Cellular angiofibroma of the vulva

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Citation

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Abstract

Cellular angiofibroma of vulva was first described in 1997; a twenty-two year old female with a large mass of vulva for two years was managed successfully by simple excision with no evidence of reccurrence for a follow-up period of three years.

CASE REPORT

Cellular angiofibroma of the vulva is a tumor type occurring in middle aged women and characterized by its small size¹ ^{.2.3}. It was initially described by Nucci in 1997 as a rare benign growth of mesenchymal origin¹

We report a case of an abnormally large sized cellular angiofibroma of the vulva in a young woman.

A twenty-two year old unmarried woman presented with the complaints of a mass in the vulva for 2 years and with pain for 10 days. No abnormal findings were noticed on general physical and abdominal examination. There was a non-tender mass, of size - 18 x 12 x 10 cm, involving the clitoris and labia minora bilaterally with engorged veins on the surface (fig-1). The hymen was found ruptured. Fine needle aspiration of the mass was reported to be a lesion of spindle cell type. Incisional biopsy had revealed the features of angoimyofibroma. Based on this report wide local excision was done and the histopathological type was finally confirmed as cellular angiofibroma. Postoperative course was uneventful with satisfactory healing of local wound.

Figure 1



DISCUSSION

Cellular angiofibroma of the vulva is a recently described rare soft tissue neoplasm that typically occurs as a well circumscribed solid vulval mass in middle aged women with mean age of 48 (range 37-77) years ^{1,2,3}. Morphologically identical tumor is seen in the retro-peritoneum in men and in the extra-vulvar subcutaneous location in women⁴. Cellular angiofibroma of vulva are of small size typically less than 3 cm with well circumscribed margins. Though they are benign mesenchymal tumors, may be mistaken for vulvovaginal soft tissue tumors, including aggressive angiofibroma and sarcoma and subjected to unnecessary aggressive treatment. ^{2,3,5}.

Excision of the lesion up to the tumor-free margins is considered to be curative. Local recurrence at the same site following excision was also reported in one case⁶. No incidence of metastasis is reported so far in the literature. Our case differed from the other reported cases by its occurrence in relatively younger age and being lager in size. Patient has been followed-up for three years from the time of surgery and no evidence of recurrence noticed.

SYNOPSIS

Cellular angiofibroma of the vulva is a rare and recently described benign mesenchymal tumor. It can be treated by simple excision with no recurrence irrespective of its size.

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