

Rare Case of Adenocarcinoma of the Bladder in Multiple Myeloma Patients

Jinu Kim*

Department of Urology & Urological Science Institute, Yonsei University College of Medicine, Seoul, Korea.

Abstract

Adenocarcinoma of the bladder is a rare subtype of bladder cancer, accounting for approximately 2% of all bladder malignancies. This short report describes a unique presentation of bladder adenocarcinoma in a 72-year-old Multiple Myeloma male patient.

Keywords: Bladder cancer; Adenocarcinoma; Rare cancers.

Introduction

Bladder cancer predominantly presents as urothelial carcinoma, with adenocarcinoma being notably rare. Among them, secondary adenocarcinoma from other organ is frequent otherwise primary adenocarcinoma in the bladder is rarer. This report discusses the importance of considering adenocarcinoma in the bladder tumors

Case presentation

A 72-year-old male showed suspicious bladder mass during routine checkup CT scan. No specific past medical history with unremarkable physical examination. CT scan reported as bladder wall thickening at posterior wall and right Ureterovesical Junction (UVJ). Cystoscopy found that bladder tumor was non papillary shape with negative cytology results. Transurethral removal of bladder tumor was planned.

During preparation of operation we found that his Prothrombin Time (PT) INR prolongation as 2.93 and aPTT was also prolonged as 65.5 seconds. Hematologic evaluation was performed

and finally, multiple myeloma was confirmed after bone marrow biopsy. After chemotherapy TURB was planned.

Imaging

Computed Tomography (CT) of the bladder showed a wall thickening at posterior wall and right UVJ. Other organs showed no specific findings. Cystoscopic finding showed nonpapillary mucinous mass around UVJ.

Treatment

The patient underwent a TURB given the localized nature of the tumor. The mass was non papillary shape and bleeding control was difficult. After full thickness of resection and complete coagulation the surgery finished. The pathology reported as adenocarcinoma without plasmacytic infiltration

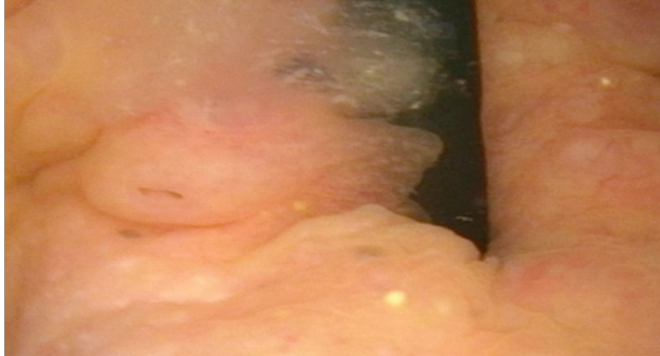
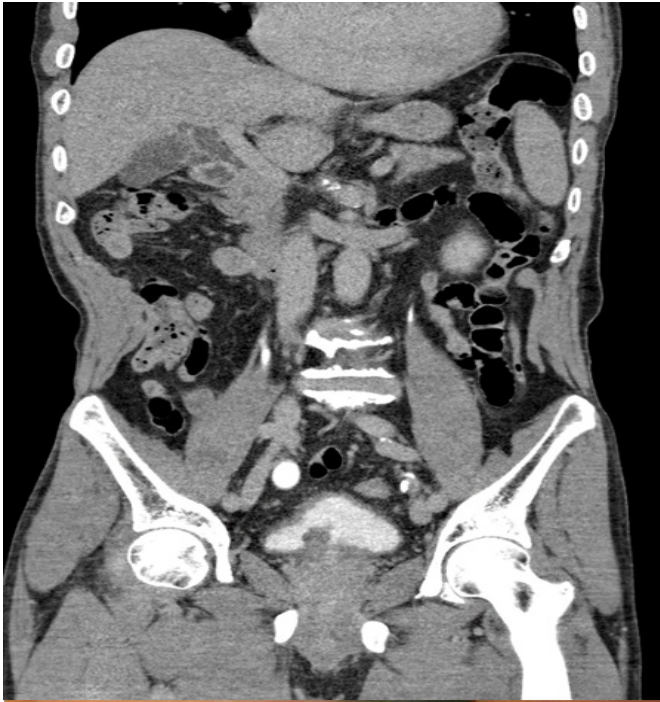
Follow-up: The patient is currently under regular cystoscopy follow up with no signs of recurrence at the 3-month follow-up.

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Correspondance: Jinu Kim, Department of Urology & Urological Science Institute, Yonsei University College of Medicine, Seoul, Korea.
Email: jinukim@yuhs.ac

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Discussion

The rarity of adenocarcinoma poses challenges in diagnosis and management. This case emphasizes the need for TURB in atypical cystoscopic findings even though plasmacytoma of the bladder is suspected [1,2].

Conclusion

Adenocarcinoma, though rare, should be considered in the differential diagnosis of bladder masses. Early diagnosis and appropriate treatment are crucial for favorable outcomes.

References

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