Penile Schwannoma

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A 35-year-old patient with penile schwannoma located in the shaft of penis treated by surgical excision and diagnosed by S-100 immunoperoxidase staining is reported in this article.

Key Words: Penile schwannoma, treatment, diagnosis

Schwannoma is a neoplasm, originating from the Schwann cells of the neurons, which may occur in any region of the body, but is very rare in the penis (1). To our knowledge, penile schwannoma has been reported scarce in the literature. In this report, a case of a penile schwannoma is presented and characteristics are discussed.

Case Report

A 35-year-old white man presented for evaluation of an asymptomatic nodule on the dorsal aspect of the penile shaft (Figure 1). The patient was taken to the operating room after receiving intravenous antibiotics for prophylaxis and underwent an operation including the excision of the nodule. It was well circumscribed and encapsulated. It had not infiltrated the deep layer of the penis.

During microscopic examination, hematoxylin-eosin staining revealed dense fasciculus formed by spindle shaped cells (Antoni A) mixed with edematous parts consisting of the sparse tumor cells (Antoni B). Pleomorphic appearance and mitosis are rarely seen and there were no hemorrhage and necrotic lesions. Special staining of the tumor using S-100 immunoperoxidase was intensively positive and were negative for both actin and desmin (Figure 2). These findings are typical for the diagnosis of schwannoma. After 9 months follow-up period, no recurrence had been observed.

Discussion

Schwannomas are rare tumors and generally encountered in young and middle-aged adults at the flexor surfaces of the extremities, neck, mediastinum are exceedingly rare in the penis (1,2). Schwannoma may be benign or malignant...
tumors; malignancy is associated with von-Recklinghausen disease. Despite the abundant sensitive innervation of the penis and perineal skin, schwannomas of the penis are rarely reported in the literature (3-6).

The pathological hallmarks of schwannoma are the patterns of Antoni A and B areas. Because of S-100 protein, expressed in the supporting cells of the nervous system, in these tumors S-100 immunoperoxidase stain should be used to establish the pathological diagnosis.

The treatment of this tumor is surgical removal. Because of schwannoma's being a benign disease, recurrence rarely occurs.

In spite of rare presentation of schwannomas which would be expected to occur on the dorsum of the penis, it is important to consider other differential diagnosis including lipoma, fibroma, atheroma, leimyosarcoma and Peyronie’s disease.

REFERENCES