CASE REPORT

Urethral polyp verumontanum

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ABSTRACT

Congenital posterior urethral polyps are rare benign lesions that can cause a variety of symptoms in young boys, the diagnosis is usually made by cystourethrogram and ultrasonography where the polyp appears as a soft tissue mass arising at the base of the urinary bladder. We present a case of verumontanum polyp in a 7-year-old boy who presented to us in October 2001 with terminal hematuria, dysuria, interrupted stream and suprapubic pain. The polyp was diagnosed by ultrasonography and cystourethrogram. Transurethral resection of the polyp was performed and pathological assessment revealed a fibroepithelial lesion which is consistent with congenital posterior urethral polyp. After 18 months follow up, the patient was free of symptoms. We reviewed the literature to identify the presentation, diagnosis, treatment options and prognosis of these polyps. In the past 20 years the posterior urethral polyp has become more common than before, and it should be considered in boys with lower urinary tract dysfunction and hematuria.


Urethral polyps are rare lesions that may occur in the anterior and posterior urethra. Anterior urethral lesions are less frequent than posterior urethral polyps. Medline and pubmed literature search revealed 48 articles and case reports from different parts of the world, only 5 cases of congenital anterior urethral polyps were reported while posterior urethral polyp become more common than before. Kimche and Lask1 reported that only 50 cases was reported in 1982. Our recent literature review revealed the presence of 138 cases reported worldwide. De Castro et al2 reported the largest international series of 17 patients, studied at the University of Bologna in Italy. Congenital polyps are usually fibroepithelial lesions and are different from the polypoid lesions caused by indwelling catheters.

Case Report. We present a case of a 7-year-old boy with terminal hematuria of 3 weeks duration, burning micturition, interrupted stream and suprapubic pain. Urine analysis revealed that urine is loaded with red blood cells. Cystourethrogram showed filling defect at the prostatic urethra extending into the bladder neck (Figure 1). Ultrasonography showed small pedunculated mass at the area of the bladder neck (Figure 2). Urethrocytoscopy showed urethral polyp attached at its base with the verumontanum and pedunculated through the bladder neck into the bladder. Transurethral resection of the polyp was performed. Pathological examination revealed a fibroepithelial polyp that is covered by inflamed urothelium and squamous metaplasia. The subepithelial stroma consisted of loose fibrous tissue and few inflammatory cells. No prostatic glandular tissue could be identified. After 18 months of follow up, the patient was free of the symptoms.

Discussion. Congenital posterior urethral polyps are uncommon lesions, mostly occurring in...
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Immuo histochemical techniques have verified these polyps in men to be of prostatic epithelial origin.\textsuperscript{11} The rare anterior urethral polyp has the same morphology as the posterior one. Transurethral resection of the polyp is successful and no recurrence has been reported.

References