NOTE

Uterine adenocarcinoma with generalised metastasis in a bottlenose dolphin *Tursiops truncatus* from northern Patagonia, Argentina

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ABSTRACT: An endometrial adenocarcinoma with areas of squamous differentiation and generalised metastasis was observed in a bottlenose dolphin *Tursiops truncatus* stranded in northern Patagonia in July 1997. This is the second report of a uterine adenocarcinoma in a free-living cetacean and the first in a Delphinidae. This neoplasm likely compromised reproduction for several years. In addition, the dolphin presented tattoo-like skin lesions and its digestive tract was infested by *Anisakis simplex*, *Pseudoterranova* sp., *Braunina cordiformis* and *Corynosoma australe*.

KEY WORDS: Bottlenose dolphin · *Tursiops truncatus* · Uterine adenocarcinoma · Tattoo-like skin lesions · Parasites · Patagonia · Argentina

Published accounts of genital tumours in female cetaceans are relatively few. These include a likely dysgerminoma in a dusky dolphin *Lagenorhynchus obscurus* (Van Bressem et al. 2000); granulosa cell tumours in 3 beluga whales *Delphinapterus leucas* (Martineau et al. 1988, De Guise et al. 1994), short-finned pilot whales *Globicephala macrorhynchus* (Benirschke & Marsh 1984, Bossart et al. 1991), 2 fin whales *Balaenoptera physalus* and a blue whale *Balaenoptera musculus* (Rewell & Willis 1949 in Geraci et al. 1987); a mucinous cystadenoma of the ovary in a blue whale (Rewell & Willis 1949 in Geraci et al. 1987); a uterine adenocarcinoma in a beluga (Lair et al. 1998); uterine leiomyoma or fibroleiomyomas in 2 dusky dolphins (Van Bressem et al. 2000) and a sperm whale *Physeter macrocephalus* (Uys & Best 1966), as well as vaginal fibromas in a Blainville’s beaked whale *Mesoplodon densirostris* (Flom et al. 1980) and a finless porpoise *Neophocaena phocaenoides* (Chen et al. 1982). Other pathologies of the genitourinary system were also observed in pilot whales (Cowan 1966). With the exception of the uterine adenocarcinoma in a beluga whale (Lair et al. 1998), all uterine tumours were benign.

Since the early 1980s, the Laboratorio de Mamíferos Marinos (LAMAMA) of the Centro Nacional Patagónico (CENPAT) has collected and examined carcasses of marine mammals both stranded along the beaches of Patagonia and incidentally caught in fisheries, to study their biology (Dans et al. 1997a, Koen Alonso et al. 1998, 1999, 2000), parasites and diseases (Dans et al. 1999, Berón-Vera et al. 2001, Van Bressem et al. 2001), biogeography and interactions with fisheries (Crespo et al. 1994a, 1997a, Goodall et al. 1994, Dans et al. 1997b), as well as their abundance and population trends (Crespo & Pedraza 1991, Crespo et al. 1999b, Reyes et al. 1999, Schiavini et al. 1999). To date, more than 600 specimens have been recovered, of which approximately 180 were cetaceans.

During a routine beach combing in northern Patagonia in July 1997, a female bottlenose dolphin *Tursiops truncatus* that had just died was found at Playa Unión beach (43°24’S, 65°03’W). The animal was taken to the LAMAMA and autopsied the next day, following standard procedures (Norris 1961). Its age was determined after counting dentinal growth layers on longi-
tudinal sections of teeth (Crespo et al. 1994b). The number of corpora albicantia (CAs) was determined by standard techniques (Perrin & Donovan 1984).

The dolphin was 3.2 m long and weighed 296 kg. It was sexually mature with 43 CAs in the ovaries, including a recent one, and was estimated to be 29 yr old. The abdominal cavity contained at least 8 l of a whitish liquid. Numerous whitish to yellowish round (5 to 15 mm in diameter), firm nodules were scattered on the parietal and visceral peritoneum (Fig. 1), on the abdominal surface of the diaphragm and on the external side of the pericardium (few) as well as on most organs of the abdominal cavity, i.e. ovaries, uterus, kidneys, digestive tract, liver and spleen, causing adherence. The uterus was deformed and appeared as a very firm mass. On section, its wall was greyish, firm and thickened, especially in the uterine body, where it reached approximately 20 to 30 mm. The lumen was reduced although still permeable. The right mesovarium was enlarged (at least 10 mm in diameter), hard and greyish. The heart and both lungs appeared normal macroscopically.

Representative samples of the uterus, ovaries, kidneys, liver, spleen, diaphragm, lungs and nodules were fixed in formaldehyde 10% and processed automatically for histopathology. Five µm thick tissue sections were stained with Haematoxilin-Eosin for general morphology, with periodic acid-Schiff (PAS) for glucogen and mucopolysaccharides, with Masson Tricromic for connective and muscular tissues and with silver impregnation for collagen and reticuline fibres.

Microscopically, both the endometrium and myometrium were invaded by abnormal and irregular glands lined by several layers of medium-sized pleomorphic, epithelial cells, and also by conglomerates of the same cells lacking apparent glandular organisation. The tumoral glands and cords were separated from each other by connective tissue, especially abundant in the myometrium (Fig. 2). The neoplastic cells had an acidophilic cytoplasm, a large nucleus with a prominent nucleolus and an elevation of the nucleocytoplasmic ratio. A PAS-positive secretion was observed in the lumen of some tumoural glands. The number of mitosis in the tumour was moderate. Areas of necrosis were frequently seen in the lumen of the neoplastic glands. Few normal, endometrial glands could still be detected in the endometrium. Aggregations of disorganised cells, probably glandular and resembling those forming the uterine tumour, with necrotic and haemorrhagic areas were observed in the ovaries, kidneys, liver, spleen, diaphragm and nodules. In addition, microfoci of metastasis were detected in the lungs and metastatic embolisms were observed in the lymphatic vessels of the diaphragm, as well as in the arteries and veins of all the organs examined. An abundant fibrous stroma surrounded the neoplastic formations in the kidneys, spleen and diaphragm. Accordingly, the uterine neoplasm and the metastatic lesions were classified as an endometrial adenocarcinoma with areas of squamous differentiation and generalised metastasis.

The metastatic uterine adenocarcinoma may have caused the death of the bottlenose dolphin and is likely

Fig. 1. Ventral view of the abdominal cavity. Numerous nodules are scattered on the parietal and visceral peritoneum as well as on the surface of the intestines. (A) Higher magnification of nodules (scale bar = 1.81 cm)
to have compromised its reproduction for several years. This is the second report of a uterine adenocarcinoma in a cetacean and the first in a Delphinidae. Tumours of the genital tract seem to be very rare in the bottlenose dolphin. To our knowledge, they have never been described before in this species although its reproductive system and diseases have been intensively studied (Harrison et al. 1972, Harrison & McBreary 1977, Bossart 1984, Mead & Potter 1990, Cowan 1995, Miller et al. 1999). Uterine adenocarcinomas also seem to be uncommon in most domestic animals, although several cases have been described in cattle (McEntee 1990, Garcia-Iglesias et al. 1995). A high frequency of endometrial carcinoma (EC) has been observed in virgin laboratory rats (39.1% in Han/Wistar outbred stock, 62.3% in DA/Han inbred strain and ≥90% in BD II/Han inbred strain) and in laboratory rabbits (≥60% in females older than 4 yr) (Elsinghorst et al. 1984, Deerberg & Kaspareit 1987). Continuous oestrus due to laboratory conditions and the subsequent persistent high estrogen/progesterone ratio are thought to induce the development of EC in these animals (Elsinghorst et al. 1984, Deerberg & Kaspareit 1987). Uterine cancer (97% being EC) is the fourth most frequent neoplasm in women and is more common in postmenopausal individuals (Rose 1996). Excessive estrogen is associated with most of the risk factors (nulliparity, obesity, use of unopposed estrogens and late menopause, among others) that have been linked to EC in humans (Rose 1996).

In addition to the adenocarcinoma and generalised metastasis, the dolphin presented 18 tattoo-like skin lesions on the beak and melon. These lesions were irregular, slightly round and measured on average 15.15 (±6.16) × 11.77 (±4.9) mm (size range: length 30 to 5 mm, width 24 to 5 mm). This is the first report of tattoo-like lesions in cetaceans from the southwestern (SW) Atlantic Ocean. These marks were not detected in >100 small cetaceans examined during routine dissections carried on since the early 1980s and including dusky dolphins *Lagenorhynchus obscurus*, Commerson’s dolphins *Cephalorhynchus commersonii*, Peale's dolphins *L. australis*, short-beaked common dolphins *Delphinus delphis*, bottlenose dolphins *Tursiops truncatus* and long-finned pilot whales *Globicephala melas*. True tattoos are caused by unclassified poxviruses and have been observed in 5 species of Delphinidae and 1 species of Phocoenidae from the North Atlantic and the Southeast Pacific (for a review see Van Bressem et al. 1999).

The animal was also infested with several parasites. Individuals of *Anisakis simplex* and *Pseudoterranova* sp. (presumably *P. decipiens*) were found in the forestomach (L3 and L4 larval stages as well as adult forms) and main stomach (L3 and L4 larval stages of *Pseudoterranova* sp. and *A. simplex*; adult forms of *Pseudoterranova* sp.). L3 and L4 larval stages of *Pseudoterranova* sp. were also found in the duodenal ampoule. The digenean *Braunina cordiformis* was attached to the wall of the main stomach and at the border between the duodenal ampoule and the duodenum. Adult forms of the acanthocephalan *Corynosoma australis* infested the intestines. The latest species has been previously observed in dusky dolphins from the SW Atlantic, and infestation of the digestive tract by *A. simplex* and *B. cordiformis* has been described in


McEntee K (1990) The uterus: atrophic, metaplastic and pro-

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