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Serous cystadenofibroma of the Fallopian tube. Case report and literature review

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SUMMARY: **Serous cystadenofibroma of the Fallopian tube. Case report and literature review.**

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Introduction. *Cystadenofibromas of the Fallopian tube are very rare benign tumors of the female genital tract. These tumours are usually asymptomatic and are found incidentally.*

Case report. *We describe a Fallopian serous cystadenofibroma in a 50 year-old woman operated for uterine leiomyoma. The histopathologic finding revealed a cystic lesion connected to the salpinx. The cyst was composed of connective stroma lined by epithelial cuboidal cells, without pleomorfism or detectable mitoses. Pseudopapillary structures were observed in the lumen of the cyst. The patient is well on follow-up.*

Conclusion. *The origin of serous cystadenofibroma of the Fallopian tube is not clear. The tumor is considered an embryologic remnant rather than a proliferating neoplastic process. These tumours seem to have a benign course and a malignant potential has not been described.*

RIASSUNTO: **Cistoadenofibroma sieroso della salpinge. Case report e revisione della letteratura.**

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Introduzione. *I cistoadenofibromi della salpinge sono tumori benigni molto rari del tratto genitale femminile. Sono di solito asintomatici e vengono diagnosticati incidentalmente.*

Case report. *Descriviamo il caso di un cistoadenofibroma sieroso della salpinge in una donna di 50 anni operata per leiomioma dell'utero. Il reperto istopatologico rivelava una lesione cistica di pertinenza della salpinge. La cisti era formata da stroma connettivo circondato da cellule epiteliali cuboidali, senza pleiomorfismo nè mitosi. Nel lume della cisti si osservavano strutture pseudopapillari. La paziente sta bene al follow-up.*

Conclusioni. *L'origine del cistoadenofibroma sieroso della salpinge non è chiara. Il tumore è considerato un residuo embrionale piuttosto che un processo neoplastico proliferante, ha comportamento benigno e non è considerato potenzialmente maligno.*

KEY WORDS: Fallopian tube - Serous cystadenofibroma - Surgery.
Salpinge - Cistoadenofibroma sieroso - Chirurgia.

Introduction

According to the WHO (World Health Organization) benign epithelial tumours of the Fallopian tube are classified into papilloma, cystadenoma, adenofibroma, cystadenofibroma, metaplastic papillary tumour and endometrioid polyp (1). Fallopian tube adenofibromas and cystadenofibromas are rare. The findings of the literature review revealed fourteen cases (Table 1) (2-13).

Most women with Fallopian tube (cyst) adenofibromas are asymptomatic and the majority of the tumours are incidental findings at the time of an operation for another gynaecological disorder. The neoplasm presents as a round, solitary mass that is either intraluminal or attached to the fimbriated end or the serosal surface and may have a smooth or papillary surface. Histologically, two components are present, a connective tissue stroma without nuclear pleomorphism or mitoses and papillary structures on the surface or tubal structures lined by epithelial cells (1).

Case report

A 50 year-old woman underwent laparoscopy to remove a 4 cm uterine leyomioma. At operation a monolateral salpingeal cystic lesion was detected and resected. On macroscopic observation of the

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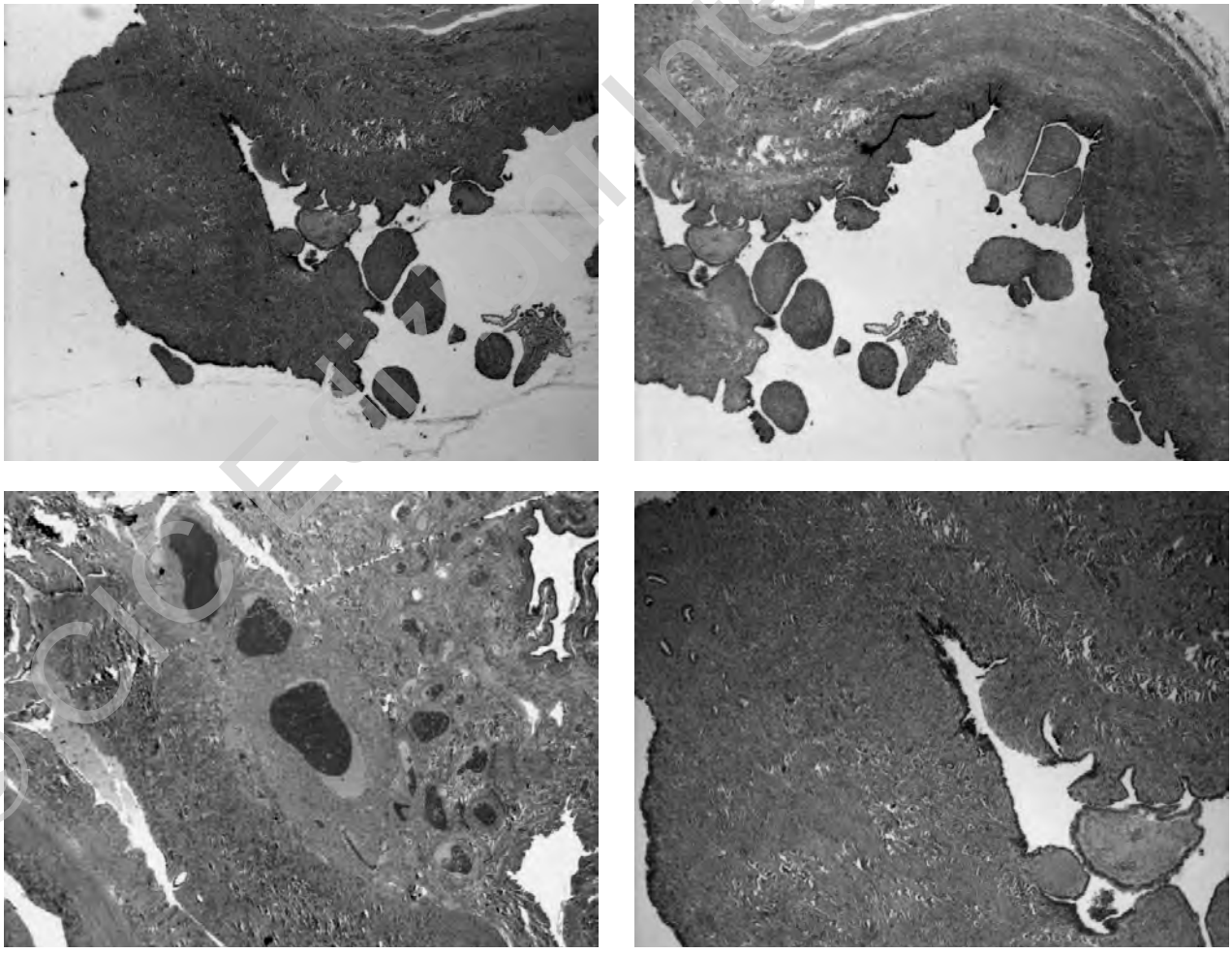
TABLE 1 - LITERATURE REVIEW OF ADENOFIBROMAS AND CYSTADENOFIBROMAS OF THE FALLOPIAN TUBE (reff. 2-13).

Author, year	Cases (n)	Histologic variants
Iwanow WM, 1909	1	Papillary serous cystadenofibroma
Küster I, 1914	1	Papillary serous cystadenofibroma
Kanbour AI, 1973	1	Cystic papillary adenofibroma
Silverman AY, 1978	1	Serous cystadenofibroma
de la Fuente AA, 1982	1	Mixed Müllerian tumour-adenofibroma
Vaja K, 1988	1	Papillary adenofibroma
Valerdiz Casaola S, 1989	2	Cystadenofibroma
Chen KTK, 1994	1	Bilateral papillary adenofibroma
Alvarado-Cabrero I, 1997	2	Papillary cystadenofibroma
Sills ES, 2003	1	Serous cystadenofibroma
Gürbüz Y, 2003	1	Serous cystadenofibroma
De Silva TS, 2010	1	Cystadenofibroma

Fallopian tube, a round 3 cm fimbrial cyst with smooth surface and filled with serous material was described. Microscopic hematoxylin-eosin routine sections revealed that fimbrial portion of the salpinx was connected to the cystic lesion. The cyst was composed of a connective tissue stroma lined by epithelial cuboidal cells, without pleomorfism or detectable mitoses. Pseudopapillary structures were observed in the lumen of the cyst, with the same epithelial monostratified lining. In the stromal connective, some tubular serous structures were present, in absence of mitotic figures or cytologic atypia (Figs. 1-4). A diagnosis of primitive serous cystadenofibroma of the salpinx was made.



Figures 1-4 - Hematoxylin-eosin sections show a connective tissue stroma and pseudopapillary structures on the endoluminal side of the cyst with a monostratified cuboidal epithelium. In the stromal connective some tubular serous structures were present, in absence of mitotic figures or cytologic atypia.

The patient was discharged in good condition and she is well on follow-up.

Discussion and conclusion

Adenofibromas and cystadenofibromas of the Fallopian tube are very rare lesions, mostly asymptomatic and diagnosed incidentally. The first case of cystadenofibroma of the Fallopian tube was described by Iwanow in 1909 (2). The origin of this neoplasm is not clear. Because most of the cases are incidental, there is a consensus that the tumor is an embryologic remnant rather than a proliferating neoplastic process (12). Gürbüz et al. (12) demonstrated that the topographic localization of the lesion, histopathologic findings, immunophenotypic profile of vimentin-cytokeratin coexpression, and diffuse apical Epithelial Membrane Antigen (EMA) immunoreactivity suggested that the tumour is an embryologic remnant originating from the müllerian duct. These tumours seem to have a benign course and a malignant potential has not been described.

Competing interests
The authors declare that they have no competing interests.

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