

Images in clinical medicine



Interpenoscrotal Buschke-Löwenstein tumor

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Received: 23 Jun 2020 - **Accepted:** 03 Jul 2020 - **Published:** 14 Jul 2020

Keywords: Buschke-Löwnestein tumor, giant condylomata acuminata, human papillomavirus

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Cite this article: Youness Chakir et al. Interpenoscrotal Buschke-Löwenstein tumor. PAMJ Clinical Medicine. 2020;3(108). 10.11604/pamj-cm.2020.3.108.24510

Available online at: <https://www.clinical-medicine.panafrican-med-journal.com//content/article/3/108/full>

Interpenoscrotal Buschke-Löwenstein tumor

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Image in medicine

Buschke-Löwnestein tumor (BLT) or giant condylomata acuminata (GCA) caused by human papillomavirus (HPV). It's a rare condition, essentially transmitted sexually. The confirmation is histological, after a biopsy of the mass. The treatment is poorly coded, the surgical treatment is the gold standard. The evolution is characterized by recurrences, requiring surgical recovery. Sex education and treatment early condylomatous lesions improves the prognosis of this affection. We present the case of a 50-year-old man, married, with the notion of sexual vagrancy. On clinical examination we found a large, painless, exophytic tumor lesion, budding, irregular at the base of the penis on the ventral side, extending towards the scrotum. This mass has been evolving for 15 years. Examination of the oral and anal

mucosa shows no associated lesions. The physical examination did not find inguinal lymphadenopathies. The clinical size of the tumor, about 8cm, was oriented towards a Buschke-Löwenstein tumor. The standard biological examinations were normal. Serologies HIV, chlamydia, syphilitic and hepatitis B and C were negative. Histological examination of the exeresis

specimen revealed epitheliomatous hyperplasia which was made of an acanthotic squiggle coating, papillomatous, overcome by parakeratotic hyperkeratosis with the presence of koilocytes signalling HPV infection, without signs of malignancy. A wide exeresis has been performed. The evolution has been good without recurrence, with 18 months of hindsight.



Figure 1: interpenoscrotal Buschke-Löwenstein tumor