Prominent swelling on erection: Perineal angiomyxoma as a rare entity

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ABSTRACT

Perineal angiomyxoma is a rare entity, more commonly seen in females. We report a case of a 44 year old male who presented with a perineal swelling which became prominent with penile erections. Magnetic Resonance Imaging (MRI) revealed a T1 hypointense and T2 hyperintense midline lesion (4.6 × 2.5 × 5 cm) in relation to corpus spongiosum, with ill defined fat planes with the bulbospongiosus muscle and progressive enhancement on dynamic contrast sequence. A differential diagnosis of soft tissue sarcoma or hemangioma was made and the mass was completely excised via a midline perineal incision. The histopathology revealed features consistent with angiomyxoma.

INTRODUCTION

Perineal angiomyxoma is a rarity.[1,2] They usually occur within the perineum, vulva and inguinal areas, more commonly in females (6:1). Here, we report a case of angiomyxoma in a male who presented with a perineal swelling which became prominent with penile erections.

CASE REPORT

A 44-year-old male presented with a painless swelling in the perineum which became more prominent with penile erections. On physical examination, there was a firm, nontender, nonpulsatile, irreducible, noncompressible mass in the anterior perineal area, on the left of the median raphe. Sonography revealed a well-defined lobulated lesion in relation to the root of the penis abutting corpus spongiosum and left corpus cavernosum without any obvious communication. Contrast-enhanced magnetic resonance imaging (CEMRI) revealed a T1 hypointense and T2 hyperintense midline lesion (4.6 cm × 2.5 cm × 5 cm), with ill-defined fat planes with bulbospongiosus muscle and progressive enhancement on dynamic contrast sequence, suggesting a suspicion of soft tissue sarcoma or hemangioma [Figure 1]. After discussion with the radiologist, a contrast-enhanced ultrasound was performed for a multiphasic and real-time delineation of the vascular nature of the mass and it did not reveal any feeding vessel and a possible diagnosis of benign nerve sheath tumor was also suspected besides soft tissue sarcoma.

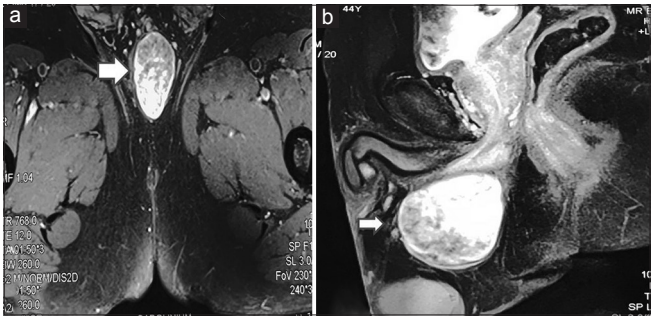

Figure 1: Contrast-enhanced magnetic resonance imaging of the patient showing hyperintense lesion in the perineum on T2-weighted image (a) Axial; (b) Sagittal)

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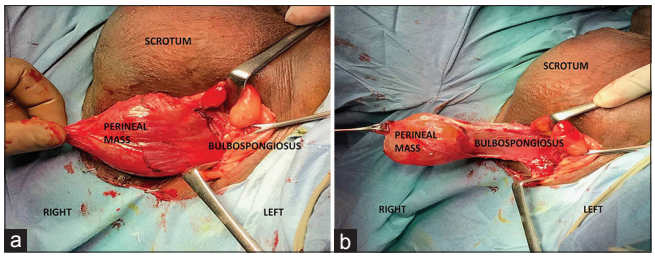

Figure 2: Intra-operative photograph showing (a) Perineal mass and (b) its relation to bulbospongiosus muscle

The patient underwent excision of the perineal mass through a midline perineal incision. The mass was encapsulated lying deep to left bulbospongiosus muscle and was completely excised [Figure 2]. Gross specimen showed well-encapsulated soft spongy mass.[Figure 3a] Histopathology showed encapsulated tumor with spindle-shaped and stellate cells embedded in myxoid background suggestive of angiomyxoma [Figure 3b]. At 3-month follow-up, the patient is asymptomatic. First described by Steeper and Rosai,[1] perineal angiomyxomas are extremely rare with around 150 reported cases till date. Incidence in male to female is 1:6.[2] MRI is the current imaging of choice and the lesions appear hypointense on T1-weighted, hyperintense on T2-weighted sequences, and usually have a characteristic whorled appearance after contrast administration.[3] Aggressiveness of angiomyxoma is decided by the vascularity dispersed irregularly throughout the parenchyma and mitotic figures.[4] We report a rare case of angiomyxoma of the anterior perineal triangle in a male, presenting with the prominence of perineal swelling on penile erection.

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

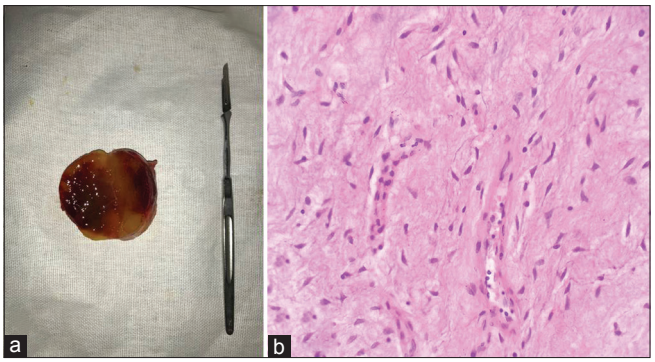

Figure 3: (a) Gross specimen showing well-encapsulated soft spongy mass. (b) Photomicrograph showing encapsulated tumor with spindle-shaped and stellate cells embedded in myxoid background. Tumor cells are elongated and have vesicular nuclei and moderate cytoplasm with intervening vessels consistent with angiomyxoma

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