

Penile Necrosis With Complete Organ Loss Caused By Squamous Cell Carcinoma

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Abstract

Penile carcinomas are relatively rare. They usually manifest as ulcerative or exophytic papillary lesions, cause minimal urinary symptoms and complications and are usually easy to diagnose and treat. We report a case of an 82 year old man presenting with penile necrosis and chronic urinary retention caused by a locally destructive penile carcinoma. The penis was literally obliterated by the lesion down to the level of the pubic bone, so a perineal urethrostomy had to be performed in order to reverse renal failure.

Introduction

Penile cancer rarely presents with extreme clinical manifestations. We report an uncommon case of squamous cell carcinoma of the penis presenting with total penile necrosis, and urinary retention.

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Case report

An 82 year-old patient was admitted to our hospital suffering from urinary incontinence, fatigue and weight loss. Physical examination revealed suprapubic tenderness due to a largely distended urinary bladder. A bizarre finding however, was the complete necrotic destruction of the penile shaft and glans by what seemed to appear as a highly invasive, ulcerated, obviously neglected penile carcinoma (Figure 1). Physical examination of regional lymphatics was negative. Attempts at catheterization were fruitless because of local invasion and obstruction of the urethra by dense neoplastic tissue.



Figure 1: Cancerous necrosis of the penis with urethral infiltration

Subsequently a suprapubic catheter was placed and initially drained 1000 ml of urine (Figure 2).



Figure 2: Penile loss with suprapubic catheter in place.

The patient was subjected to a CT of the pelvis and abdomen, which failed to detect pathologically enlarged lymphnodes, or distant metastases. The patient underwent extended surgical excision of the neoplastic tissue around the remaining of the urethra at the level of the crus of the penis and a proximal perineal urethrostomy was performed.

Pathological stage was T3N0M0 (American Joint Committee on Cancer criteria) - grade II squamous cell carcinoma with central keratinization (Figure 3). The patient was recommended to receive adjuvant radiotherapy, but he decided against.

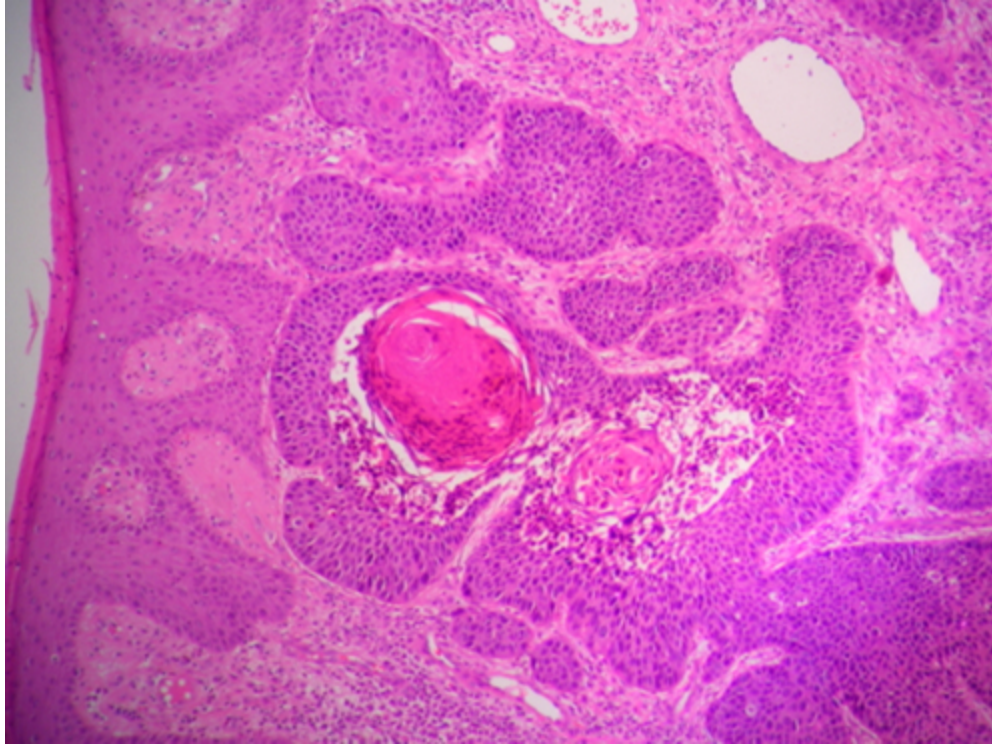


Figure 3: Histology: In the dermis of penile mucosa nests of neoplastic squamous cells with central keratinisation (H&E, reduced from x 100).

Discussion

Penile cancers usually begin as small lesions on the glans or prepuce. Untreated they rarely cause necrotic penile lesions. To our knowledge we report the first case of squamous cell carcinoma of the penis causing extensive painless necrosis and resulting in complete organ loss.

Regarding penile necrosis, all of the cases reported in the literature share a common, namely vascular, aetiology and invariably cause severe pain. Penile necrosis causing even entire organ loss has been reported as a result of Wegener's granulomatosis ([1](#)), Buerger's disease ([2](#)) or end-stage renal disease ([3](#)). In all these cases penile necrosis was a result of ischemia due to occlusion or obliteration of the penile, internal pudendal or iliac arteries.

In conclusion, the case presented highlights a unique and bizarre clinical manifestation of penile cancer, causing extensive local destruction and organ loss, while on the other hand exhibiting a low potential for regional and distant metastatic spread.

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