



Oncology

Fibrous pseudo tumor of the tunica vaginalis mimicking paratesticular cancer

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ABSTRACT

Fibrous pseudo tumor of the tunica vaginalis is a rare lesion affecting men representing a challenge in its diagnosis and treatment. We reported the case of a 17 year old male patient who presented for a right scrotal mass. Surgical resection of the mass was performed and the histological diagnosis was a fibrous pseudo tumor of the tunica vaginalis. It is usually affecting men in the third decade and the fear is to miss its main differential diagnosis which is testicular cancer. Studies should give more concern to this entity, so that we can avoid unnecessary orchiectomy.

1. Introduction

Fibrous pseudo tumor of the tunica vaginalis is a rare lesion affecting men representing a challenge in its diagnosis and treatment.¹

The diagnosis is histological, the treatment is surgical and the fear is missing the malignant differential diagnosis.

Case presentation:

We report the case of a 17 year old male patient with no prior medical history who consulted for a right scrotal mass evolving for 3 months.

Physical examination showed a painless 1 cm mass of the right scrotum independent from the testis and the epididymis that were normal. The contralateral examination of the testis and epididymis showed no abnormalities.

The malignant origin was suspected, so scrotal ultrasounds were performed and showed a normal testis and epididymis and a hypo echoic mass of 2cm in the right scrotum (Fig. 1).

The Serum alpha-fetoprotein, beta human chorionic gonadotropin, and serum lactate dehydrogenase levels were within the normal limits.

We performed a right incision of the scrotum, per operative findings were a 2cm cystic mass developed at the whim of the tunica vaginalis far from the testis and the epididymis (Fig. 2) with a hemorrhagic content. Dissection and total resection of the mass were done. Histological examination concluded in a fibrous pseudo tumor of the tunica vaginalis (Fig. 3).

2. Discussion

In 1904 Balloch described for the first time the fibrous pseudo tumor of the vaginalis tunica.¹ It is a very rare lesion but represent the second most common benign paratesticular masses after adenomatoid tumors.^{1,2}

Commonly affecting males of the third decade it can happen at any age and is usually painless.³ The sizes that have been reported in the literature varied from 0.5cm to 8cm with one reported tumor measuring 25cm.⁴

The mass is frequently developed from the tunica vaginalis but in less than 15% can arise from the spermatic Cord and the tunica albuginea.¹ the fibrous pseudo tumor of the vaginalis tunica is usually associated with a history of scrotal trauma or orchiepididymis.¹

The treatment is surgical to have the histological confirmation: (sparse chronic inflammatory cell infiltrate, calcification, ossification, and myxoid changes that can also be observed) so that we can exclude the malignant differential diagnosis (metastatic neuroblastoma, lymphoma, leiomyosarcoma, and fibrosarcoma).⁵

Perioperative findings can lead to orchiectomy when total dissection of the tumor is not possible due to proximity to the testis.

3. Conclusion

The pathogenesis of the fibrous pseudo-tumor of the vaginalis tunica remain not well understood studies should give more concern to this entity so that we can reduce the number of orchiectomies due to this

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Fig. 1. Scrotal ultrasounds showing a hypo echoic 2cm mass independent from the testis and the epididymis.

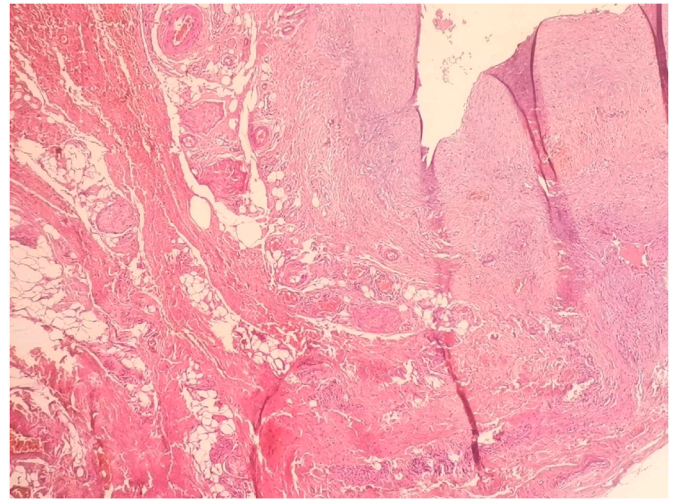


Fig. 3. Histopathological findings showing sparse chronic inflammatory cell infiltrate.



Fig. 2. a 2cm cystic mass with a hemorrhagic content developed from the tunica vaginalis.

benign lesion.

References

1. Jha A, Baidya JL, Batajoo R. Paratesticular fibrous pseudotumor arising from tunica vaginalis. *Nepal Med Coll J.* 2009;11:145–146.
2. Memon AA, Soomro Q. Diffuse fibrous pseudotumor of paratesticular tissue. *J Surg Pak.* 2009;14:96–98.
3. Mutreja D, Murali M, Arya A. Pseudotumors of paratesticular region mimicking malignancy. *Arch Int Surg.* 2013;3:70–72.
4. Polsky E, Ray C, Dubilier L. Diffuse fibrous pseudo-tumor of the tunica vaginalis, testis, epididymis and spermatic cord. *J Urol.* 2004;171:1625–1626.
5. Seethala RR, Tirkes AT, Weinstein S, et al. Diffuse fibrous pseudotumor of the testicular tunics associated with an inflamed hydrocele. *Arch Pathol Lab Med.* 2003; 127:742–744.