

# Cavernous Hemangioma of the Female Urethra: A Rare Case Report

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Received January 2013  
Accepted June 2013

**Keywords:** Hemangioma; cavernous; female; urethra; treatment outcome.

## INTRODUCTION

**G**enitourinary hemangiomas are rare entities that can affect any portion of the urinary system. The urethra is rarely involved, and most reported cases have occurred in the male urethra.<sup>(1)</sup> To our knowledge few cases of hemangioma occurring in the female urethra have been reported.<sup>(2,3)</sup> We report a cavernous hemangioma of the urethra in a female patient.

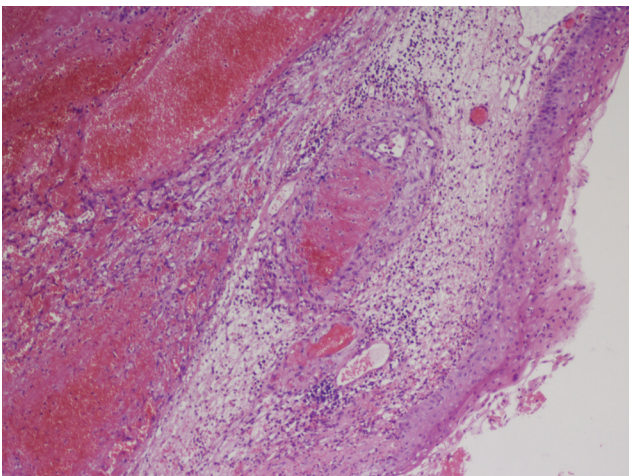
## CASE REPORT

A 68 years old woman presented with urethral mass and difficulty in voiding. The patient had no hematuria episodes and no other related urological or medical history. On examination a 2 cm erythematous, polypoid mass was arising from the urethra (Figure 1). It did not appear to be an urethral caruncle. Laboratory values were normal. There was a clinical suspicion for malignant tumor. Computed tomography (CT) scan of abdomen and pelvic floor was normal. Excision of the urethral mass was planned. Before the excision cystoscopy was performed, showing normal bladder neck and bladder mucosa. A Foley catheter was placed without



**Figure 1.** Mass protruding from the urethra.

difficulty. Then mass excised completely. The urethral mucosa was everted with interrupted 3-0 synthetic absorbable sutures. In pathological examination, an encapsulated mass was composed of large, cavernous vascular spaces filled with blood and separated by connective tissue stroma (Figures 2 and 3) which diagnosed as cavernous hemangioma of the urethra. The Foley catheter was removed at the seventh postoperative day and the patient was continent afterwards.



**Figure 2.** Cavernous vascular spaces filled with blood, and some thrombosis. There is squamous metaplasia at the surface epithelium ( $\times 10$ ).

The patient had no symptoms at 3-month follow-up with no evidence of tumor recurrence.

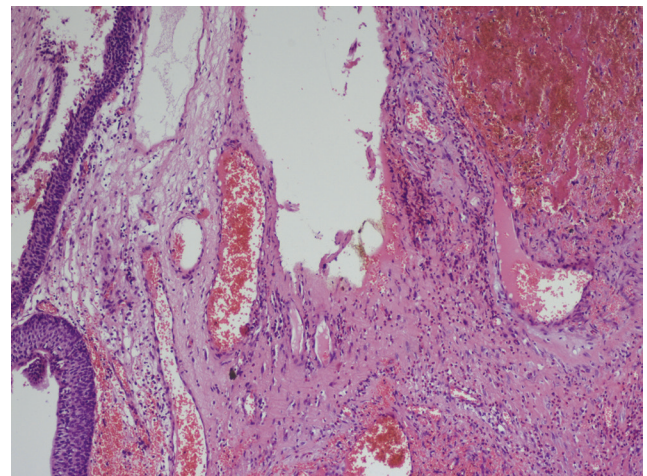
## DISCUSSION

Hemangiomas of the urinary tract are very rare and have been described in the kidney, ureter, bladder, prostate and urethra.<sup>(1)</sup> Involvement of urethra is extremely rare, and there have been only a few reported cases in women.<sup>(2,3)</sup> The most common symptom is hematuria but patients can also present with urethral mass.

For a female urethral mass, urethral caruncle, polyps, prolapse and periurethral abscess should be taken in consideration for benign entities. Squamous cell carcinoma, transitional cell carcinoma, adenocarcinoma, sarcoma and melanoma are responsible of malign entities in descending sequence. These masses usually relapse in spite of their benign nature. Treatment of urethral hemangiomas can include observation, oral steroids and various modalities of endoscopic treatment such as electrocautery or laser ablation.<sup>(4)</sup> Single, localized lesions should be removed with wide excision as these tumors have tendency to recur unless completely excised.

## CONFLICT OF INTEREST

None declared.



**Figure 3.** Urothelium at the surface and vascular structures with connective tissue stroma and inflammatory cells ( $\times 10$ ).

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