Diagnosis and surgical removal of uterine masses in two mares

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Uterine neoplasia is rare in the mare with a limited number of reports in the literature. Tumors that have been described affecting the endometrium include fibrosarcoma, fibroma, adenocarcinoma, lymphosarcoma, leiomyosarcoma, fibroleiomyoma and rhabdomyosarcoma. The most commonly described uterine neoplasia in mares is leiomyoma, a benign neoplasia arising from the outer smooth muscle of the uterus. This abstract describes the diagnosis and removal of uterine masses in two mares. The masses were very similar when visualized via trans-rectal ultrasound, however were determined to be of different origin on histopathology. Mare A, a 15 year old Thoroughbred mare was presented for examination of a 6 cm diameter mass at the cranial tip of the right horn. The mare had foaled approximately 45 days earlier and the mass had first been identified approximately 25 days after foaling on routine examination for breeding. The mass was palpable as a firm solid structure and trans-rectal ultrasonic examination revealed a 3.5 x 5 cm intraluminal mass with a soft tissue echogenicity. Hysteroscopic examination revealed that the mass was pedunculated and attached to the dorsal wall by a thin, 1 cm diameter stalk. The cervix was manually dilated and the hand advanced up the right horn until the mass could be grasped. Via manual manipulation the mass was peeled off of the endometrium and removed from the uterus with minimal hemorrhage. Histopathologic examination identified the mass as a uterine stromal polyp, a benign, non-neoplastic, idiopathic proliferation of the endometrium, more common in older mares. Mare B, a 20 year old Friesian mare, was presented for evaluation of a uterine mass that had been identified during trans-rectal ultrasound examination for routine breeding management. Trans-rectal ultrasound examination revealed a 7 cm mass of soft tissue echogenicity at the base of the left horn. Hysteroscopic examination revealed that the mass was attached to the dorsal uterine wall by a broad based, 1 x 3.5 cm, stalk. An attempt to remove the mass manually was unsuccessful due to the thickness of the stalk and significant hemorrhage from the stalk after manipulation. A vessel sealing device (LigaSure™; Medtronic, 710 Medtronic Parkway, Minneapolis, MN) was utilized to provide hemostasis and remove the mass. Histopathologic examination identified the mass as a uterine leiomyoma. Uterine leiomyomas are a relatively common tumor of the reproductive tract, are generally slow growing and do not metastasize. This abstract describes successful removal of two different types of uterine tumors that were indistinguishable via trans-rectal ultrasound, hysteroscopically or grossly.

Keywords: Uterine neoplasia, uterine mass

Reference