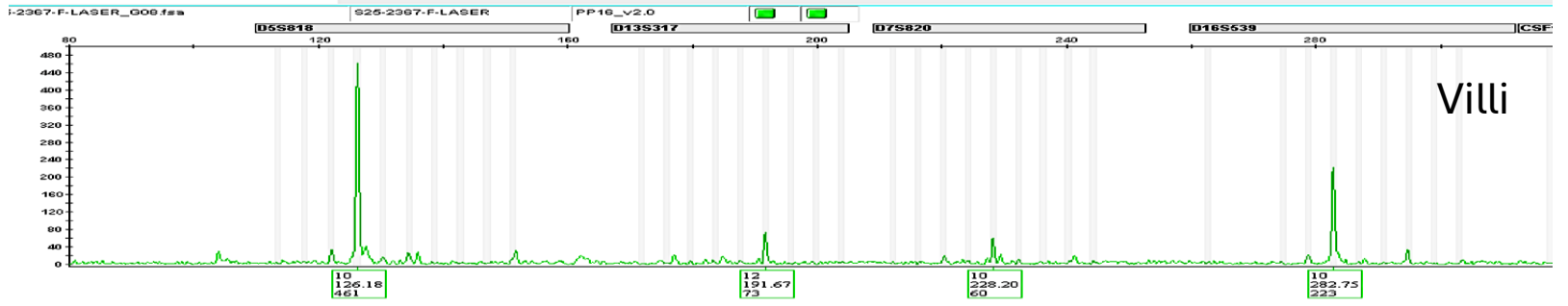
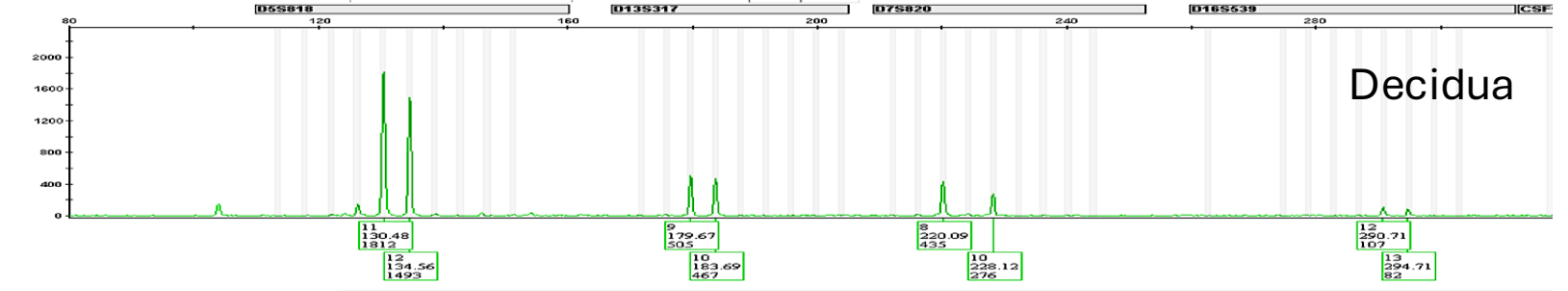
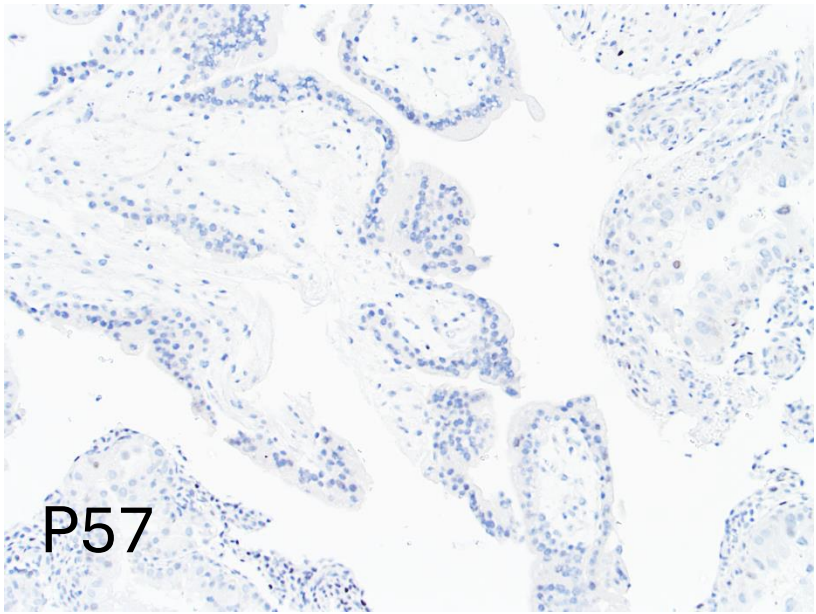
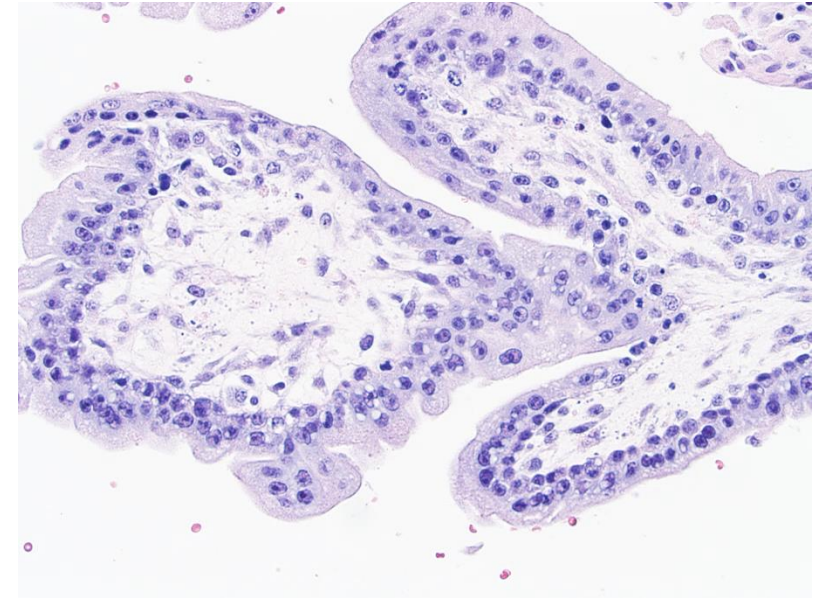
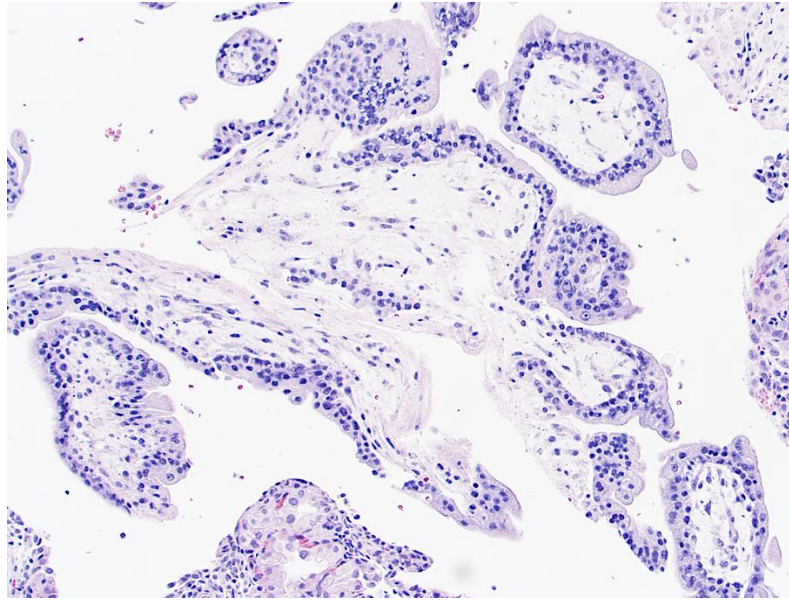
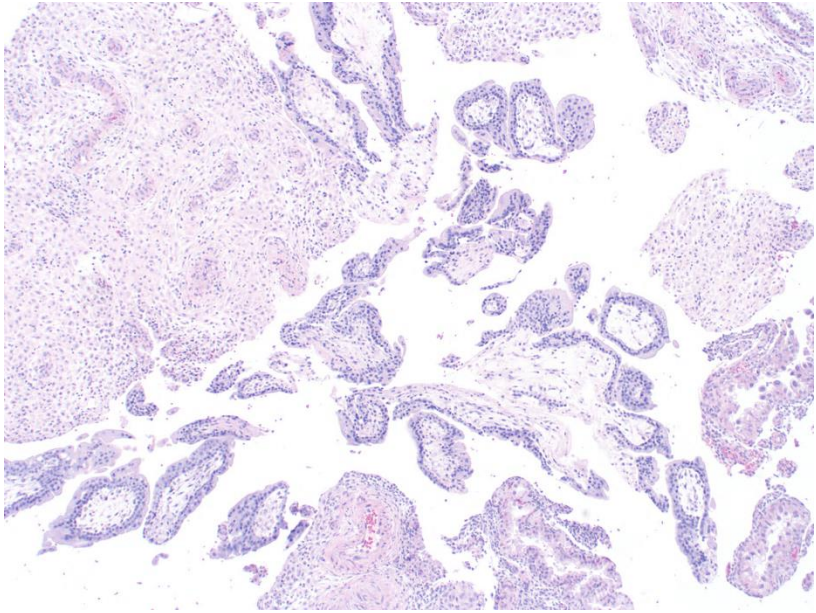




40-year-old woman with clinical suspicion for molar gestation undergoing uterine D/C.



Diagnostic Options

- A. Hydropic abortus
- B. Complete mole
- C. Partial mole

This case represents a rare example of very early complete hydatidiform mole (VECHM) with minimal histological abnormalities. The only indication for pathological evaluation to rule out molar pregnancy was an inappropriately elevated serum hCG level for the gestational age.

The chorionic villi show no hydropic changes, abnormal villous shapes, or trophoblastic hyperplasia. The only notable histological finding is the presence of frequent karyorrhexis. The diagnosis of complete mole is made by p57 immunostain, which demonstrates the characteristic loss of nuclear staining in the cytotrophoblast and villous stromal cells. Additionally, STR genotyping reveals a homozygous paternal-only profile in the villous tissue.

Final Diagnosis: Very Early Complete Mole