

Case Report

Papillary Urothelial Neoplasm of Low Malignant Potential of Urethra- A Case Report

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Abstract: Papillary urothelial neoplasm of low malignant potential is a premalignant lesion with negligible risk of progression, as there is no associated invasive component. We describe a patient of PUNLMP of penile urethra who presented with lower urinary tract symptoms with recurrence. This lesion aroused strong clinical suspicion of infective etiology. A clinical diagnosis of condyloma was made initially and was treated with cryotherapy. Subsequently a clinical diagnosis of Rhinosporidial polyp was made. Histopathology examination showed PUNLMP and patient is on close follow up. The diagnosis of this entity is important as it determines the management of the patient.

Keywords: PUNLMP, recurrence.

INTRODUCTION:

Papillary urothelial neoplasm of low malignant potential is a papillary urothelial tumor with minimal atypia. It is associated with greater propensity for recurrence and rare mortality (Maxwell, J. *et al.*, 2015). Clinical symptoms and recurrence of lesion arouse strong suspicion of rhinosporidiosis.

CASE PRESENTATION:

A 66 year old male patient presented with lower urinary tract symptoms and swelling over tip of penis for 7 months. There was history of transurethral resection of prostate 10 months back and a growth over penis, which was resected and diagnosed histopathologically as condyloma acuminata. Patient had symptom free period followed by recurrence of growth after 3 months for which he underwent 8 cycles of cryotherapy.

Local examination showed a polypoidal friable lesion at urethral meatus measuring 3 x 2 cm. Digital rectal examination showed grade I prostatomegaly. Per abdomen examination and other systems within normal limits. Basic lab investigations were within normal limits.

Uretherocystoscopy showed 3 x 2 cm friable growth in the distal urethra extending proximally from the meatus. Urethral meatectomy was done and growth was excised.

Histopathology showed thickened urothelium lining the papillary fronds, the cells are uniformly bland with slightly enlarged nuclei, with sparse mitotic figures. A diagnosis of papillary urothelial neoplasm of low malignant potential was made. A re-excision surgery of the base of the lesion was done, which showed minimal residual neoplasm. Patient is under close follow up.

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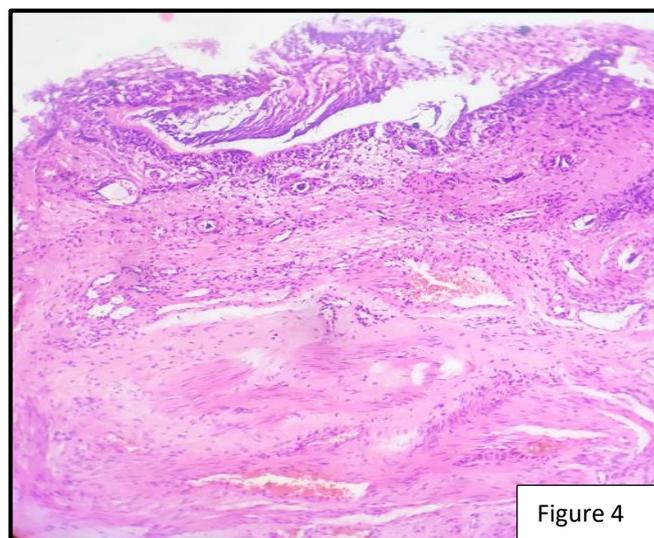
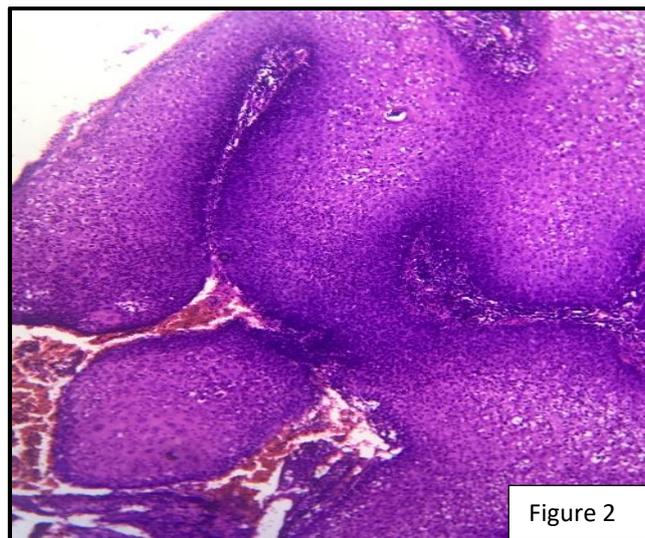


Figure 1: Friable growth in penile urethra, Figure 2, 3: Microscopy H & E at 10X and 40X, Figure 4: reexcised base of lesion.

DISCUSSION

Papillary urothelial neoplasm of low-grade malignant potential has a histopathologic feature that requires close follow up of the patient, even though it has limited biologic aggressiveness. It has high propensity for local recurrence (Kim, J. *et al.*, 2017); however, it has not been categorized as carcinoma. Low grade Papillary urothelial carcinoma has delicate papillae with extensive branching. It should be differentiated from PUNLMP because, small percentage of low-grade carcinomas can progress either to invasive carcinoma or high grade non-invasive papillary carcinoma². A diagnosis of PUNLMP for young patients avoids psychological and financial implications of cancer diagnosis but allow the patient to be followed up closely (Moch, H. *et al.*, 2016).

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