

Atypical polypoid adenomyoma in postmenopausal women: a case series

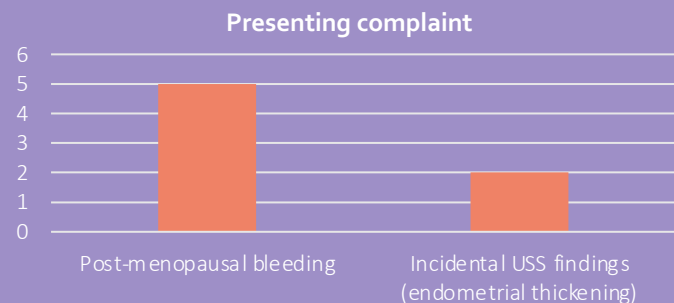
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Cases

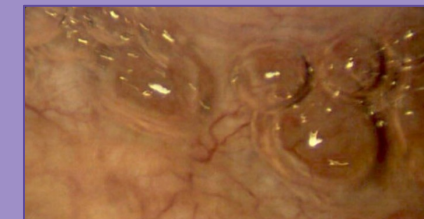
Between 2020-2023, 7 post-menopausal women were diagnosed and treated with atypical polypoid adenomyoma at Townsville University Hospital, a tertiary centre.

The age of patients ranged from 52-79 years, mean BMI was 38.34, and parity ranged from P0-P8. Most women presented with post-menopausal bleeding.



Diagnosis:

All cases underwent hysteroscopy and endometrial biopsy or polypectomy, with histopathology confirming atypical polypoid adenomyoma.



Treatment:

Total laparoscopic hysterectomy and bilateral salpingo-oophorectomy (TLH BSO) was the primary treatment for 6 women. All cases returned with benign histopathology. Conservative management with levonorgestrel Mirena IUD was undertaken in 1 patient, due to co-morbidities. Regular reviews 6 months post treatment revealed no recurrence or complications since.

Background

An atypical polypoid adenomyoma (APA) is a rare endometrial tumour initially considered benign, however, there is increasing evidence that it has a high rate of recurrence and is associated with malignant transformation.¹ Histological diagnosis is gold standard as APA is often indistinguishable clinically and macroscopically from endometrial polyp, submucous myoma or adenocarcinoma.²

Despite most reports arising in reproductive-aged women, cases have also been described in postmenopausal women. Currently there is no standardised guideline on clinical management. Mainstay treatment modalities include total hysterectomy, conservative surgery or hormonal therapy.

Conclusion

- Atypical polypoid adenomyoma typically presents in postmenopausal women with bleeding
- This case series highlights hysterectomy as the primary therapeutic choice for definitive management.
- Conservative local progesterone therapy is a safe alternative, however considering recurrence or residual primary lesion has been reported to occur in 30% of patients,¹ close follow-up is necessary.
- No malignant transformation was reported in the cases observed.

References:

1. Ma B, Zhu Y, Liu Y. Management of atypical polypoid adenomyoma of the uterus: A single center's experience. *Medicine (Baltimore)*. 2018 Mar;97(12):e0135. doi: 10.1097/MD.00000000000010135. PMID: 29561413; PMCID: PMC5895309.
2. Biasioli A, Londero AP, Orsaria M, Scrimin F, Mangino FP, Bertozzi S, Mariuzzi L, Cagnacci A. Atypical polypoid adenomyoma follow-up and management: Systematic review of case reports and series and meta-analysis. *Medicine (Baltimore)*. 2020 Jun 26;99(26):e20491. doi: 10.1097/MD.00000000000020491. PMID: 32590732; PMCID: PMC7328951.