

Endometrial stromal sarcoma

Endometrial Stromal [Sarcoma](#) (ESS) is a rare uterine malignancy which often metastasizes several years after initial diagnosis. [Thoracic spine](#) is a rare ESS metastatic site and its proper management is still not a consensus. We discuss the histopathological features and the management strategies through an illustrative case of a 77 year-old woman with metastases to the thoracic spine 13 years after total hysterectomy for ESS.

Methods: Review of the literature and identification of 5 patients, including our present case, with ESS involving the spinal cord. We discuss the outcomes achieved after each therapy. In our case, the patient presented a mass involving the thoracic spinal canal constricting the spinal cord at T7 level. A two-level decompression laminectomy was performed and the lesion was partially excised.

Results: The histopathological along with the immunohistochemical profile mitotic rate indicated the endometrial stromal cells origin of the tumor, confirming the diagnosis of a low-grade ESS metastases. The patient was managed with surgery in combination with postoperative radiation therapy.

Conclusions: The small number of published cases precludes definitive conclusions regarding standard management. However, it seems that treatment of metastatic ESS to the spine matches the same general concepts of [spine metastases](#), namely surgery followed by radiation therapy, due to clinical improvement and long-term disease control of the reported cases. Hormonal therapy may be considered in recurrent disease with strong expression of estrogen and progesterone receptors. However, these findings need confirmation in larger studies ¹⁾.

¹⁾

Batista LM, Carvalho CH, Acioly MA, Gharabaghi A, Ramina KF, Schittenhelm J, Tatagiba M. Spinal metastases of endometrial stromal sarcoma: clinicopathological features and management. Surg Oncol. 2011 Jun;20(2):e78-83. doi: 10.1016/j.suronc.2010.10.006. Epub 2010 Nov 11. PMID: 21071207.

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Last update: **2024/06/07 02:48**

