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RESEARCH ARTICLE

PARAURETHRAL CYSTS IN ADULT WOMEN: AN EXPERIENCE OF 5 CASES

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ABSTRACT

- Pheochromocytoma is a rare Paraurethral cysts are rarely encountered in urogynecologic practice.
- There is no consensus on the diagnosis and treatment of paraurethral cysts.
- We present our experience of 5 cases to describe the diagnosis and management of paraurethral cysts.

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INTRODUCTION

- Paraurethralcysts are rarely encountered in urogynecologic practice.
- There is no consensus on the diagnosis and treatment of paraurethral cysts.
- We present our experience of 5 cases to describe the diagnosis and management of paraurethralcysts.

MATERIALS AND METHODS

- 5 women were diagnosed with paraurethral cysts based on clinical findings
- Cysto-urethroscopy was performed in all patients to rule out urethral diverticulum
- All patients underwent surgical excision.
- Symptoms, parity, diagnostic tests, complications, recurrence and histologic examination of the cysts wall were analyzed in all patients.

RESULTS

- Presenting symptoms were a palpable mass, dyspareunia, and dysuria.

- All 5 patients were multiparous.
- Cysts were diagnosed by physical examination and cysto-urethroscopy
- Cysts were solitary with a dimension of 2 to 3.5 cm
- Localized in the distal urethra, distorting the external meatus.
- Urinary complaints ameliorated in all cases post surgical excision
- No complication / recurrences was observed in any of our patients during follow-up.
- Histologically, cyst wall was composed of stratified squamous epithelium (Skene gland cyst) in 1 patient and squamous epithelium with transitional epithelium in 4 patient



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| Sl.No | AGE | SEX | SYMPTOMS | PARITY | EXAMINATIONS | CPE | COMPLICATIONS | RECURRENCE | HPE REPORTS |
|-------|------|-----|---------------|------------|---------------------|-----|---------------|------------|---------------------------------|
| 1 | 58 F | | Dysuria | Multi para | Soitary cyst 2.5 cm | WNL | Not any | Not any | Sq with transitional epithelium |
| 2 | 42 F | | Dyspareunia | Multi para | Soitary cyst 2 cm | WNL | Not any | Not any | Sq with transitional epithelium |
| 3 | 51 F | | Dysuria | Multi para | Soitary cyst 3 cm | WNL | Not any | Not any | Sq with transitional epithelium |
| 4 | 43 F | | Dyspareunia | Multi para | Soitary cyst 2 cm | WNL | Not any | Not any | Skene gland cyst |
| 5 | 58 F | | Palpable mass | Multi para | Soitary cyst 3.5 cm | WNL | Not any | Not any | Sq with transitional epithelium |

Conclusion

- Paraurethral cysts may be symptomatic and routine urological examinations are sufficient for diagnosis without using advanced imaging technique.
- Such symptomatic adult patients, surgical excision can be performed effectively.

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