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Choriocarcinoma

Choriocarcinoma is a fast-growing cancer that occurs in a woman's uterus (womb). The abnormal cells start in the tissue that would normally become the placenta. The placenta is the organ that develops during pregnancy to feed the fetus.

Choriocarcinoma is a type of gestational trophoblastic disease.

Causes

Choriocarcinoma is a rare cancer that occurs as an abnormal pregnancy. A baby may or may not develop in this type of pregnancy.

The cancer may also occur shortly after a normal pregnancy. But it most often occurs with a complete hydatidiform mole. This is a growth that forms inside the womb at the beginning of a pregnancy. The abnormal tissue from the mole can continue to grow even after attempted removal, and can become cancerous. About one half of all women with a choriocarcinoma had a hydatidiform mole, or molar pregnancy.

Choriocarcinomas may also occur after an early pregnancy that does not continue (miscarriage). They may also occur after an ectopic pregnancy or genital tumor.

Symptoms

A possible symptom is abnormal or irregular vaginal bleeding in a woman who recently had a hydatidiform mole or pregnancy.

Other symptoms may include:

- Irregular vaginal bleeding
- Pain, which may be associated with the bleeding, or due to enlargement of the ovaries that often occurs with a choriocarcinoma

Exams and Tests

A pregnancy test will be positive, even if you are not pregnant. The pregnancy hormone (HCG or human chorionic gonadotropin) level will be high.

A pelvic exam may find an enlarged uterus and ovaries.

Blood tests that may be done include:

- Quantitative serum HCG
- Complete blood count
- Kidney function tests
- Liver function tests

Imaging tests that may be done include:

- CT scan
- MRI
- Pelvic ultrasound
- Chest x-ray

You should be carefully monitored after a hydatidiform mole or at the end of a pregnancy. Early diagnosis of choriocarcinoma can improve the outcome.

Treatment

After you are diagnosed, a careful history and exam will be done to make sure the cancer has not spread to other organs. Chemotherapy is the main type of treatment. It is usually effective.

Hysterectomy to remove the womb and radiation treatment are rarely needed.

Support Groups

You can ease the stress of illness by joining a cancer support group. Sharing with others who have common experiences and problems can help you not feel alone.

Outlook (Prognosis)

Most women whose cancer has not spread can be cured and will still be able to have children. A choriocarcinoma may come back within a few months to 3 years after treatment.

The condition is harder to cure if the cancer has spread and one or more of the following happens:

- Disease spreads to the liver or brain
- Pregnancy hormone (HCG) level is higher than 40,000 mIU/mL when treatment begins
- Cancer returns after having chemotherapy
- Symptoms or pregnancy occurred for more than 4 months before treatment began
- Choriocarcinoma occurred after a pregnancy that resulted in the birth of a child

Many women (about 70%) who have a poor outlook at first go into remission (a disease-free state).

When to Contact a Medical Professional

Contact your health care provider if you develop symptoms within 1 year after a hydatidiform mole or pregnancy.

Alternative Names

Chorioblastoma; Trophoblastic tumor; Chorioepithelioma; Gestational trophoblastic neoplasia; Cancer - choriocarcinoma

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