

**VULVAR FIBROADENOMA**Dr. Viji Vijayan<sup>1</sup> and Dr. Usha Abraham\*<sup>2</sup><sup>1</sup>MD Resident, Pathology, Amala Institute of Medical Sciences, Thrissur.<sup>2</sup>Associate Professor, Department of Pathology, Amala Institute of Medical Sciences, Thrissur.**\*Corresponding Author: Dr. Usha Abraham**

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**ABSTRACT**

Vulvar fibroadenoma is a benign tumor with only a few cases reported in medical literature. The histological features are same as that of a breast fibroadenoma. They can be confused with many benign and malignant vulvar lesions. The histogenesis of the tumor has also been controversial. Here we report a case of a 41 year old woman with a well defined soft tissue mass in the vulva with a histological diagnosis of vulvar fibroadenoma.

**KEYWORDS:** Vulvar fibroadenoma, Vulvar lesion, Mammary like anogenital glands.**INTRODUCTION**

Vulvar fibroadenoma is a benign biphasic neoplasm with both epithelial and stromal elements. It occurs mostly in women of reproductive age group and presents commonly as a subcutaneous nodule in the interlabial sulcus. It can also present as a pedunculated soft tissue mass.<sup>[3]</sup> The histogenesis of the lesion is debatable. Herein we report a case of vulvar fibroadenoma in a 41 year old female.

**CASE REPORT**

A 41 year old woman presented with a painless, soft tissue mass in right labia major and bilateral breast lumps

of 8 months duration, gradually increasing in size. Gynaecological, inguinal and abdominal examinations were done and was found to be normal. A clinical provisional diagnosis of fibroadenoma was made for the breast lesion and Bartholin cyst was made for the vulvar lesion. Excision was done under general anaesthesia.

The excised specimen from vulval region grossly was a grey white, firm, nodular mass of 5.1x3.5x2.5 cms (FIGURE 1A). Cut section was solid grey white and lobulated (FIGURE 1B).



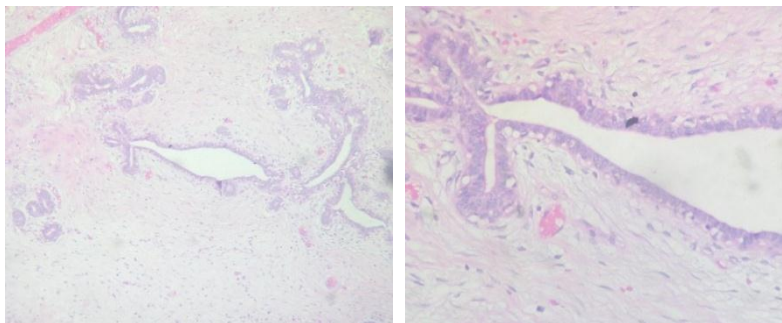
Figure 1B Gross photograph showing well circumscribed firm vaginal mass.



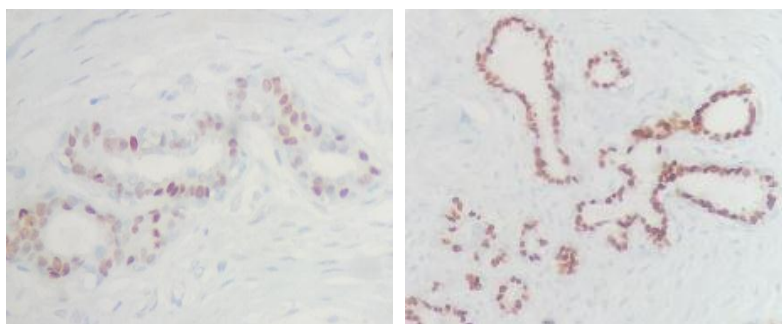
**Figure 1B** Cut surface of oval gray white soft tissue with slit like areas.

Microscopy showed a well circumscribed biphasic neoplasm with both glandular and stromal proliferation. The glands were lined by bilayered epithelium, inner columnar to cuboidal and outer myoepithelial cells. Some of the glands are dilated and shows mild epithelial hyperplasia. Stromal component is composed of bland

spindle shaped cells with ovoid to elongated nuclei. No atypia or mitotic activity noted. Histopathologically a diagnosis of vulvar fibroadenoma was made. (FIGURE 2A&2B) Immunohistochemical studies were done and the glandular cells were positive for ER and PR. (FIGURE 3A & 3B).



**FIGURE 2A(10×)&2B(40×)**Microphotograph showing glandular and stromal components of fibroadenoma. (H&E)



**FIGURE 3A** Estrogen receptor positivity(40×) and **3B** Progesterone receptor positivity(40×)

## DISCUSSION

The histogenesis of vulvar fibroadenoma is controversial and debatable. Theories that have been put forth are: The first one states that vulvar fibroadenoma arises from ectopic mammary tissue derived from primitive embryological milk line.<sup>[2]</sup> The second theory, which is the currently accepted one, is put forth by Putte in 1994 and he suggested the presence of specialised glands identical to mammary glands which exist in the anogenital area normally and has close relationship with

eccrine glands. These glands are called mammary like anogenital glands. These are present in vulva also.<sup>[4,5]</sup> Vulvar fibroadenoma present in the age group of 20-60 years and reach an average size of 3-4cm. Usually present as solitary lesions in vulvar region. Histopathological features are similar to those found in the breast.<sup>[1]</sup>

The differential diagnosis can be either benign or malignant lesions. The benign lesion like epidermal cyst,

Bartholin's gland duct cyst, follicular cyst, apocrine adenoma, lactating adenoma, syringoma, phyllodes, pseudoangiomatous stromal hyperplasia, sclerosing adenosis and fibrocystic disease Differential diagnosis for malignant lesions for vulval fibroadenoma are extramammary Paget's disease, ductal/lobular/mucinous adenocarcinoma.

In our case, the presentation was typical and the histological features were same as that of a breast fibroadenoma. Vulvar fibroadenoma has a very good prognosis. They recur only rarely after surgical excision.

#### **CONFLICT OF INTEREST**

The authors declare that no conflicting interests exist.

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