
CASE REPORT

Fibrous pseudotumor of the epididymis and tunica vaginalis

A. AL-Sayyad, MD, I. Cagiannos, MD

Department of Urology, University of Ottawa, Ottawa, Ontario, Canada

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We present a case of fibrous pseudotumor of the epididymis and tunica vaginalis which is one of the rarest paratesticular tumors. Fibrous pseudotumor presents as a solid scrotal mass with normal serum

markers. Pathological examination is the only reliable way to make the diagnosis with these tumors exhibiting characteristic macroscopic and microscopic features. It is important to recognize this entity since local excision is the treatment of choice and orchectomy is unnecessary.

Key Words: fibrous pseudotumor, epididymis, local excision

A case is presented of a 31-year-old male who noticed a lump in his right testicle for 6 months that was enlarging. He did not complain of any pain or lower urinary tract symptoms and was generally well.

On examination he was found to have a hard, nodular, non-tender, non-transilluminating mass in the tail of the epididymis. There was no associated hydrocele and the testicle otherwise felt normal. Abdominal exam was unremarkable.

Serum AFP, bHCG, LDH were normal. Scrotal US demonstrated a 2.0 cm x 2.3 cm x 1.6 cm solid mass in the tail of the right epididymis. The patient underwent inguinal exploration and excision of the mass.

Intraoperatively there was a solid mass coming off the tail of the epididymis as well as multiple small polypoid masses arising from the rest of the epididymis and the tunica vaginalis of the cord. The largest mass was excised with the epididymis. Frozen section analysis performed on the dominant mass as well as on some of the smaller masses indicated no evidence of malignancy. The testicle was preserved. Final pathology was reported as fibrous pseudotumor. Figures 1 and 2.

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Address correspondence to Dr. A. AL-Sayyad, 2914 Millstream Way, Ottawa, Ontario K1T 4A4 Canada

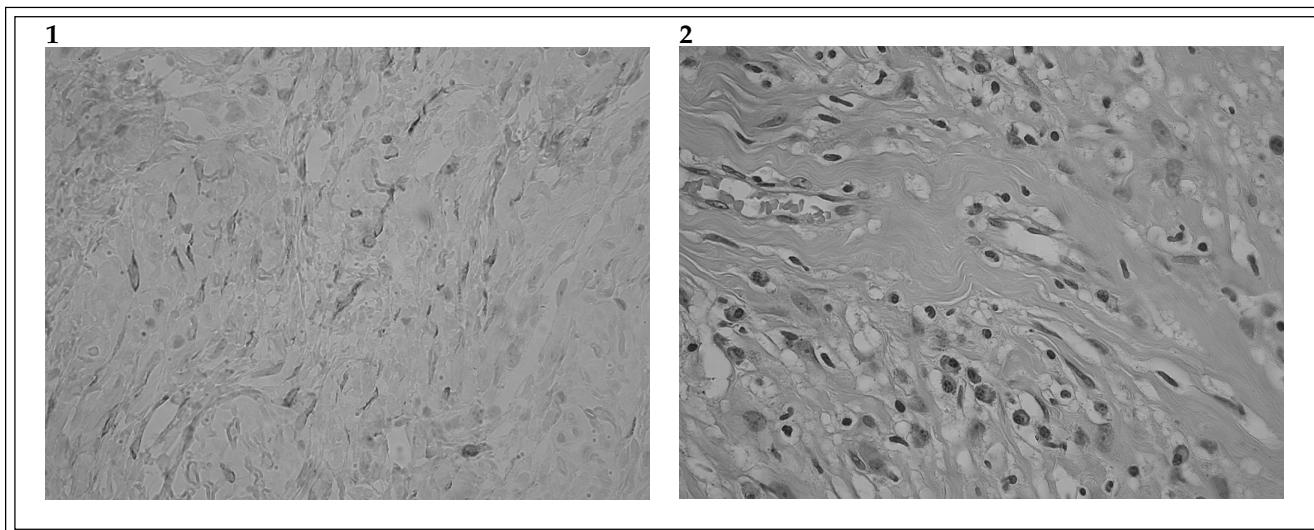


Figure 1 and 2. Fibrous pseudotumor of epididymis.

Discussion

Fibrous pseudotumor is one of the rarest paratesticular tumors.^{1,2} Williams et al³ reported a study of 114 paratesticular tumors and found only seven cases (0.061%) of fibrous pseudotumor, six of which had orchiectomy. Two thirds of the cases originated in the tunica vaginalis; about 10% of these tumors were found in the epididymis.⁴ In this case there was an epididymal mass as well as multiple satellite masses in the tunica of the cord which is extremely rare.

These lesions may appear as either hypoechoic or hyperechoic on ultrasonography. On MRI they usually have low signal intensity on T1 and T2 imaging.^{5,6}

Macroscopically, these tumors are gray in color, nodular, oval, and mobile structures. Microscopically, these tumors are composed of hyalinized tissue and proliferative fibroblasts in a rich vascular stroma with scattered collagen bundles.^{1,4} Local excision of the tumor is the treatment of choice and orchiectomy is unnecessary. □

3. Williams G, Banerjee R. Paratesticular tumors. *Br J Urol* 1969;41:332-339.
4. Mostofi FK, Price EB. Tumors of the male genital system; in Atlas of tumors pathology, 2ed ser, vol.8, pp. 151-154.
5. Saginoya T, Yamaguchi K, Toda T, Kiyuna M. Fibrous Pseudotumor of the scrotum MR findings. *AJR* 1996;167:285-286.
6. Grebenc ML, Gorman JD, Sumida FK. Fibrous Pseudotumor of the Tunica Vaginalis testis: imaging appearance. *Abdom Imaging* 1995;20:379-380.

References

1. Bruijnes E, Ladde, BE, Dabholiwala NF, Stukart RAH. Fibrous Pseudotumor of the Tunica Vaginalis testis. *Urol Int* 1984;39:314-317.
2. Sarlis I, Yakoymakis S, Rebelakos AG. Fibrous Pseudotumor of the scrotum. *J Urol* 1980;742-743.