

Angiofibroma of vagina - a rare case report

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A 35 years old, para 3 with LCB of 12 years was admitted to the Institute with complaints of, a mass per vaginum of 2 months duration. To start with the mass was small in size and reducible. Gradually, it grew to present size and

separately from the mass and fornices were free. Metal catheter when introduced into the bladder showed that the mass was separate and not connected to the bladder. Clinically a diagnosis of 'Gartner's cyst' was made.



became irreducible. There were no other associated complaints except for watery discharge per vagina.

General examination of the patient revealed nothing abnormal. On local examination, external genitalia were normal. A reddish, fleshy mass of about 4 cm X 4 cm was seen at the introitus. On palpation, it was found to be arising from the anterior vaginal wall, about 3 cm below the external urinary meatus. It was a well circumscribed, irreducible nontender mass with variable consistency and not bleeding on touch.

Per speculum examination revealed normal cervix. On PV examination, the uterus was RV, bulky, mobile, felt

Routine blood and urine investigations were normal, abdomino-pelvic scan, IVP and cystoscopy were unremarkable. Biopsy of the mass was taken and the HPE revealed numerous capillaries lined by flat endothelium and stroma with dense plump fibroblasts. Diagnosis was "angiofibroma". As angiofibromas are vascular neoplasms, arrangement was made for adequate blood transfusion and patient was taken for surgery. But surprisingly during surgery, mass could be excised easily, with hardly 50 cc of blood loss. There was no injury to bladder or urethra. Post operative recovery was uneventful and on 10th day patient was discharged. Follow up of the patient till date revealed no recurrence.