Cutaneous Metastasis of Transitional Cell Carcinoma of Urinary Bladder-An Unusual Case

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Introduction

The reported incidence of cutaneous spread from primary urologic malignancies is 1.3%. Urinary bladder malignancies altogether account for 0.84% of cutaneous metastases [1]. In this case report, we present a patient with transitional cell carcinoma bladder who developed a solitary subcutaneous nodular metastasis in the right gluteal region of two months duration [2].

Case Report

A 60M presented with total recurrent painless gross haematuria with passage of clots for one year. No history of LUTS. GPE-normal. LE-tender s/c mass of size 4x3 cm, firm, freely mobile, on the (R) gluteal region, local tempt normal (Figure 1) [3].

Results

Cystoscopy done a papillary growth of approximately of size 4x3cm in the right posterolateral wall and trigone close to bladder neck. No changes suggestive of carcinoma in situ on cystoscopy. TURBT was done. Biopsy-low grade papillary urothelial carcinoma (lamina invasive) [4]. FNAC (fine needle aspiration cytology) of the subcutaneous nodule was strongly suggestive of metastatic deposits of urothelial carcinoma. CT urography showed metastatic bony lesions in the spine. The patient was referred to radiotherapy department for further treatment (Figure 2).

Conclusion

This is a rare case of early presentation of cutaneous metastasis of transitional cell carcinoma particularly of low grade type. In many cases, as in our patient, treatment is mainly supportive and prognosis is poor (Figure 3) [5]. Therefore, it is important for the medical community to have access to each case, through case reports, so as to advance our understanding of this particular disease.

References

