

A large serous borderline ovarian tumour mimicking neurogenic bladder

A 55-year-old woman, who had undergone a total hysterectomy decades previously, presented with lower abdominal fullness and urinary frequency. An abdominal–pelvic contrast-enhanced computed tomography scan (Box) showed a large cystic lesion measuring 20 × 17 × 15 cm, with a smaller “daughter” cyst, a compressed urinary bladder and bilateral hydronephrosis.

The patient subsequently had an ovarian cystic tumour weighing 1822 g removed, and had an uneventful postoperative course. The tumour contained serous fluid, which established the diagnosis of serous borderline ovarian tumour (SBOT). An SBOT manifesting as such a large cyst that mimics neurogenic bladder is rare.¹ In general, conservative, fertility-sparing surgery is recommended for its promising outcomes.²

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1 Segal GH, Hart WR. Ovarian serous tumors of low malignant potential (serous borderline tumors). The relationship of exophytic surface tumor to peritoneal “implants”. *Am J Surg Pathol* 1992; 16: 577-583.

2 Nam JH. Borderline ovarian tumors and fertility. *Curr Opin Obstet Gynecol* 2010; 22: 227-234. □

Computed tomography scan showing an ovarian cyst (white arrows) with a daughter cyst (white arrowhead) and a compressed urinary bladder (yellow arrowhead)

