

Ovarian cancer often presents at advanced stage, with intraperitoneal carcinomatosis as a common presenting pattern. When the adnexae are morphologically normal, yet the histology is serous-primary peritoneal carcinomatosis is diagnosed. Treatment is composed of surgical staging/debulking and adjuvant chemotherapy. Pre-op imaging will often demonstrate enlarged ovaries, ascites, and mental caking. Laparoscopy can be used for final diagnosis and staging.

We describe a case of an 80 year old patient, who presented with abdominal pain. A CT scan demonstrated ascites, omental caking, and peritoneal carcinomatosis. Her CA125 levels were elevated at 380. The image herein was obtained during diagnostic laparoscopy, when an RSO and omental biopsy was performed. Pathology demonstrated granulomas without evidence of malignancy. Therefore an omental biopsy was re-taken for tuberculosis culture and PCR. The result was positive for tuberculosis. Antibiotic therapy was started, and the patient is doing well and free of symptoms one year later (Figure 1).