

Endometrial Adenocarcinoma in a 33-Years-Old Virgin Female

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Endometrial cancer is the third most common gynecologic cancer, and mainly occurs in menopausal women and rare in women of reproductive age. Endometrial cancer in young women can be difficult to diagnose, where the dysfunctional uterine bleeding is the most common cause. Most of these patients present with clinical evidence of polycystic ovarian disease but in some reports the patients lacked these features. The causes of endometrial cancer in this age group may be familial, associated with Lynch syndrome, or sporadic^{1,2}.

In postmenopausal women, endometrial thickness is positively correlated with the presence of endometrial malignancy and endometrial biopsy can be decided according to the endometrial thickness, however in women of reproductive age, there is no clinical guideline to determine when the endometrial biopsy should be performed³.

With this background we present a case of endometrial carcinoma in a young woman who had presented with prolonged vaginal bleeding. A 33-year-old virgin visited gynecology department complaining from abnormal uterine bleeding. An endometrial biopsy revealed FIGO (International Federation of Gynecology and Obstetrics) grade II endometrial adenocarcinoma. In the treatment of endometrial cancer, conservative management should be considered if the patient is nulliparous or wants the fertility preservation. However, this patient offered radical hysterectomy.

Key words: Virgin, Young Adult, Endometrial Neoplasm, Fertility Preservation

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