

Images in medicine

Squamous cell carcinoma in a giant bladder diverticulum

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Image in medicine

A 65-year-old man with a history of recurrent urinary tract infections presented after a 3-months of visible hematuria. Physical and laboratory examinations revealed anemia and impaired renal function. Ultrasound and magnetic resonnance imaging (MRI) showed an invasive bladder tumor developing in a large posterior diverticulum (A and B) with rectal deviation (A) and responsible of a left hydronephrosis. First, the patient underwent a blood transfusion and a left percutaneous nephrostomy. Two weeks later, we perfomed a cystoscopy and a transurethral resection of the tumor. Pathology revealed a locally advanced squamous cell carcinoma (SCC) (stage > p T2). The patient had no history of bilharziasis. Since the surgical extirpation was not possible, the patient was treated with chemoradiotherapy, but died 6 months later. Non-bilharzial SCC represents < 5% of vesical tumors, it is caused by

chronic irritation of the urothelium and often diagnosed at an advanced stage. The intradiveticular location account for approximately 1% of all bladder tumors and make the prognosis poorer due to lack of muscle barrier. This case combine these two rares conditions.



Figure 1: squamous cell carcinoma in a giant bladder diveticulum

