

A Rare Case of Gestational Choriocarcinoma Diagnosed Following Secondary Post-Partum Haemorrhage: Case Study and Report

Dr Alexandra Farrell¹, A/Prof Emmanuel Karantanis^{1,2}

¹Women and Children's Health, St George Public Hospital, Kogarah NSW; ²University of New South Wales, Kensington NSW

Background

Gestational choriocarcinoma is a rare aggressive trophoblastic malignancy. It is most commonly associated with hydatiform molar pregnancies, though can arise following spontaneous abortion, ectopic pregnancy and normal pregnancy.

Aims

We report a rare case of gestational choriocarcinoma diagnosed following presentation with secondary post-partum haemorrhage.

Case

A 36 year-old, gravida 2 para 1 woman presented 5 weeks post-partum with heavy vaginal bleeding. Her delivery was a spontaneous normal vaginal delivery, with estimated blood loss 300ml and placenta appearing complete. Her lochia initially settled appropriately, then sudden-onset heavy vaginal bleeding commenced. She was pain-free, afebrile, and she and her infant were otherwise well. Examination revealed a soft non-tender abdomen, and large clots in the vagina. Investigations demonstrated β HCG 96000 mUI/mL and an initial haemoglobin of 126g/L which proceeded to drop to 80g/L following ongoing heavy bleeding. She was commenced on intravenous antibiotics and tranexamic acid. Pelvic ultrasound was suspicious for retained products of conception, and she underwent dilatation and curettage of the uterus. She was postoperatively well with minimal bleeding, repeat β HCG was 4564 mUI/mL and she was discharged home on oral antibiotics.

Results

Histopathology of the uterine curettings demonstrated highly atypical trophoblast suspicious for gestational choriocarcinoma. She was referred to Gynae-Oncology. Weekly β HCGs trended down to negative 5 weeks postoperatively and her chest x-ray was normal. She will have ongoing β HCG monitoring to assess for recurrence and the need for chemotherapy.

Discussion

Choriocarcinoma is rare but aggressive. This case is a reminder to consider this differential in patients with abnormal vaginal bleeding and abnormally elevated β HCG post-partum.