# Extrauterine Pelvic Leiomyoma Mimicking Ectopic Kidney

# Pelvik Böbreği Taklit Eden Ekstrauterin Pelvik Leiomyoma

Pelvik Leiomyoma / Extrauterine Pelvik Leiomyoma

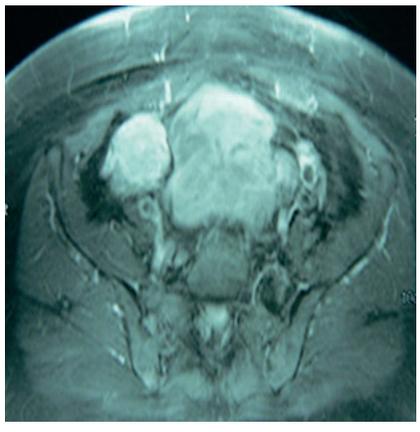
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A 39 years old woman applied for acute urinary retantion to Haydarpaşa Numune Training and Research Hospital, Emergency Urology Department in December 2009. She was inserted urethral cathater in our emercency department. She had micturition difficulity for ten years and placed urethral cathater many times. She had history of myomectomy operation 1.5 years ago. Ultrasonic imaging reported that left kidney was in the pelvic area with17x8x5 cm sized. Magnetic resonance and computered tomography showed 13x10x6 cm sized pelvis mass that was thought left kidney (Picture 1-2).

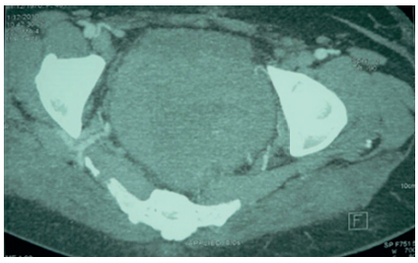
She was treated with open surgical technique. At laparotomy, we did not find any kidney sign in the mass. The mass was excised and removed (Picture 3). Leiomyoma was reported in the pathological evaluation. Urinary problems was solved after the operation. She has no problem with recurrence and micturition now.

The most frequent tumours of the female genital tract are uterine myomas [1]. The tumors affect 20-50% of all women with an increased incidence in the later years of reproductive period. These tumors are often asymptomatic. Leiomyoma can originate wherever smooth muscle cells exit [2]. Uterus and gastrointestinal tract are the most common sites of leiomyoma. Benign metastasizing leiomyoma, disseminated peritoneal leiomyomatosis, intravenous leiomyomatosis, parasitic leiomyomata are called for extrauterine leiomyoma in the literature.

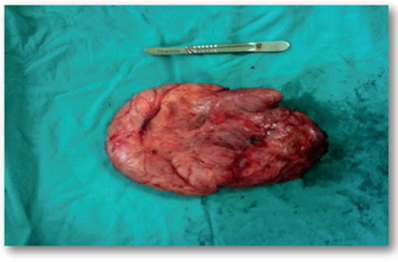
Extrauterine leiomyomas were reported firstly by Birch-Hirschfeld in 1896 and defined by Norris and Parmley in 1975[3]. Extrauterine leiomyomas may be diagnosed many years after hysterectomy or myomectomy procedures [4].



Picture 1. Image of pelvic mass in MRI



Picture 2. Pelvic mass is seen in computerized tomography



Picture 3. Total excision of the mass

**References**

1. Andrea Tinelli A, Hurst BS, Hudelist G,Tsin DA, Stark M, Mettler L et al. Laparoscopic myomectomy focusing on the myoma pseudocapsule:technical and outcome reports. Human Reproduction, Vol.27, No.2 pp. 427–435, 2012.
2. Mahendru R, Gaba G, Yadav S, Gaba G, Gupta C. A rare case of Retroperitoneal leiomyoma. Case Rep Surg. 2012;2012:425280.
3. Dönmez Y, Kanadaşı M, Usal A, Zeren H. Leiomyoma Extending to the Right Ventricle: Case Report. Arch Turk Soc Cardiol 2003;31:226-239.
4. Andrade LA, Torresan RZ, Sales JF Jr, Vicentini R, De Souza GA. Intravenous leiomyomatosis of the uterus. A report of three cases. Pathol Oncol Res. 1998;4(1):44-7.

*How to cite this article:*
Çalışkan S. Extrauterine Pelvic Leiomyoma Mimicking Ectopic Kidney. J Clin Anal Med 2015; DOI: 10.4328/JCAM.1993.

DOI: 10.4328/JCAM.1993 Received: 28.07.2013 Accepted: 17.08.2013 Printed: 01.09.2015 J Clin Anal Med 2015;6(5): 733
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