

Large urethral stone impersonating as penile cancer

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DESCRIPTION

An 80-year-old male chronic smoker presented with dysuria—frequency, poor flow and urethral discharge of blood mixed with pus of 2 weeks' duration. The patient also reported hardness on penile surface while voiding. A local examination showed a bulky penis rigid in consistency (*figure 1*). Prepuce was not retractable. The penile skin, bilateral testis, base of the penis and groin region were normal. Routine work up was within normal limits. An abdominal ultrasound showed the abdomen was grossly normal. The patient was suspected of having penile cancer and counselled for penile dorsal slit and tissue biopsy for diagnosis. Under penile block, dorsal slit prepuce incision was given. To our surprise, a hard stone was visualised gouching from the urethral meatus (*figure 2*). The patient was explained the status and agreed to stone extraction. After ventral meatotomy incision was given, the stone was grasped and freed from urethral mucosa. Piecemeal extraction was done in view of bulk of the stone (*figure 3*). Meatotomy was refined using



Figure 1 Lateral view of the penis showing oedematous prepuce and bulky penile shaft appearing as penile cancer.



Figure 2 Image of the glans penis with the stone protruding from the meatus after dorsal slot incision.



Figure 3 Bulk of the urethral stone extracted.



Figure 4 Ventral meatotomy refashioning with Foley catheter in situ.

Patient's perspective

I sincerely thank the doctors for managing my case well and keeping me informed in a timely manner.

Learning points

- ▶ A large urethral stone without prior history of stone disease is extremely rare.
- ▶ It may present with lower urinary tract symptoms, pyuria and bloody discharge mimicking penile cancer.
- ▶ In an outpatient clinic, a urologist should be aware of this rare misdiagnosis, especially in elderly males with history of smoking.



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Monocryl 4-0 sutures (figure 4). Urethral stones account for <1% of kidney stones.¹ It may present with penile gangrene.² A large urethral stone may rarely mimic penile cancer but one should be cognizant of this entity during evaluation.

On follow-up, the patient is asymptomatic and voiding well.

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REFERENCES

- 1 Foster G, Stocks C, Borofsky MS. *HCUP Statistical Brief #139*. Rockville, MD: Agency for Healthcare Research and Quality; 2012. Emergency department visits and hospital admissions for kidney stone disease, 2009: 1–10.
- 2 Ramdass MJ, Naraynsingh V. Multiple urethral stones causing penile gangrene. *Case Rep Urol* 2014;2014:1–3.

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