Subpubic cyst

Melinda Rixey Sava • Brian Rubin • Murali Sundaram

Received: 10 March 2011 / Revised: 13 June 2011 / Accepted: 25 July 2011 / Published online: 8 November 2011
© ISS 2011

History

A 59-year-old female presented with incomplete bladder emptying, sharp pain in her vagina, and recurrent urinary tract infections. The patient had to change positions to void, and she noticed spraying of her stream on micturition.

In evaluation of these symptoms, a CT (Fig. 1) and subsequent MRI (Figs. 2, 3) were performed, which demonstrated a lesion near the pubic symphysis for which the abdominal radiologist consulted the musculoskeletal radiologist.

The patient underwent resection of the subpubic lesion, the histology of which is illustrated in Figs. 4, 5, and 6. Postoperatively the patient's discomfort and urinary stream were much improved.

Fig. 1 Contrast-enhanced axial CT image

Fig. 2 Contrast-enhanced T1-weighted axial image

The diagnosis can be found at doi:10.1007/s00256-011-1249-5.

M. R. Sava (✉) • M. Sundaram
Department of Radiology, Cleveland Clinic,
9500 Euclid Avenue,
Cleveland, OH 44195, USA
e-mail: savam@ccf.org

B. Rubin
Department of Pathology, Cleveland Clinic,
Cleveland, OH, USA

Fig. 3 T2-weighted axial image

Fig. 5 Cyst wall (40x)

Fig. 4 Cyst contents (100x)

Fig. 6 Cyst wall (100x)