Abstract

Objective: Leiomyoma is a benign lesion which represents 0.04-0.5% of bladder tumors. It is more common in females and its peak incidence is between 4th and 5th decades. Surgery is the treatment of choice and adequate results have been previously reported. Methods: 38 years old male patient who consulted for chronic pelvic pain syndrome. CT scan showed a 2cm diameter exophitic lesion at the anterior left lateral bladder wall, which protruded into the perivesical fat. We performed a laparoscopic partial cistectomy locating the tumor and resecting it with simultaneous cystoscopic control, obtaining negative margins. The operative time was 70 minutes with an intraoperative blood loss of 50 ml. Postoperative period was uneventful. Final pathology reported: Bladder wall leiomyoma, without mitosis or atypia. Immunohistochemistry was positive for Actine and Vimentine establishing diagnosis. Cd 117 (ckit) was negative and ruled out a Gastrointestinal Stromal Tumor. Conclusions: Leiomyoma is bladders most common benign non epithelial tumor. It represents 35-46% of these lesions with a 2:5 male/female ratio. It origins from the smooth muscle bundles and at the urinary tract the most common localizations are kidney and bladder. Clinical presentation depends on tumor size and localization. Ultrasound is the most useful diagnostic tool and the pathological diagnosis is mandatory. Surgery is the treatment of choice and technique depends on tumor size and localization. The laparoscopic approach seems to be an effective alternative in this group of tumors. Prognosis is good and recurrence is rare.

Keywords

Laparoscopy, Bladder leiomyoma, Partial cystectomy