Sclerosing stromal tumor of the ovary

Rare ovarian neoplasm. It is considered a subtype of <u>ovarian sex</u> <u>cord / stromal tumour</u> and is included in the fibroma-thecoma group of ovarian tumors ⁹.

Epidemiology

It occurs predominantly in young women, and its incidence peaks around the 2nd to 3rd decades of life ¹⁻².

Clinical presentation

 Patients may have menstrual irregularity and/or pelvic pain ⁴. It is usually hormonally inactive, but it may occasionally have an oestrogenic effect (even more rarely an androgenic effect).

Pathology

It is histologically characterized by cellular heterogeneity, prominent vasculature, and a pseudolobular appearance composed of cellular and hypocellular areas. They generally tend to be unilateral ³.

US

- Described sonographic features (whilst being nonspecific) include tumor with multilocular cystic components
- Irregularly thickened septa and tumor walls or a solid tumor including several small cystic components.

MRI

- T2
 - signal intensities of the cystic components are high and those of the solid components were inhomogeneous, ranging from intermediate-high to high
- MR may show pseudolobulation 7-8 of the lesion which consists of low-intensity nodules set against high-intensity stroma on T2-weighted images 7
- T1 C+ (Gd): dynamic imaging may show marked early enhancement of the solid components.

