



ORIGINAL RESEARCH PAPER

Surgery

A RARE CASE OF LEIOMYOMA OF THE BLADDER

KEY WORDS: Bladder, Leiomyoma, Turb

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ABSTRACT Bladder leiomyoma is a benign tumour of the bladder and constitute <0.5% of all bladder tumors. We report a clinical case of a 51-year-old female who presented with with symptomatic bladder leiomyoma. An ultrasound examination showed well-defined bladder leiomyoma in the right posterior bladder wall, which was excised through a transurethral resection. The pathologic diagnosis was bladder leiomyoma.

Introduction

Benign tumors of the bladder are rare and leiomyoma is a mesenchymal tumour of the bladder, with an incidence rate lower than 0.5%.¹ They are asymptomatic in 20% of cases. The vast majority of patients have obstructive or irritative urinary symptoms. The diagnostic tests are cystoscopy and ultrasound.²⁻³ Treatment consists of surgical removal of the tumor or endoscopic treatment.¹²The prognosis is excellent.^{11,13}

The authors describe a case of woman with bladder leiomyoma removed by endoscopy.

Case report

The patient, a 51-year-old female, was admitted to our surgical department with complaints of dysuria, pollakiuria, and urinary urgency for the last 4 months. The bladder ultrasound described a nodular thickening area in the posterior wall of regular contour measuring 15 mm x 20 mm. Urinalysis and urine culture were negative. The patient was visited by a urologist specialist and underwent cystoscopy, which revealed a lesion protruding into the bladder lumen. A transurethral resection of the bladder was performed and it went with no complications. The anatomopathological analysis established the diagnosis of bladder leiomyoma (cm 1.6). The ultrasound examination after 30 days was negative. The patient is currently asymptomatic.

Discussion

Leiomyoma is a benign smooth muscle tumor and they only represent <0.5% of all bladder cancers.^{1,4,5} Fewer than 250 cases of bladder leiomyoma have been reported. The incidence of bladder leiomyoma in women was twice as high as that in men, with a mean age of 44 years.⁶ The endovesical tumors are the most common and usually present with lower urinary tract symptoms, haematuria.⁷ Generally, larger leiomyomas have more symptoms. Traditional detection methods of bladder leiomyoma include ultrasound, CT, and magnetic resonance imaging. Ultrasound shows a small mass with a solid aspect, homogeneous, and hypoechoic encapsulated.⁸ Computed tomography and magnetic resonance imaging (MRI) can be performed to obtain further information on the size and location.^{9,10} Cystoscopy shows the presence of a sessile tumor protruding into the bladder.

The most common treatments for bladder leiomyoma are transurethral resection and open surgical excision and the approach depends on the location and size of the tumor. The transurethral approach is preferred for small lesions (<2 cm) and can result in a satisfying outcome. The recurrence is rare.

Conclusion

Bladder leiomyoma is a rare cancer. The case we presented showed that transurethral resection is a safe and reproducible approach for the treatment of bladder leiomyomas.

References

- Izzo L, Izzo S, Pugliese F, Izzo P. Case report : a rare case of giant basal cell carcinoma and malignant melanoma Indian J Of Res. Volume-7 Issue-6 June-2018 ISSN - 2250-1991
- Pardal H, Ferronha F, Gameiro C, Vilas-Boas V, Galego P, Melo P, et al. Intramural vesical leiomyoma in a patient with a pelvic fibrous tumour - case report. Acta Urol 2011;2:28-31.
- Liang H., Shengxian L., Chao Z., et al Rare symptomatic bladder leiomyoma: case report and literature review, Journal of International Medical Research 2018, Vol. 46(4) 1678–1684
- A case of relapsing secondary bladder adenocarcinoma after right colonic cancer. Izzo L, Pietrasanta D, Izzo P, Caputo M, Di Cello P, Meloni P, Bolognese A. Nat Clin Pract Urol. 2008 Jul;5(7):403-7. doi: 10.1038/ncpuro1155.
- Kim IY, Sadeghi F, Slawin KM. Dyspareunia: An unusual presentation of leiomyoma of the bladder. Rev Urol 2001;3:152-4.
- Xin J, Lai HP, Lin SK, Zhang QQ, Shao CX, Jin L, et al. Bladder leiomyoma presenting as dyspareunia: Case report and literature review. Medicine (Baltimore) 2016;95
- Carvalho TG, Botelho F, Resende A, Portugal R, Guimarães M, Silva J, et al. Leiomyomas of the bladder and urethra - two clinical cases. Acta Urol 2010;27:51-4.
- Dodia B, Mahajan A, Amlani D, et al. Leiomyoma of Urinary Bladder in Middle-Aged Female. J Obstet Gynaecol India 2017; 67: 147–149.
- Ortiz M, Henaou DE, Maya WC, et al. Leiomyoma of the urinary bladder: a case report. Int Braz J Urol 2013; 39: 432–434.
- Goel R and Thupili CR. Bladder leiomyoma. J Urol 2013; 189: 1536–1537.
- Gok A. Transurethral resection of a large urinary bladder leiomyoma: a rare case report. Urol J 2017; 14: 4052–4054.
- Haddad RG, Murshidi MM, Abu Shahin N, et al. Leiomyoma of urinary bladder presenting with febrile urinary tract infection: a case report. Int J Surg Case Rep 2016; 27: 180–182.
- Agrawal SK, Agrawal P, Paliwal S, et al. Bladder neck leiomyoma presenting with acute retention of urine in an elderlyfemale. J Midlife Health 2014; 5: 45–48.