

Parameatal Urethral Cyst: A Case Report

Parameatal Üretral Kist: Olgu Raporu

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Abstract

A parameatal urethral cyst is a rare benign congenital anomaly. Approximately 50 patients with parameatal urethral cysts have been reported in the literature. These cysts are usually asymptomatic. They are recognized and diagnosed in the neonatal and early childhood periods. They are usually less than 1 cm in diameter and occur on the ventral or lateral edge of the meatus. These cysts are treated by complete excision. In this report, we present a nine-month-old boy with an asymptomatic parameatal urethral cyst who underwent surgical excision and simultaneous circumcision.

Keywords: Parameatal, Urethral, Cyst, Pediatric

Öz

Parameatal üretral kist nadir görülen benign konjenital anomalidir ve literatürde 50 civarında olgu bildirilmiştir. Bu kistler genelde asemptomatiktir. Yenidoğan ve erken çocukluk dönemlerinde kendini gösterir. Genellikle 1 cm'den küçük olur ve üretral meatusun ventral veya lateral kenarında oluşur. Tedavisinde cerrahi eksizyon uygulanır. Biz bu raporda semptomatik olmayan, parameatal üretral kisti olan ve tarafımızca cerrahi eksizyon ve eşzamanlı sirkümsizyon uygulanan 9 aylık bir erkek çocuk rapor ediyoruz.

Anahtar Kelimeler: Parameatal, Üretral, Kist, Çocuk

Introduction

Parameatal urethral cysts are rare benign congenital lesions. Approximately 50 patients with parameatal urethral cysts have been reported in the literature. They were first described by Lantin and Thompson and in 1956. They are usually less than 1 cm in diameter and occur on the ventral or lateral edge of the meatus (1,2,3). They are usually asymptomatic, but sometimes changes in urine flow, urinary obstruction, dysuria, and complaints of poor cosmetic appearance may occur (4,5). Surgical excision is the recommended treatment option (6). In this report, we present a nine-month-old boy with an asymptomatic parameatal urethral cyst.

Case Presentation

A nine-month-old baby boy was admitted to the clinic after his parents had noticed a cyst. He did not have any complaints. His urine output was normal. His feeding and growing patterns were normal. Physical examination revealed a yellow 5-6 mm cyst on the left side of the urethral meatus (Figure 1). No signs of systemic and local inflammation were observed. On ultrasound examination, no urinary tract pathology was observed. The surgical excision of the cyst, under general anesthesia, and circumcision were performed in the same session. After cyst excision, wound lips were repaired with 6/0 Vicryl Rapide suture (Figure 2). No perioperative and postoperative complications were observed. The pathology study reported a benign cystic lesion. On follow-up, in the second postoperative month, no urethral stenosis was observed (Figure 3). No recurrence occurred.

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Figure 1. Preoperative (a yellow 5-6 mm cyst on the left side of the urethral meatus)



Figure 2. Perioperative



Figure 3. Postoperative (two months after surgery)

Discussion

Parameatal urethral cysts were first described by Lantin and Thompson (1) in 1956. Although they are more common in males, they can also be seen in females (7,8). These cysts usually occur on the ventral and lateral edge of the meatus and are asymptomatic. However, changes in urine flow, urinary obstruction, dysuria, painful sexual intercourse, and complaints of poor cosmetic appearance may occur (4,5). The etiology is unclear. Thompson and Latin argue that they are caused by a pathology resulting from the separation of the foreskin and glans penis. Shiraki cited paraurethral canal obstruction as a cause (9). Hill and Ashken (7) suggest the possibility of infection-induced obstruction of the paraurethral canal. The cyst wall may consist of columnar, squamous, cuboidal, and transitional epithelium (4,10). The cysts are treated by complete excision with the patient under anesthesia, with care taken not to cause meatal stenosis (6). Aspiration is not a preferred treatment option due to recurrence, while marsupialization is not preferred as it can result in poor cosmetic appearance.

Parameatal urethral cysts are very rare, benign, asymptomatic lesions. They can be easily diagnosed by physical examination. Complete surgical excision is the preferred treatment option because of good cosmetic results and no recurrence.

Ethics

Informed Consent: The consent of the patient and his parents was obtained.

Peer-review: Externally peer-reviewed.

Authorship Contributions

Concept: S.Ç., Design: M.S., Data Collection or Processing: S.Ç., Analysis or Interpretation: E.C.B., Literature Search: M.Y.K., Writing: S.A.

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