Leiomyoma of the bladder

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DESCRIPTION

A 68-year-old lady normally fit and well who was referred with a history of a single episode of visible haematuria and intermittent lower urinary tract symptoms (LUTS) characterised by frequency, urgency and feeling of incomplete bladder emptying. She was investigated with a renal ultrasound which showed a vascular 37 mm × 37 mm mixed echo-rounded mass lying centrally. She then had a flexible cystoscopy which demonstrated a solid-looking bladder tumour. Based on these she had a CT scan and a transurethral resection of the bladder mass. CT scan showed a well-circumscribed

Figure 1 CT scan showing mass lesion.

Figure 2 CT scan showing the lesion in relation to the bladder neck.

Figure 3 Another view of the lesion on CT scan.

bladder mass with central areas of low attenuation originating from the bladder neck (figures 1–3). The histology of the resection came back as showing a leiomyoma. Her LUTS resolved after the surgery. She had a check flexible cystoscopy 9 months after her surgery which showed no recurrence.

The CT images show a large well-circumscribed bladder lesion with no extravesical abnormality which is in keeping with a leiomyoma of the bladder.^{1 2}

Learning points

- ▶ Lower urinary symptoms can be presenting complaints of benign bladder tumours.
- ▶ Diagnosis of leiomyoma can be made with imaging techniques.

Competing interests None.

Patient consent Obtained.

Provenance and peer review Not commissioned; externally peer reviewed.

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