

Extragastrintestinal GIST present as a vaginal mass in a 57 year old female: A case report

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Introduction

Extragastrintestinal GIST, which has no apparent connection to gastrointestinal tract, is a rare entity. Common site are omentum, mesentery and retroperitoneum. A case of extragastrintestinal GIST present as a vaginal mass is reported.

Clinical History

A 57 year old female presented with post menopausal bleed, where clinical examination founded a firm mass at lower vagina at 2017. Private USG showed a 5.9 cm mass in the posterior aspect of vagina. 2 previous biopsy at 2017 and 2018 showed mainly superficial mucosal tissue with no malignancy. Repeated biopsy at 2019 showed extragastrintestinal GIST. Patient later had PET-CT at 2019 also showed bone metastasis at vertebrae. Oncologist had started on imatinib (Glivec) and patient currently has decreased size of the vaginal mass at resolved bone metastasis.

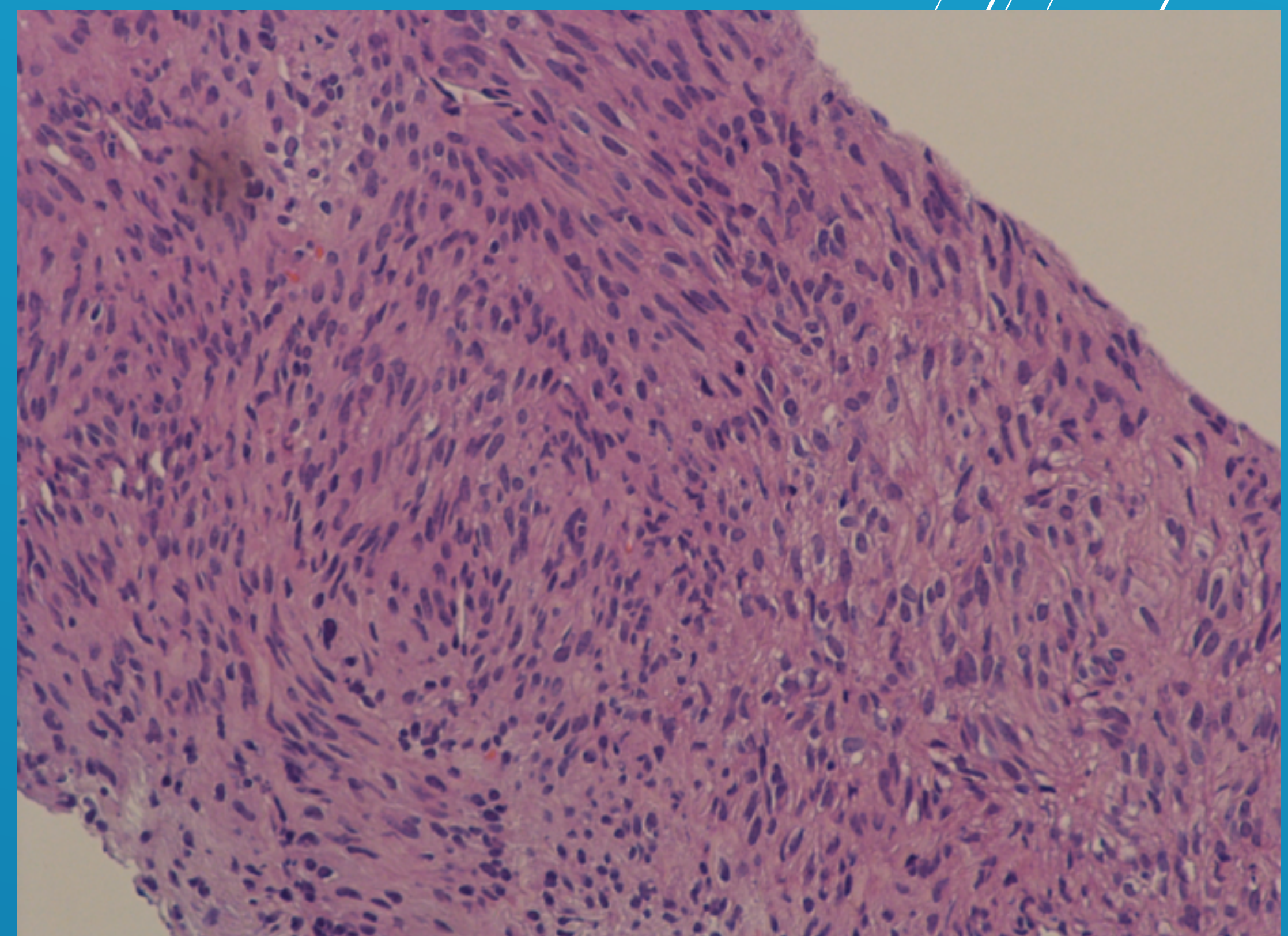
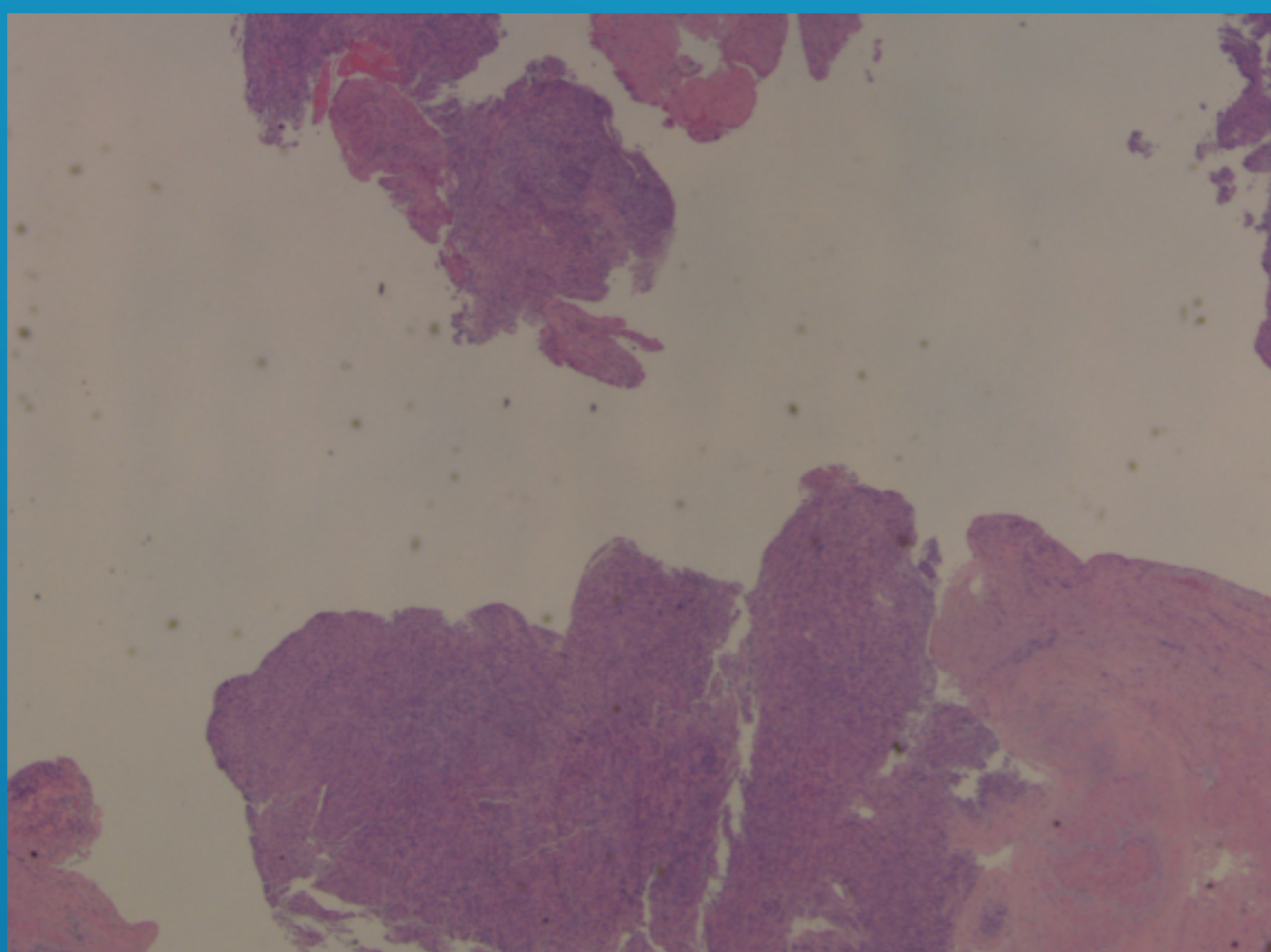
Pathological findings

Light microscopy showed fascicles of spindle cells with fine chromatin, fibrillary and eosinophilic cytoplasm.

Immunostain for c-kit, DOG1, CD34, caldesmon are diffusely positive, whereas S100, actin, desmin, CK MNF116 are negative.

KIT mutation analysis is detected with mutation in exon 11.

Mutation of PDGFRA was not detected.



Discussion

Extragastrintestinal GIST is a rare entity with more common site reported including the omentum, mesentery and retreperitoneum. This case presented at a rather unusual site as a vaginal mass. Possible differential diagnosis for a spindle cell lesion at female gynaecological tract will include leiomyoma, mesenchymal tumour of lower genital tract, spindle cell carcinoma or melanoma. Misdiagnosis may lead to inappropriate therapy because conventional chemotherapy and radiotherapy are not effective in the treatment of GISTs, whereas imatinib has a proven role in managing these tumors. Thus, it is important to consider extragastrintestinal GIST in the differential diagnosis for a spindle cell neoplasm in female genital tract.

Conclusion

Extragastrintestinal GIST present as a vaginal mass is a rare presentation, but with important clinical implication. Pathologist should be aware for this rare entity.

Extragastrintestinal stromal tumors presenting as vulvovaginal/rectovaginal septal masses: a diagnostic pitfall. . Int J Gynecol Pathol 2006