Urethral Caruncle: An Unusual Presentation of Ovarian Tumour

M.Y. Hammadeh a
K. Thomas b
T.P. Philp a

Departments of aUrology and bPathology, Whipps Cross Hospital, London, UK

Key Words
Urethra
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Abstract
Secondary female urethral cancer presenting as urethral caruncle is extremely rare. We report a primary ovarian adenocarcinoma in a 78-year-old female patient presented initially as a urethral caruncle. This case represents the first reported case in the world literature. The clinical features, investigations and pertinent literature are reviewed.

Introduction
Primary female urethral cancers are relatively rare: to date, approximately 1,200 such cases have been reported [1]. The association of primary urethral tumour and caruncles have been reported in 9 of 376 patients who presented with urethral caruncles [2]. Secondary female cancer is uncommon: of 73 urethral tumours, Roberts and Melicow [3] reported 3 secondary tumours. We report an ovarian adenocarcinoma in a female patient who presented originally with a clinical urethral caruncle.

Case Report
A 78-year-old female presented with urethral bleeding and difficulty in passing urine. Clinical examination showed a large urethral caruncle which was excised. The subsequent histopathology revealed a well-differentiated adenocarcinoma (fig. 1). Intravenous pyelogram and urine cytology were normal. Examination under anaesthesia revealed the presence of a pelvic mass but no urethral thickening, and cystourethroscopy showed a normal urethra and...
bladder. Random multiple urethral biopsies were taken. The histopathology of the urethral biopsies confirmed a residual well-differentiated adenocarcinoma with negative staining for prostate-specific antigen.

The subsequent abdominal and pelvic ultrasound and CT scans confirmed the presence of a large solid irregular mass, approximately 8 cm in diameter, in the pelvis superior to the bladder and slightly to

Fig. 2. Ovarian biopsy showing adenocarcinoma of similar morphology to the urethral caruncle. HE. × 200.

Discussion

Primary carcinoma of the female urethra is an uncommon malignancy that accounts for less than 0.02% of all cancers in women and 0.01% of all urologic malignancies. It is the only genitourinary neoplasm with a 4:1 predilection for women. More than 75% of urethral cancers occur in women between 50 and 70 years of age, with a higher incidence among Caucasians (88%) [1]. Various factors such as chronic irritation, caruncles, fibrosis, polyps, coitus, parturition, and certain viral infections have been suggested as being causatively related to urethral cancer, with little substantiating evidence [1]. Marshall et al. [2] identified primary urethral carcinoma in 9 of 376 patients with a clinically diagnosed urethral caruncle, an incidence rate of 2.4%.

Secondary female urethral cancer is very rare. Carcinoma of the bladder, vulva, vagina, cervix and bowel may involve the urethra by direct extension [4, 5]. Ovarian tumours, uterine carcinomas and choriocarcinoma, carcinoma of the lung, and lymphoma may metastasize to the urethra [3, 4, 5]. Roberts and Melicow [3] reported 3 secondary urethral tumours from primary lymphoma (2 cases) and an ‘oat cell’ carcinoma of the lung (1 case) which presented initially as a urethral caruncle. This case appears to be the first report in the world literature of a primary ovarian adenocarcinoma presenting as a urethral caruncle.

Female urethral cancer presenting as a urethral caruncle is extremely rare. The discovery of such a tumour should be followed by a diligent search for a possible primary extraurethral tumour.
References


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