

## A case of ovarian goitre

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### Objective

Ovarian goitre is a rare form (less than 3%) of teratomas of the ovary. It occurs in women during the fourth and fifth decade and is most often an incidental ultrasound examination or histological diagnosis.

### Methods

We report a case of ovarian goitre in our gynecology and obstetrics department in 2018.

### Results

Mrs FC, 39 years old, G3P3 with a past medical history of hypertension and chronic renal failure, was admitted for management of an incidental finding of an ovarian cyst during the review of her hypertensive disease. The abdominal and pelvic ultrasound scan showed a heterogeneous right lateral uterine mass of 25 mm. A pelvic MRI revealed a 30 mm long lesion composed of presumably fairly well-defined tissue of ovarian origin with a recent haemorrhagic component, strongly enhanced after Gadolinium injection. The patient had a laparoscopy revealing a mass of the right ovary of 30 mm in diameter, solid, very vascularized, with presence of a peritoneal nodule. It was decided to convert to laparotomy for excision of the peritoneal nodule. Histopathological examination concluded atypical ovarian goitre with peritoneal implant with negative peritoneal cytology. The postoperative course was uneventful.

### Conclusion

The predominant presence of thyroid tissue within a teratoma of the ovary is traditionally called ovarian goitre and represents only a particular form without specific clinical manifestations, whose diagnosis of certainty is histological.