

# Metastatic melanoma presenting as a testicular lump

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**M**alignant melanoma metastasising to testis is a rare and aggressive disease with poor prognosis and a high mortality rate within a short time interval.

## Case Report

An 82-year-old man was referred by his GP with a painless lump in left scrotum for one month. On examination the left testis was hard with surrounding hydrocele. No inguinal or abdominal masses were palpable. Ultrasonography confirmed a solid left intra testicular mass concerning for testicular cancer (Figure 1). LDH was elevated but betaHCG and AFP were within normal limits. Staging CT scan was performed which showed multiple nodules in the thorax and abdomen (Figure 2).

He had wide local excision of a cutaneous melanoma from the anterior abdominal wall with a sentinel lymph node biopsy 6 years ago. Histology confirmed 1.17mm Breslow thickness malignant melanoma with a negative sentinel lymph node.

Left inguinal orchidectomy was performed with initial working diagnosis of lymphoma. On histopathology report, the tumour had multinodular appearance, with cells showing significant pleomorphism, enlarged nuclei, prominent nucleoli and several mitotic figures. Cells were melan A and S100 positive. Flow cytometry showed cells positive for CD56, which is associated with some cases of malignant melanoma. Final histological diagnosis was malignant melanoma representing as testicular lump. See Figures 1 and 2.

Our patient was referred to medical oncology; however, he died in less than a month following surgery.

## Discussion

Metastatic tumours of the testis are a rare finding and simulate primary testicular neoplasm. Primary testicular tumours are a disease of young men and commonly present in 20s and 30s, but testicular metastasis of malignant melanoma varies widely between 43 to 80 years.<sup>1,2</sup> The most common primary site for metastatic tumour is prostate.<sup>3,4</sup> Less commonly metastasis can come from lung, colon and kidney. The incidence of cutaneous malignant melanoma as a primary site in testicular metastasis varies between 9% and 41%.<sup>3,5</sup>

The most common presentation is a rapidly growing testicular lump.<sup>1,2,6</sup> Patients can present with melanospermia<sup>6</sup> and a supraclavicular lump.<sup>7</sup>

Malignant melanoma metastasising to the testis is one of the most aggressive and life threatening tumours and is usually found during the autopsy.<sup>5,8</sup> Despite the late presenting age, it very important to exclude primary testicular neoplasm, as it is more common. Unlike the primary disease, the tumour markers are usually not elevated.<sup>1,2,6</sup> Definite diagnosis can only be established after the histopathological analysis. No mechanism to date has been established for the metastasis.<sup>8</sup>

The prognosis is very grim for such patients with the time interval between diagnosis and death is reported to be less than a year in most cases.<sup>1,2,6</sup>

Figure 1:

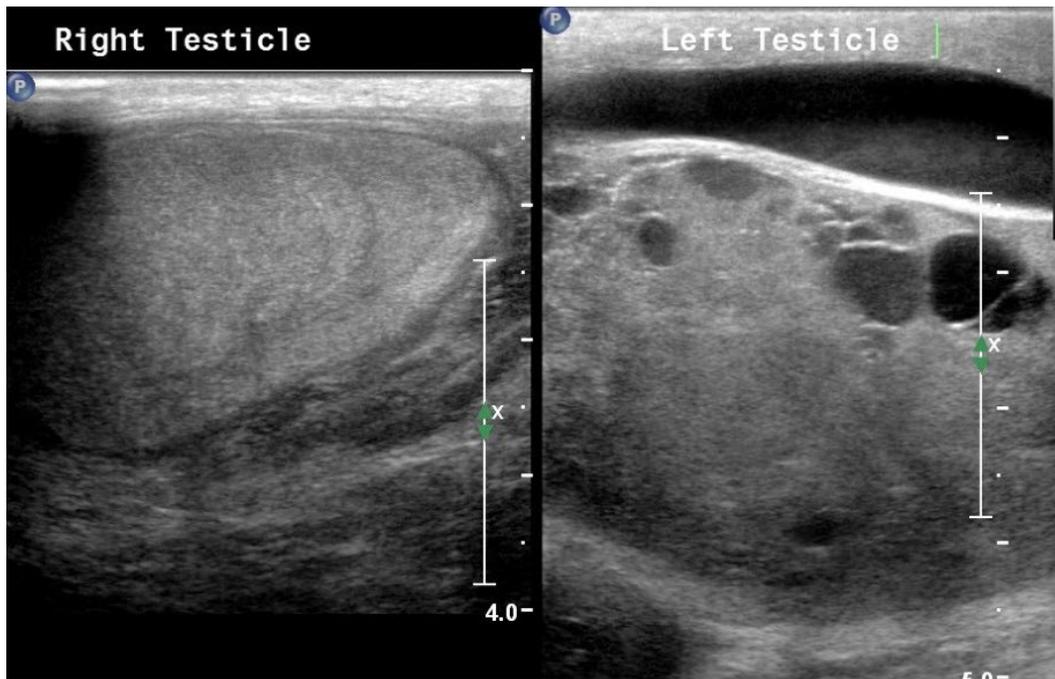


Figure 2:



**Competing interests:** Nil

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