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Objectives: Venous malformations (VMs) are the most common vascular anomalies. Given the potential for aesthetic and psychological impacts, management can be challenging. Here, we present the case of a rare VM of the glans, and give an overview of the published literature on the subject.

Methods: For the literature review, a PubMed search was conducted using the keywords “venous malformation”, “penis”, “glans”, “child”, “sirolimus”.

Results: We report the case of a 17-year-old patient presenting with a mass on the glans (Image 1), present since the age of 11. There was no history of trauma or urinary dysfunction. Medical history includes circumcision in childhood and excision of a capillary hemangioma at age 14. Clinical examination revealed a 11 mm diameter, bluish, compressible mass on the glans. The appearance was typical of a venous malformation, and a doppler ultrasound confirmed that the malformation was confined to the skin. No CT scan or IRM were requested due to the small size and location of the lesion. Surgical excision was suggested to the patient and his parents, who preferred to defer treatment.

The primary goal of treatment is to reduce pain, functional consequences, bleeding, and thromboembolic complications. The size and extent of the lesion define the choice of treatment. Curative treatments include surgery, sclerotherapy, cryotherapy, laser ablation or the use of the mTOR inhibitor sirolimus. In the most complex cases, a multimodal approach can achieve optimal results.

Conclusions: Concerning diagnosis, a thorough clinical examination and anamnesis are often enough for the practitioner to identify a venous malformation. Imaging by ultrasound or MRI is often indicated to assess the extent of the lesions. Management always requires interdisciplinary discussion. The location and extent of the VM on the penis are key factors in deciding the best management option.

For the management of VMs, each technique has its own indications, advantages, and disadvantages, and can be used multimodally to achieve optimal long-term results. Targeted therapies such as sirolimus appear promising, but further studies are needed to prove their efficacy compared with conventional treatments such as surgery or sclerotherapy.

Conflicts of Interest: No conflicts.

