Pseudomixoma Peritoneal
Pseudomyxoma Peritonei

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A 56-year-old postmenopausal woman was admitted with global aphasia, right homonymous hemianopsia and central facial paresis. Cerebral computed tomography (CT) and angio-CT revealed a recent ischemic lesion in the territory of the left middle cerebral artery and bilateral ischemic lesions, suggesting a prothrombotic or embolic state. She presented uterine bleeding and abdominal distension for two months.

A thoracoabdominopelvic CT scan revealed multiloculated cystic lesions (Fig. 1 – panel A), clarified with magnetic resonance imaging that showed multicystic masses in a pattern of peritoneal pseudomyxoma (PMP) (Fig. 1 – panel B) and an endocervical lesion. The cytology of the cystic lesion's fluid revealed an adenocarcinoma with extracellular mucin, compatible with the endocervical lesion's biopsy that showed a high-grade primary gynecological invasive carcinoma, most likely a mixed serous and mucinous endometrial adenocarcinoma.

The patient was referred to Oncology but due to her fragile condition and post-stroke status, conservative care was decided. The patient died two months later.

PMP is a rare clinical syndrome, characterized by diffuse collections of gelatinous material in the abdomen and pelvis and associated with mucinous implants on the peritoneal surfaces, with fatal outcome, if left untreated.[1,2] It is distinguished from usual peritoneal metastases by the presence of excessive amounts of mucin in the peritoneal cavity.[2]

Even though mucinous appendiceal neoplasms are the leading cause of PMP, it may occur with colorectal or tubo-ovarian mucinous neoplasms.[2] To the best of our knowledge, this is the first presentation as PMP in an endometrial neoplasm.[3]

Imaging is frequently the first step in the diagnosis and management of PMP, since its radiographic appearance is

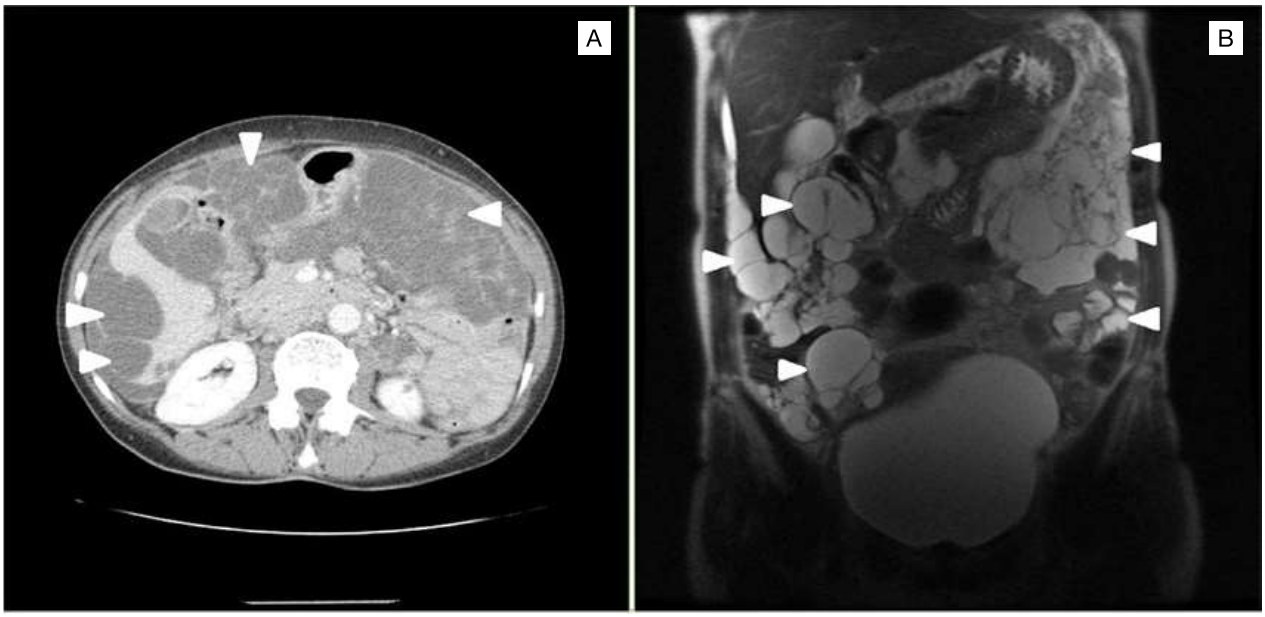

Figure 1 - Panel A – Axial thoracoabdominopelvic computed tomography scan with multiloculated cystic lesions with solid component. **Panel B –** Coronal T2-weighted magnetic resonance imaging showing multicystic masses. Lesions are identified by arrowheads in both panels.

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characteristic.[1] Therefore, all clinicians should be familiar with the imaging features of the disease.

This case depicts an unusual peritoneal metastasis, the PMP, whose endometrial origin is rare. Its early diagnosis is central to the rapid initiation of targeted therapy. ■

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AF – Elaboração do artigo
MCT - Escolha da imagem e suas legendas
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AF – Preparation of the article
MCT - Choice of image and its captions
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