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Clinical Image

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Incidentally found exophytic groin mass in a 69-year-old patient: Clinical image

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Description

69-year-old immunocompetent man presented to the emergency department for COVID-19 infection and a lesion in the groin is noted during his hospitalization. Patient stated that he had this slow growing lesion for about 20 years but felt embarrassed to seek medical attention. He is unvaccinated and has not seen primary care in many years. Physical exam notable for malodorous multiple large verrucous, exophytic masses on the suprapubic area that coalesced into plaques extending along the left medial thigh to the scrotum. HIV and syphilis testing was negative. Biopsy is completed and pathology report described well-formed papillae with prominent central fibrovascular core and hyperkeratosis with local extension, but no dysplasia. He is diagnosed with Buschke-Löwenstein tumor, caused by HPV 6 and 11. Plastic Surgery and Urology teams excised some parts of the lesion, but others remain as they require a skin graft. The surgeon he trusted, retired, and thus, he still has this groin mass which is bothersome to him.

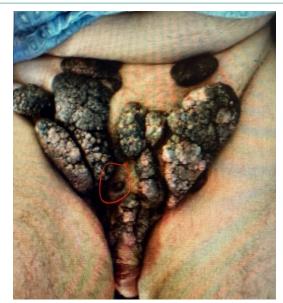


Figure 1: Clinical image.

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Discussion

Buschke-Löwenstein tumor or giant condyloma acuminatum, is often associated with low-risk HPV types (6 and 11) [1]. It is more common in men and immunodeficient states. It typically involves the anogenital region, and both appearance and location can make it sensitive for patients to discuss. Biopsy is the diagnostic procedure of choice. Careful attention should be sought for foci of squamous cell carcinoma because of metastasis risk [1]. Once treated with complete excision or topical agents such as 5-FU, it recurs at a rate of 68% [1]. Untreated or partial removal can lead to local destruction to pelvic organs. Despite treatment, mortality rate is 21% [1]. The psychological impact of dermatological lesions is important to take into consideration. Having high index of suspicion, thorough physical exam and effective patient communication are the key aspects to prevent misdiagnosis.

References

1. Irshad U, Puckett Y. Giant Condylomata Acuminata of Buschke and Lowenstein. 2023. In: StatPearls. Treasure Island (FL). 2025. https://www.ncbi.nlm.nih.gov/books/NBK560714/.

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