

Case Report:

A rare case of isolated vaginal neurofibroma

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Abstract:

Neurofibroma of vagina is a very rare benign tumor and usually associated with Von Recklinghausen's disease. Here we are reporting a case of vaginal neurofibroma in a 42 year multiparous women with no history of systemic illness related to Recklinghausen's disease. Management was done by excision with regular follow up for early detection of recurrence.

Keywords: Neurofibroma, Vagina, Recklinghausen's disease

Introduction:

Neurofibromas of genital tract are commonly found in vulva, clitoris and labia but rarely found in vagina, cervix, endometrium, myometrium as well as urinary tract[1]. Here we are reporting a case with vaginal neurofibroma with no other systemic illness and its management.

Case History:

A 42 Year old P₂L₂ female presented in Department of Obstetrics and Gynecology, of a tertiary care center at Indore, with a history of painless swelling felt in vagina since last 6 months. Swelling was progressive in nature. Swelling was not ulcerated or associated with any vaginal discharge, urinary symptoms or itchiness. There was no history of weight loss. Systemic examination showed no abnormality. No signs of swelling or lymphadenopathy were found in any other part of the body. Physical examination revealed 4X5 cm solitary vaginal mass, arising from the lateral wall of vagina; it was firm, non-tender, opaque, and freely mobile with one cm thick pedicle.

Rest of the vagina was normal. Routine examination of blood, urine and pap smear were normal. Ultrasonography of abdomen & pelvis revealed normal abdominal & pelvic organs. Excision of tumor was done under general

anesthesia and sent for histopathology examination, the report revealed that the growth was composed of spindle shaped cells with wavy nuclei arranged in loose myxomatous stroma with mast cells which was characteristic of neurofibroma.

No further treatment was given to the patient but counseling regarding recurrence was done. On regular follow-up for six months there was no evidence of recurrence.

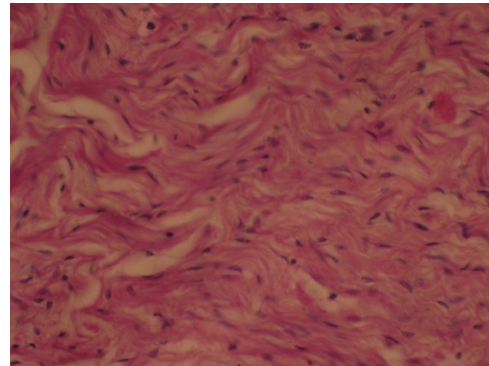


Figure 1: H&E(400X) stain showing wavy nuclei characteristic of neurofibroma

Discussion :

Neurofibromatosis I (Von Recklinghausen disease) is an autosomal dominant disease with incomplete penetrance and variable expression. Neurofibromatosis within the female genital tract is uncommon and only few reports are available in

literature[2-5]. Benign solid tumors of vagina (Leiomyoma, condyloma accuminata etc.) should be borne in mind as differential diagnosis of Von Reck linghausens disease. Detailed examination of genitourinary tract including cystoscopy should be done keeping in mind the neurofibromas of urinary tract. History was not suggestive of urinary tract involvement and ultrasonography report was also normal, hence decision of cystoscopy was not

taken in our case. Fortunately histopathology report showed no features of malignancy, hence excision of tumor proved to be therapeutic as it prevents regeneration[4]. Patients with such excision should be consulted properly for recurrence & to remain in close follow up if any abnormality is noticed. However radical surgery of neurofibroma is not advisable because of its aggressive nature[5].

References:

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