Recurrent Bilateral Ovarian Teratoma with Wilms Tumor Component

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Background

Ovarian teratomas are common germ cell tumors, usually benign and unilateral. Bilateral and recurrent forms are rare, especially in children. The occurrence of Wilms tumor (nephroblastoma) within a teratoma is exceptionally rare and diagnostically challenging.

Case Presentation

A 12-year-old female with prior bilateral mature teratomas (treated at age 8) presented 5 years later with recurrent pelvic pain. Imaging showed bilateral ovarian masses; surgery confirmed recurrent mature teratomas. Unexpectedly, Wilms tumor components were identified histologically.

Histopathology

Immunohistochemistry: Positive for WT1 (focal), PAX8 (diffuse), AE1/AE3, CD56; Negative for SALL-4, glypican-3, AFP. Diagnosis: Wilms tumor within teratomatous tissue.

Management & Follow-up

European protocol: 10 weeks vincristine; North American: observation post-resection. Family opted for surveillance. Ongoing ultrasound follow-up every 3 months under adolescent gynecology care.

Conclusion

This case emphasizes considering Wilms tumor in recurrent/bilateral ovarian teratomas. Detailed histopathologic and immunohistochemical analysis is essential. Close monitoring is crucial due to its rarity and unpredictable course.