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Giant Sub-Mucous Fibroid Presenting as a Huge Perineal Mass.

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INTRODUCTION

Extruding genital masses are rare conditions in early womanhood. More so with giant endometrial myoma. Its treatment depends on aetiology and gross clinical evaluation by presumed pathophysiological mechanism as illustrated in this case; Figure 2 photo before excision of mass.

Figure 2 photo before excision of mass

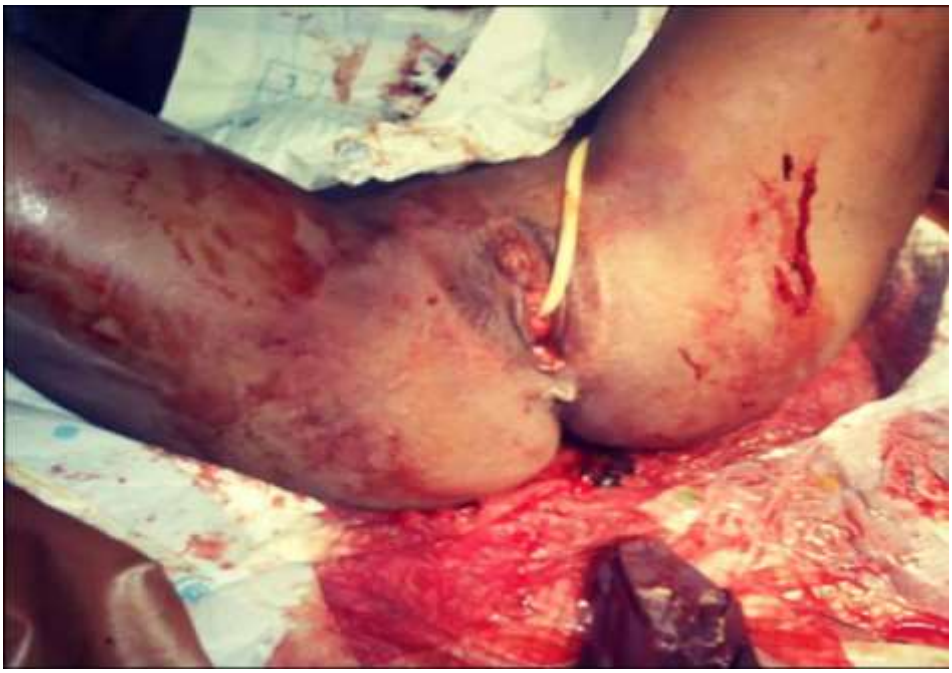
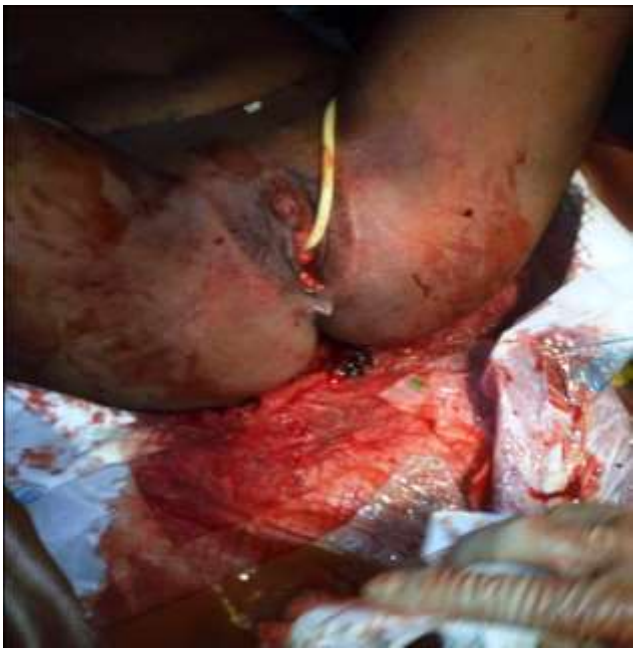


Figure 2 photo after excision of mass

CASE REPORT

A 25 years old nulligravida presented with an increasingly painful and uncomfortable giant mass at the perineum of more than 3-months duration. The symptoms have started gradually into no concomitant, sexual activity or menstrual relationship. There was no history of straining or pelvic manipulations ormassage.

No abnormal anatomical features were recorded as physical and sexual development has been normal. Clinical examination revealed a healthy young woman with normal findings on general review. This was a huge about the size of a big mango or avocado pear (11.2cm by 7.6cm) slightly tender (figure 1)



Vaginal examination was practically impossible because of lack of access. It was difficult to access or appreciate the stalk beyond the introitus. Pelvic ultrasound and routine laboratory investigation revealed to abnormalities.

A diagnosis of giant sub-mucous fibroid was made with a differential of genital prolapse/uterine inversion. A quick scan of the literature confirmed the rarity of the condition more so in this age group. An indwelling catheter was put in place for continuous bladder drainage and safety of the procedure under general anesthesia, the mass was further explored into the vaginal canal and noted to be arising from the endometrium beyond the cervical canal. The thick stalk was identified double-clamped, the mass separated, and delivered the stump was secured with double ligations with Chromic 2, suture. The woman has relief of the burden of the mass Fig. 2. She recovered fully from anesthesia. Histology report confirmed leiomyoma on cross-section

TREATMENT

Treatment in the case sited above, consisted of examination under anesthesia and excision of the fibroid stalk relieving the offending pain and discomfort. Delay in intervention would possibly have further increased the ulceration and bleeding. Misfortune may arise in course of misdiagnosis and wrong treatment. This case could be added to the rare causes of genital mass.

On follow up 6weeks later, these were no complaints though no sexual activity was recorded. She was

satisfied with treatment outcome and received counseling for other reproductive health conditions.

DISCUSSION

Uterine smooth muscle tumors are one of the most common human neoplasms. The prevalence of leiomyoma may be as high as 77%, when tumors are counted after 2mm serial sectioning of consecutive surgical hysterectomy specimen. [1]

Although many, if not most patients with leiomyoma are asymptomatic, the residual symptomatic cases are sufficient to result in a major public health concern for women of reproductive age.[1,2] Symptomatic leiomyomas are associated with abnormal uterine bleeding, pelvic pain and urinary dysfunction as noted in this case [2]. About 40-50% of all leiomyomas have structural chromosomal rearrangements [3,4]. Invariably HIV is associated with rare visceral leiomyoma and leiomyosarcoma in children with AIDS this patient was HIV negative despite her age [6].

Extruding sub-mucous fibroid is rare in very young women, with an incidence of 1.5 per 100,000 persons, The rarity of the condition may be due to underreporting considering the high incidence of fibroids in our practice. [7]

Of concern was the discomfort from the mass and as well as lack of access into the introitus. However, surprisingly the impact or menstrual function was unremarkable.[8]

Sonographic report excluded genital prolapse, uterine inversion and any malignancies or locally aggressive glandular cell carcimorna.[9] Most reported cases of extruding fibroid describe an existing extruding fibroid in antecedence.[10]

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