

# Primary Malignant Melanoma of Cervix - A Case Report

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Primary cervical melanoma is a rare neoplasm of female genital tract, less than 50 cases reported in literature.<sup>1</sup> Most of the patients present in advanced stages & respond poorly to therapy.<sup>2</sup>

We present a case of 70-year-old female patient presenting with foul smelling discharge & history of bleeding per vaginum & abdominal pain of 2-month duration. Speculum examination revealed a cauliflower like necrotic growth involving whole of cervix (Figures 1 and 2).

Search for a melanotic lesion in skin, uveal tract (ophthalmoscopy) & other mucosal sites was negative. An abdominal USG, performed preoperatively, showed normal liver, spleen, kidneys, bowel, & retroperitoneal structures. Due to the absence of a primary site of melanoma, a diagnosis of primary cervical melanoma was made.

Wedge biopsy was taken and sent for HPE. Macroscopic sections showed multiple greyish brown bits of tissue aggregating 1×1×0.8 cm (1 block). Microscopic section showed solid sheets of poorly differentiated neoplastic cells. Tumour cells are large pleomorphic, hyperchromatic & prominent nucleoli. Cytoplasm & interstitium shows dense pigmentation & areas of necrosis. Suggestive possibly of Malignant Melanoma.

Possibility of melanoma was suggested & the patient underwent Wertheim's hysterectomy. A specimen of uterus, cervix and vaginal cuff with bilateral attached adnexae and pelvic lymph node dissection was sent for histopathology. Gross examination showed a cauliflower like necrotic lesion in cervix involving both ecto & endocervical region. Microscopic features were similar to preoperative biopsy. Tumour cells were positive for S-100 and HMB-45, thus confirming the diagnosis. Eighteen out



**Figure 1: Clinical picture showing malignant melanoma of cervix.**



**Figure 2: Lateral view of cauliflower like necrotic mass.**

of the 20 pelvic lymph nodes isolated, bilateral parametric & vaginal resected margins were involved by the tumour.

### Points to Ponder

- A) Morris and Taylor criteria for diagnosis of primary melanoma of cervix<sup>3</sup>
  - 1. Absence of melanoma elsewhere in the body,
  - 2. Demonstration of junctional change in the cervix,
  - 3. Metastasis according to the pattern of cervical carcinoma.
- B) Melanoma of the uterine cervix is currently not curable in advanced stage, hence needs to be diagnosed early.

The patient received intra cavitory radiotherapy & remained disease-free for 6 months & patient started on combination chemotherapy with dacarbazine & cisplatin. However, she died after two courses of chemotherapy. Autopsy revealed widespread metastasis involving lungs, liver, & urinary bladder.

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**How to cite this article:** Preeti Baghel, Vinita Bahel, Rashmi Paramhans, Pomela Sachdev. "Primary malignant melanoma of cervix – a rare case". *Int J Sci Stud*. 2014;2(3):101-102.

**Source of Support:** Nil, **Conflict of Interest:** None declared.