



Calcified Bladder Tumor with Bilateral Hydro-Ureteronephrosis

Jatinder Kumar*, Muhammad Umar Alam, Charu Shastri, Mark Bandyk, Joseph Costa and Balaji KC

Department of Urology, University of Florida, USA

Clinical Image

A 55-year-old male presented with gross painless intermittent hematuria for two years. He underwent transurethral resection for a six centimeter bladder tumor which on histopathology showed T1 high grade urothelial carcinoma. Patient received induction intravesical BCG therapy and then he was lost to follow up. He presented again after 1 year with gross painless hematuria and difficulty in urination Figure 1. CT scan revealed large, solid, calcified bladder tumor involving almost whole of the bladder circumferentially with bilateral hydro-ureteronephrosis up to vesico-ureteric junction, suggesting muscularis propria involvement. Findings were confirmed on cystoscopy and MRI scan, which also revealed focal areas of extravesical extension Figure 2. Patient received two cycles of neo-adjuvant gemcitabine and cisplatin chemotherapy before undergoing radical cysto-prostatectomy with urinary diversion.

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*Correspondence:

Jatinder Kumar, Department of Urology,
University of Florida, Jacksonville,
Florida, USA, Tel: 904-699-7488;
E-mail: Jatinderurology82@gmail.com

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Figure 1: Labeled.

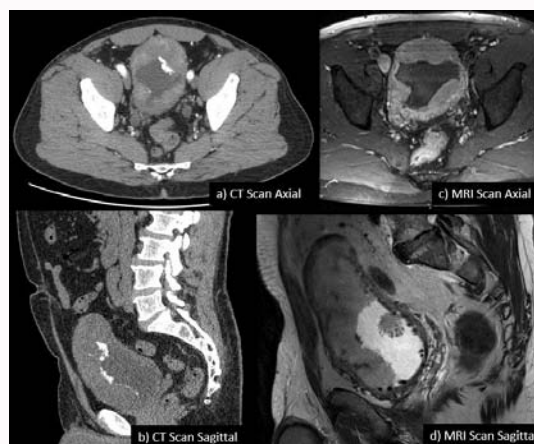


Figure 2: Unlabeled.