Vulvar Metastases of Rectal Cancer: A Rare Cause of Acute Urinary Retention

Selahattin Çalışkan¹

¹Department of Urology, Hitit University Corum Training and Research Hospital, Corum, Turkey

A 58-year-old female presented to the Hitit University Corum Training and Research Hospital, Urology Department, Corum, Turkey in August 2014 with acute urinary retention. Three years ago, the patient was diagnosed with moderately T3N1M1 differentiated adenocarcinoma of the rectum with liver metastasis and lymph node involvement (3/12) and was treated with abdominal perineal resection and chemotherapy. Laboratory data on her current presentation showed CEA levels of 15.38 ng/mL and CA 19-9 of 1542 U/mL. On physical examination, there were fixed, hard ulcerated lesions on the vulvar area (Figure 1). Urethra was not visualized because of metastasis. catheter was placed Suprapubic ultrasonography guidance. The patient died eight months later.

The most common primary tumor to metastasize to the genital tract is colorectal cancer (37%), followed by breast cancer (34%), stomach, appendix and other uncertain primary cancers. The mode of metastasis from the primary tumor is hematologic followed by lymphatic spread. Metastatic vulvar carcinomas may also originate from the genital tract such as from the ovary, endometrium or cervix [1]. Moreover, malignant cells can also directly spread from adjacent

tumors such as rectum, cervix, ovary, endometrium, and urinary bladder [2].

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Correspondence to: Dr Selahattin Çalışkan

Address: Department of Urology, Hitit University Çorum Training and Research Hospital, Çorum, Turkey

E-mail:

<u>Dr.selahattincaliskan@q</u>

<u>mail.com</u>

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Figure 1: Fixed, hard ulcerated lesions on the vulvar area

