

Title: Vulvovaginal masses: Unusual presentations

CASE 3

INTRODUCTION

Vulvo-Vaginal masses are commonly seen in OPDs. May be inflammatory, inclusion cysts, benign or cancerous growths, m/c are Bartholin's cysts. Other vulval swelling are less common.

CASE 1

30 yrs/F P2L2, c/o swelling in labial region, asso. with pain and dyspareunia. Cystic/firm mass of 3*3cm in lower 2/3rd of the left labia, regular margins, slight tenderness+, no induration. On dissection, encapsulated firm mass, on cut section, whorled appearance like leiomyoma was seen, confirmed same on HPE.

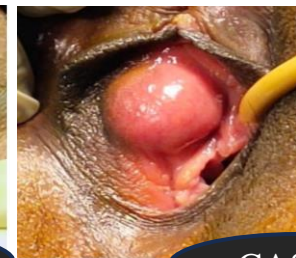
CASE 2

22yrs, c/o mass in right labia with dyspareunia, had cosmetic concerns, affecting sexual life. Right labial mass 2*2 cm into the vagina, firm and mobile. Gartner's cyst suspected. A firm mass dissected surgically, on HPE was confirmed as vulval leiomyoma.

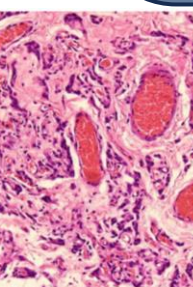
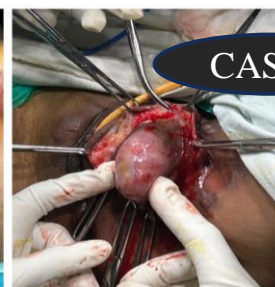
CASE 1



CASE 2



CASE 3



CONCLUSION

Unusual cases are increasing. High degree of clinical suspicion for malignancy, preoperative investigations & meticulous surgical dissection are key to definitive management and cure.

41yrs/F, P1L1, c/o recurrent swelling on outer vulval region, with pain. 5*4 cm firm mass seen with regular margins, indurated and firm/hard consistency. H/o excision of mass on same side 1 yr back. USG suggestive of a complex mass with minimal vascularity. On MRI, mass was heterogeneously hyperintense on T2 wi with wall enhancement. High index of malignancy suspected, meticulous dissection done, removed encapsulated firm mass. HPE was Angiomyofibroblastoma with fibrosarcomatous transformation (AMF)

DISCUSSION

1. **Leiomyomas** of vulva are rare, misdiagnosed as Bartholin cyst preop. Originate from smooth muscle of the labio-vulval region, are painless, solitary, and well circumscribed. Can affect any age. Surgical removal is the treatment. Patients need follow up for the chance of recurrence.
2. **AMF** is benign soft tissue tumor usually affecting vulva of reproductive age. It is asymptomatic, mimics Bartholin's cyst, made up of stromal cells and prominent blood vessels. AMF is usually benign, only few reported cases of recurrence and sarcomatous transformation.

References:

1. Anurag RS, Shah PA, Bhaskar M, *et al*, Vulval leiomyoma: a rare clinical entity *BMJ Case Reports* CP 2023;16:e257307.
2. Kalambe M, Gattani P, Bankar NJ. A Case Report of Vulvar Leiomyoma: A Rare Pathological Entity. *Cureus*. 2023 Aug 2;15(8):e42878. doi: 10.7759/cureus.42878. PMID: 37664286; PMCID: PMC10474907.
3. Nielsen GP, Young RH, Dickersin GR, Rosenberg AE. Angiomyofibroblastoma of the vulva with sarcomatous transformation ("angiomyofibrosarcoma"). *Am J Surg Pathol*. 1997 Sep;21(9):1104-8. doi: 10.1097/0000478-199709000-00016. PMID: 9298888.