

Surgical Surprise: Unveiling an Unexpected Testicular Condition

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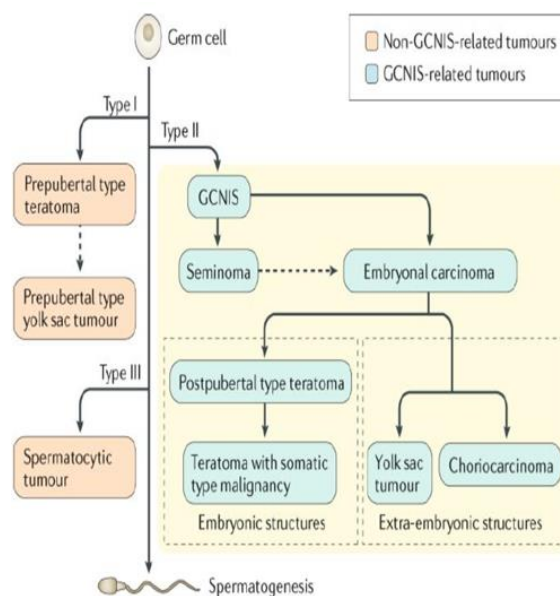
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Type of Publication: Case Report

Conflicts of Interest: Nil

Abstract

Leiomyomas are benign mesenchymal neoplasms that originate from smooth muscle and most commonly occur in the uterus, small bowel and esophagus. Presently, there are limited number of published reports of leiomyomas affecting the male genitourinary tract. Of these, testicular leiomyomas are exceedingly rare. This case report details the diagnosis, treatment, and follow-up of a 21-year-old male diagnosed with testicular leiomyoma.



Flowchart 1:

Case report

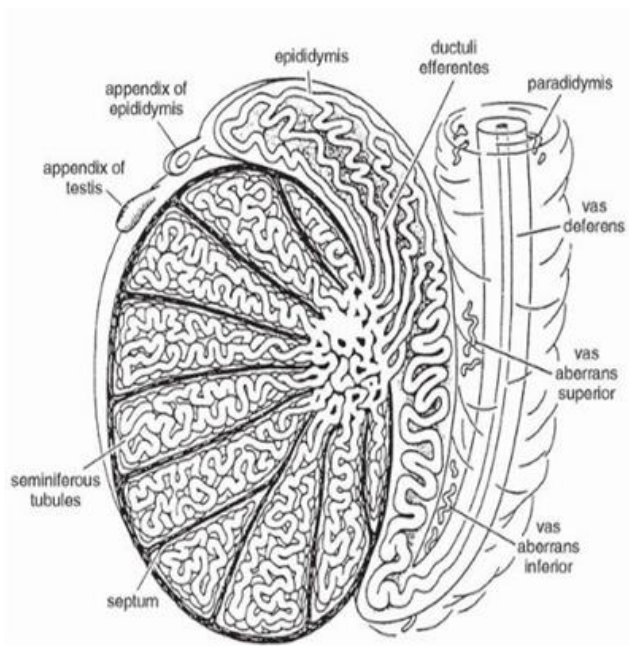


Figure 1

Patient Information

21/M, No significant past medical history, No family history of cancer. Painless swelling in left scrotum since 5 months. No associated symptoms

Clinical Examination

Left scrotal swelling ~14x12x8cm, variable consistency and non-tender. Right testis is normal. Vital Signs: Normal and stable.

Diagnostic work up

Serum Tumor Markers: AFP, β -hCG, LDH levels were within normal limits.



Figure 2

A hypoechoic mass in the left testis with a few foci of calcifications, no evidence of increased vascularity



Figure 3: Giant left intrascrotal mass



Figure 4: Left testicular Mass

Pt underwent left orchidectomy

Histopathology shows Fibrous tissue with acute inflammation and dense calcification. Immunohistochemical stain for SMA and vimentin was positive on the tumor cells, while S100, Ki67 were negative.

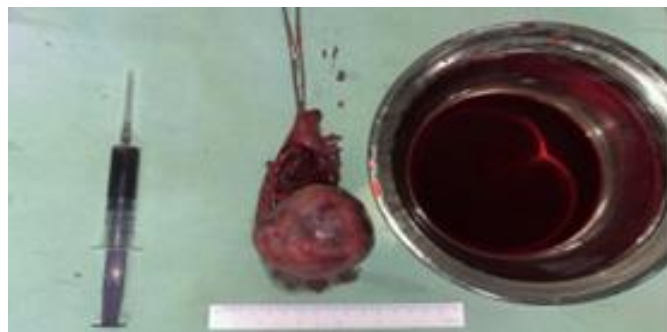


Figure 5: Testicular mass with Evacuated hematoma

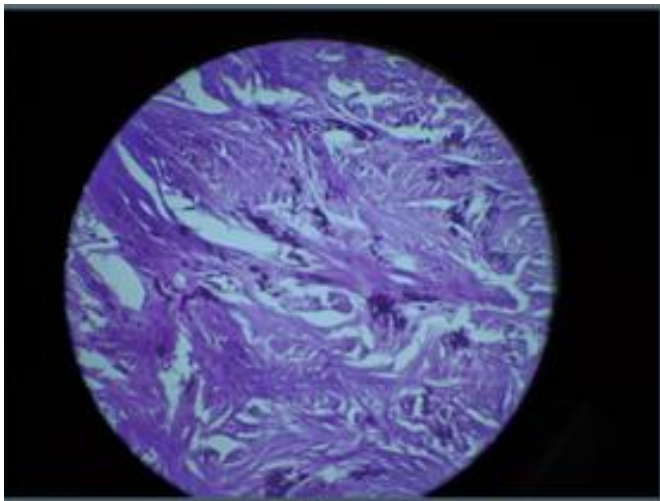


Figure 6

Discussion

Testicular leiomyomas are rare benign tumors, typically asymptomatic and found incidentally during evaluation of testicular masses.

Diagnosis is confirmed via histopathological examination. Imaging, such as ultrasound, can suggest the diagnosis, not definitive.

These tumors arise from smooth muscle in tunica albuginea/spermatic cord and characterized by uniform spindle-shaped cells.

Prognosis is excellent after surgical removal, with low recurrence and no malignant potential.

This case underscores the rarity and diagnostic challenges in young adults.

Early diagnosis and multimodal treatment are critical for favorable outcomes.

Conclusion

This case of leiomyoma of the testis in a 21-year-old male highlights the importance of considering rare tumours in the differential diagnoses of testicular masses. Comprehensive management involving surgery can lead to successful outcomes, but ongoing surveillance is crucial.

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