

Giant Condyloma Acuminatum – Buschke-Löwenstein Disease – a Literature Review

D. Spînu¹, A. Rădulescu¹, O. Bratu^{1,2}, I.A. Checheriță³, A.E. Ranetti⁴, D. Mischianu^{1,2}

¹Department of Urology, “Dr. Carol Davila” Central Military Emergency University Hospital, Bucharest, Romania

²Department of Urology, Clinical Department No. 3, “Carol Davila” University of Medicine and Pharmacy, “Dr. Carol Davila” Central Military Emergency University Hospital, Bucharest, Romania

³Department of Nephrology and Dialysis, Clinical Department No. 3, “Carol Davila” University of Medicine and Pharmacy, “Sf. Ioan” Clinical Emergency Hospital, Bucharest, Romania

⁴Endocrinology Ward, “Dr. Carol Davila” Central Military Emergency University Hospital, Bucharest, Romania

Abstract

Aim: Buschke-Löwenstein disease or giant condyloma acuminatum represents a rare, sexually transmitted disorder, with a slow evolution and the tendency to infiltrate in the adjacent tissues; untreated, the outcome is unfavorable. The hallmark is the development of one or various prominent-sized vegetant tumors that usually ulcerate.

Material and Methods: The present article summarizes both the etiopathogenic features and the current approach of treatment management.

Results: Minimally invasive surgery along with local and systemic therapy is adequate in patients with small-sized lesions or high intraoperative risk. The main treatment remains extensive surgery with wide resection and often reinterventions to complete the excision.

Conclusions: giant condyloma acuminatum represents a continuous surgical challenge, because of the need of exhaustive surgical procedures that should consider both the oncological principles and a better anatomical resolution. No standard treatment protocol can be established, because of the infrequency of the disease. Radical surgery including full thickness excision of the affected areas represents the “gold-standard” therapy. Other known forms of treatment present unsatisfactory results without statistical significance, the studies having been conducted on small groups of patients. An adequate, long-term follow-up of Buschke-Löwenstein patients is highly recommended, because of the increased recurrence rate.

Key words: Buschke-Löwenstein disease, large loop excision, verrucous carcinoma

Corresponding author: Arsenie Dan Spînu, MD

“Dr. Carol Davila” Central Military, Emergency University Hospital Bucharest
88 Mircea Vulcanescu Street, sector 1, Bucharest, Romania

E-mail: dan.spinu@yahoo.co.uk