

## Extensive Genital Warts in Man Hampering Conjugal Life: A Case Report

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### ABSTRACT

Genital warts, commonly known as condyloma acuminata, caused by the proliferation of squamous epithelial cells in the presence of sexually transmission of human papilloma Virus (HPV) infection. In human, HPV infection results in simple condyloma acuminatum, giant condyloma or Buschke-Löwenstein tumour, and seldom penile carcinoma. There are several modalities of treatment options available for genital warts- medical and surgical, alone or in combination. Sometimes extensive genital warts represent a district entity resulting from HPV infection and require surgical management. We present the case of a 42-year-old male; rickshaw puller had multiple professional female sexual partners, who presented with extensive genital warts in penoscrotal region. Lesions were treated due to failure of medical management, by wide electrosurgical excision and rotation scrotal skin flaps.

**Key Words:** Genital warts, Condyloma acuminata, Human papilloma virus, Electro-surgical excision, Scrotal skin flap.

### Introduction

Genital warts, usually known as condyloma acuminata is a sexually transmitted lesion that has become a major health care problem in the United States, represent a cutaneous infection caused by HPV, and presents typically with exophytic, ulcerative and cauliflower like tumours that can form abscesses and fistulas.<sup>1,2</sup> Although condylomatous lesions do not develop in all patients with HPV infection, the rate of infection through sexual contract is substantial; genital lesions develop in approximately two thirds of sexual contact of infected partners.<sup>2</sup> Genital warts can eventually resolve without treatment in an immunocompetent host.<sup>4</sup> However, surgical management of warts is generally reserved for those patients with a larger number of warts or small isolated warts amenable to surgical therapies.<sup>4,5,6</sup> The treatment options include topical ointments,

cryotherapy, laser vaporization, electrosurgery, surgical excision and penoscrotal reconstruction.<sup>5,6</sup> Cryotherapy, electrocautery, and surgical excision with reconstruction have been shown to be superior to treatment with podophyllin in randomized trials.<sup>7</sup> We present a case of overwhelming extensive genital warts in man that was treated successfully by wide electrosurgical excision and rotation scrotal skin flaps.

### Case Report

The patient, a 42-year-old male, muslim, rickshaw puller, hailing from Baniajjan, Gaibandha district, Bangladesh, presented to the surgery department with multiple isolated different size cauliflower like lumps, covering the almost entire surface of the penis and the scrotum. The growth had started 22 years prior as multiple small warty like lesions around the

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penoscrotal area and had gradually increased in size and some were coalesced to assume large dimensions invading the root of the penis, Corona glandis of penis and ventral parts of scrotum. He was chain smoker, married at the age of 30. Before that at the age of 18, he exposed multiple professional female sexual partners without protective method. The patient noticed, he was unhappy in his conjugal life due to pain and difficult penetration. Last 2 years he had abstained from sexual intercourse. He has two sons, 2 daughters and wife, all are well. He was initiated on homeopathic drug, broad spectrum antibiotics and antiviral drugs like acyclovir.



**Figure 1:** Genital warts clinical manifestation



**Figure 2:** Wide excision on genital warts (ventral)

On physical examination, we found soft solid cauliflower shaped lumps, covering almost the entire shaft of the penis and the scrotum which was variable in size. The urethral meatus was normal and no inguinal lymphadenopathy. Incision biopsy

of the lumps on the suspicious site of the penis had been performed with histopathological result of condylomata accuminata.

Wide excision with 0.5 cm margin was performed. The total mass can be removed from the penile shaft and the scrotum. Small defect repair with primary closure and large defect in the shaft of the penis was closed by pantaloons shape rotation scrotal skin flaps, harvesting from both sites of the scrotum. Histopathological result revealed condylomata accuminata with no evidence of malignancy. The surgical procedure was uneventful without complication. One year following surgery there was no new warty lesion and the patient has no voiding, erectile and sexual dysfunctions.



**Figure 3:** Wide excision on genital warts (Dorsal)



**Figure 4:** One year follow-up

## Discussion

Genital warts can manifest themselves as solitary or clustered lesion that may be flat, like a dome, keratotic, cauliflower or pedunculated in shape and colour may be white, pink, purple, red or brown.<sup>12,13,14</sup> Warts can grow on the anus, pubis and oral cavity besides external genitalia.<sup>8,12</sup> Warts usually asymptomatic but can be very painful and itchy and can cause bleeding, ulceration and organ function impairment.<sup>10,15</sup> The patient in this case had painful external multiple isolated and clustered condyloma acuminata on the external genitalia with cauliflower like lesion and was being treated medically.

Genital warts can be diagnosed with a careful clinical history and physical examination. Biopsy is performed if warts do not respond to medications or if any suspicion toward malignancy.<sup>9,12,14</sup> Detection of HPV is not recommended for the diagnosis or management of genital warts.<sup>10,11,12,16</sup> The Ultimate goal of treatment is to eliminate genital warts that may cause physical symptoms, mental stress and emotional distress.<sup>10</sup>

There are a number of medical and surgical treatment options available to treat the external genital warts. The patient in this case had been previously treated with medical and homeopathic therapy for prolong period of time. Considering the large size and numbers of external genital warts and there was no response to medical management, so further management was done by surgery. Wide excision of mass was performed. Small defect of the penis and the scrotum repaired with primary skin closure and large defect in the shaft of the penis was closed by pantaloons shape rotation scrotal skin flaps, harvesting from both sites of scrotum. This was a new innovative technique and selected because it provides a simple reliable flaps that is easy to design, harvest and often rapid fasciocutaneous closure. The other advantages of these flaps are the good vascular supply, appropriate tissue thickness and colour, reliable healing, short operative time, less post-operative care, minimal patient morbidity, less post-operative pain, good aesthetic outcome and finally cost effective compared to other technique.<sup>17</sup> One year after excision, no new or recurrent

external genital warts were found in the former site. There were no complaints in voiding, erectile and sexual function. Aesthetically, the patient was satisfied with the result of surgery.

## Conclusion

Surgical treatment of extensive genital warts is an effective and safe method for the patient with good cosmetic result following reconstruction surgery. In our research there were no serious post-operative complications or recurrence of the disease during the follow-up period.

**Conflict of interest:** none.

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