Dear Sir

There are reports of paraneoplastic cerebellar degeneration: neurological symptoms pointing to occult ovarian cancer where patients present with intense vertigo as principle symptom. 1-3 Anti-Yo antibodies is implicated in this rare but disabling neurodegenerative disease that may point to an occult ovarian cancer. In this instant case a female patient of 29 years, married, nulliparaous presented with intense vertigo, nystagmus, diplopia, nausea and ataxia. She had CT scan and MRI of her brain revealing no abnormality and was treated by high dose of steroid on assumption of demyelinating disorder of brain stem. As she had no improvement she reported to me when I saw that in spite of nausea, vomiting and abdominal pain she did not have any USG of her abdomen. This revealed bilateral ovarian cyst with variegated appearance strongly suggested being ovarian cancer by the sonologist. Her CA 125 was 250 U/ml. Elisa for tuberculosis and urgent laparotomy was advised. She reported to state hospital and had laparotomy. Bilateral ovarian cystectomy was done, as cancerous features were absent. Histopathology showed tuberculosis. Patient treated with ATD with good response and is now free from vertigo and other related features. This is first reported case of nonmalignant ovarian tumour with such cerebellar symptom.

References


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