

## **PS2.071**

### **False hematuria**

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**Background:** Vulvar melanoma is rare but it is the second most common neoplasm of the vulva. It is predominantly a disease of postmenopausal women.

Although the external location of the vulva should encourage early presentation, vulvar cancers are often advanced at the time of diagnosis.

Case Report: A 82-year-old woman presented to her general practitioner on April 2015 complaining about “blood in urine” with no other symptoms. Urine test strip showed positive nitrite. It was requested urine culture which revealed *Escherichia coli* infection and she was treated with nitrofurantoin.

Four months later she returned with vaginal pruritus, vulvar discomfort and keeping the blood loss. She was treated with dequalinii chloridum and was required renal and bladder ultrasound, which showed no alterations.

In October she returned complaining about low back pain and "vaginal bleeding" and was referred to the emergency service.

The vulvar examination by the gynecologist showed an oval and ulcerated mass at the vaginal entrance which was biopsied for diagnosis. The histology revealed a malignant melanoma.

**Discussion:** Women with abnormal bleeding on genital area often complain about vaginal bleeding. Most women can identify the difference, however, conditions associated with urinary tract with symptoms such as hematuria can be mistaken with genital bleeding.

In this case the vaginal bleeding was described by patient as hematuria.

The physician when dealing with a situation of bleeding in genital area should make the differential diagnosis.

Delay on diagnosis may be related to patient's embarrassment, reluctance to be examined or healthcare practitioners who prescribe topical medications to a patient with vulvar complaints without performing a physical examination.

This case emphasizes the importance of objective examination for proper management of patients. The gynecological observation, at first time should have allowed identification of the mass and timely referral to secondary health care.