

Vaginal Leiomyomas: A Rare Case Report

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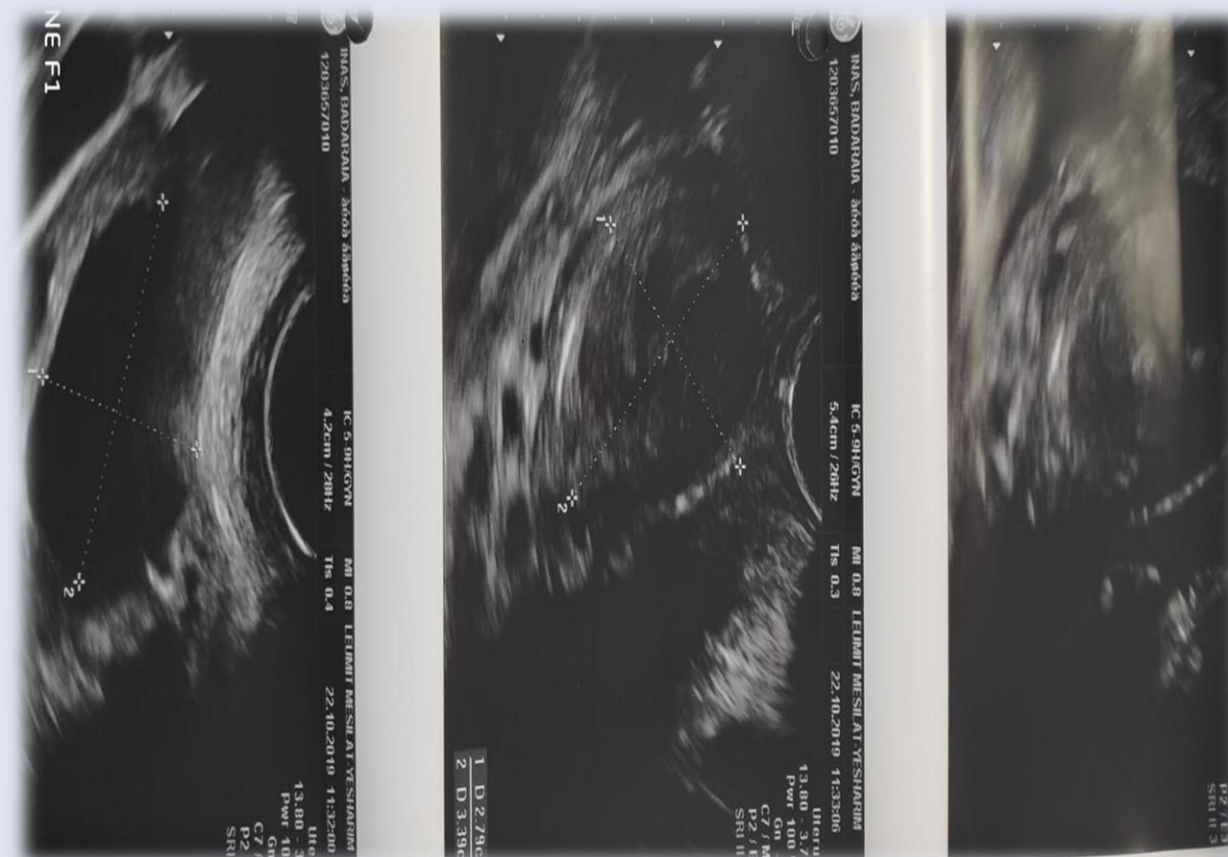
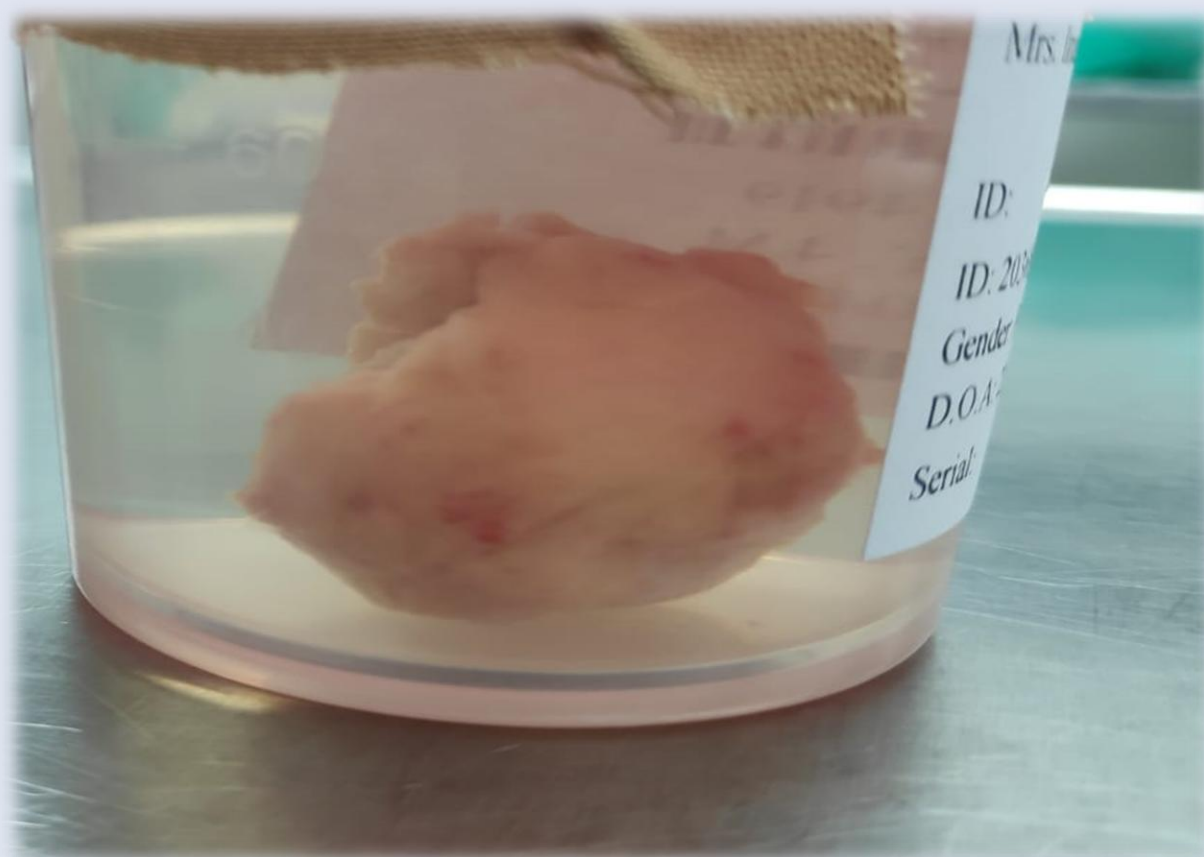
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Introduction

- Vaginal leiomyomas are rare benign smooth muscle tumors, accounting for less than 0.07% of all gynecological neoplasms (Yinxia et al., 2023; Ergenoglu et al., 2023).
- Fewer than 350 cases have been reported since their identification in 1733 (Bapuraj et al., 2022).
- These tumors commonly arise in women aged 35 to 50 and are often asymptomatic (Fasih et al., 2020). Symptoms, when present, include dyspareunia, palpable vaginal mass, abnormal bleeding, or urinary symptoms such as dysuria and frequency (Malik et al., 2021).

Case Presentation

- A 28-year-old female presented with dyspareunia and a vaginal mass. Clinical examination revealed a round, firm, and mobile mass.
- Transvaginal ultrasound showed a fibroid-like mass measuring 35 × 25 mm. Surgical excision confirmed vaginal leiomyoma via histopathological evaluation. Postoperative recovery was uneventful, with no recurrence at follow-up.



Discussion

- Vaginal leiomyomas may develop de novo from vaginal smooth muscle, distinct from uterine leiomyomas (Kim et al., 2023). Imaging, including ultrasound and MRI, is vital for diagnosis and surgical planning (Liu et al., 2023).
- Differential diagnoses include Bartholin gland cysts, Gartner duct cysts, and leiomyosarcoma (Malik et al., 2021).
- Complete surgical excision is the treatment of choice, alleviating symptoms and preventing complications (Gurumurthy et al., 2022). Advanced techniques, such as laparoscopic and vNOTES approaches, enhance outcomes (Campillo et al., 2023; Seigel et al., 2022).

Conclusion

- This case highlights the importance of recognizing vaginal leiomyomas, particularly in reproductive-aged women.
- Comprehensive diagnostic evaluations and surgical management yield excellent outcomes, with minimal recurrence risk.
- Further research is needed to elucidate molecular mechanisms and risk factors.

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