

# Extra genital HPV-6

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## ABSTRACT

The buschke lowenstein tumor is a rare sexually transmitted disease. We report a case of a buschke lowenstein disease sitting on the neck, the back in addition to genital area. A 58 years old patient, without any significant pathological antecedents, presented for more than 3 years genital tumors gradually getting bigger. Dermatological examination found several ulcerated, exophytic, cauliflower tumors taking all the urogenital area, two tumors setting in the neck and one another on the back. Cytological sampling was performed, and the search for HPV returned positive. Other serologies have returned negative. The patient was subsequently treated by the urologist and plastician team. Complete exeresis was performed. An anatomopathological study was done which confirmed the diagnosis. HPV typing was done and confirmed HPV 6. The patient has evolved well and presented no complication. Buschke-lowenstein disease is a curable sexually transmitted urogenital disease. We report for the an unusual three location of this disease, which can shed light on the mode of transmission.

**Key words:** Buschke lowenstein, Condyloma acuminata, Extra genital, HPV 6

## INTRODUCTION

The buschke lowenstein tumor, also called the giant condyloma, is a rare sexually transmitted disease [1]. Men are affected, but case reports of women and children have been reported [2].

Extra genital cases are very rare but not impossible. We report a case of a buschke lowenstein disease sitting on the neck, the back in addition to genital area.

## CASE REPORT

A 58 years old patient, married, without any significant pathological antecedents, presented for more than 3 years genital tumors gradually getting bigger. And soon, tumors also appeared in the neck and back. On examination the patient was conscious, hemodynamically stable. Dermatological examination

found several ulcerated, exophytic, cauliflower tumors taking all the urogenital area, two tumors setting in the neck and one another on the back (Fig. 1).

Cytological sampling was performed, and the search for HPV returned positive.

Other serologies have returned negative.

The patient was subsequently treated by the urologist and plastician team. Complete exeresis was performed. An anatomopathological study was done which confirmed the diagnosis. HPV typing was done and confirmed HPV 6 (Fig. 2).

The follow-up didn't reveal any complications (Fig. 3).

Prior to the study, patient gave written consent to the examination and biopsy after having been informed about the procedure.

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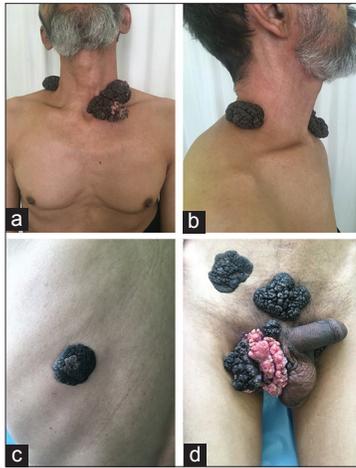


Figure 1a-d: Cawliflower tumors.

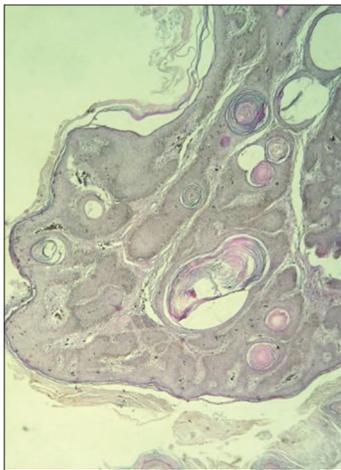


Figure 2: Histopathology: Geant condyloma acuminata.



Figure 3a-d: Three months after surgery.

## DISCUSSION

Buschke lowenstein disease, described for the first time by ludwig loweinstein and abraham buschke as a

malignant acuminous condyloma [3]. Subsequently, it was classified as a verrucous carcinoma [4]. It is a rare enough sexually transmitted disease affecting mainly men between the age of 40 and 60 years as in our patient [5,6].

This tumor usually affects the ano-genital area, the inner sides of the thighs.

Anogenital giant condyloma usually appears in young patients as a slow-growing mass, present for months or years before the patient seeks medical attention. Its development and growth rate have been associated with impaired immunity, particularly that caused by human immunodeficiency virus infection, as well as with pregnancy and multiple comorbidities

Viral cytopathic changes and HPV types 6 and 11 are consistently identified in cases of giant condyloma, whereas this association is less consistent in verrucous carcinoma [7]. In addition, giant condyloma lacks the broadbased appearance and altered keratinocyte differentiation of verrucous carcinomas [8,9]. Nonetheless, others believe that both lesions represent the same entity, given that giant condyloma can sometimes be locally destructive [10].

The particularity of our observation lies in the extra-genital location, and more particularly in the neck and back. Our patients share clinical and pathologic features typically seen in anogenital giant condyloma.

The clinical presnetation is very classic, but when found on extra genital area, some questions must be asked [7]. For many reason we sought to make HPV typing trying to confirm the nature of the extra genital tumors, and concluded that the same HPV was responsible for the tumors on both locations. A previously reported case of cervical giant condyloma also occurred in a young woman during pregnancy [10].

This could be explained by the manuportage, and the transmission of HPV by scratching.

Several therapeutic eventualities exist, the gold standard is surgery.

Other treatments such as Photodynamic therapy, CO2 laser, podophyllin, methotrexate and cryotherapy are reserved for small tumors and reccurent lesions.

## CONCLUSION

Buschke-lowenstein disease is a curable sexually transmitted urogenital disease. We report for the an unusual three location of this disease, which can shed light on the mode of transmission.

## CONSENT

The examination of the patient was conducted according to the Declaration of Helsinki principles.

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