

Pelvic Neurofibroma Causing External Compression of Bladder

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Abstract

Pelvic neurofibroma is one of the rare case. Solitary neurofibroma occurs only in peripheral nerves. We are reporting an encapsulated mass in the reteroperitoneum on the right side causing extrinsic compression of bladder.

Keywords: Pelvic neurofibroma; Extrinsic compression of bladder; Solitary neurofibroma.

Introduction

Pelvic neurofibroma is very rare entity, so far approximately 60 cases reported. Usually pelvic neurofibroma arises from pelvic organs, but in our case tumor was not involving any pelvic organ. Neurofibroma without NF1 often described as slow growing, benign and painless tumor. Patient with NF1 associated with 15% of malignant risk factors. Neurofibroma classified into two groups, 1st group is solitary tumour or non NF1 neurofibroma which is not associated with other lesions. 2nd group neurofibroma is the plexiform neurofibroma.

Case Report

30 years old gentleman came with complaints of lower abdominal discomfort for 6 months with vague right iliac pain clinical examination was normal. Blood investigation was done within normal limits. Ultrasound and CT abdomen

revealed unilocular cystic mass along the right lateral pelvic wall. MRI, abdomen revealed T2 heterointense enhancement within the lesion. He underwent laparotomy, Mass lesion identified in the right pelvic region compressing over the lateral wall of the bladder. Lesion was well encapsulated, highly vascular feeding arterial branch was ligated outer capsule opened and an inner mass removed completely. MRI, abdomenog conclusive of neurofibroma.

Discussion

In our study, Neurofibroma of pelvic origin producing extrinsic compression without any involvement of neurofibromatosis lesions. Only a very few cases have been reported without any malignant transformation. Njoumai et al. reported a case of peritoneal neurofibroma without NF1. Sungur et al. reported a case of Neurofibroma without NF1 diagnosed to have malignant neurofibroma.

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