Young Adult with Prostate Rhabdomyosarcoma

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Brief Report

Prostate rhabdomyosarcoma (PR) is a rare mesenchymatous tumour that makes up less than 1% of all malignant prostate tumours. PR is extremely rare in adults and has a high malignant potential. In the treatment of PR, various therapeutic approaches, such as radical surgery, radiotherapy, and chemotherapy, are used. We present a case of PR in a young adult who was treated with concurrent radio-chemotherapy and achieved complete remission.

Rhabdomyosarcoma (RMS) is a soft tissue sarcoma that affects the female reproductive tract and is one of the most common soft tissue sarcomas in children. Sarcoma botryoides, also known as botyroid RMSs, are a polypoid variant of embryonal RMS that develops from embryonal rhabdomyoblasts and accounts for approximately 3% of all RMSs. The primary site of these tumours is related to the patient's age; it is found in the vagina during infancy and early childhood, in the cervix during the active reproductive stage, and in the corpus uteri in postmenopausal patients. Despite the fact that vaginal tumours are five times more common than cervical tumours, the latter appears to have a better prognosis.

Botryoid RMS has a strong tendency for local recurrence after excision, frequently invading adjacent organs. The management of this tumour is difficult because it appears at a younger age; at this age, it is critical to preserve hormonal, sexual, and reproductive function. In the treatment of these tumours, there are multiple surgical approaches and variations in adjuvant therapy. There has been a dramatic shift in management strategy over the last few decades, from radical and often mutilating ex-enterative surgeries to a more conservative approach with adjuvant chemotherapy. The management of a young girl with botryoid RMS of the cervix is discussed in this section.

Alveolar rhabdomyosarcoma (ARMS) is a rare subtype of rhabdomyosarcoma (RMS) that manifests as an aggressive tumour in mesenchymal tissues. In general, RMS is most commonly diagnosed in children. Patients under the age of ten are more likely to be affected. RMS is thought to be caused by cells of the skeletal muscle lineage. Elderly patients, in particular, are rarely diagnosed with this type of tumour, resulting in a very poor prognosis. RMS is classified into three types: embryonal, alveolar, and pleomorphic. Because this type of tumour is most common in children, adult RMS accounts for a very small percentage of soft tissue sarcomas, ranging from 2% to 5%. Because this is a very rare case of alveolar type RMS, which most commonly occurs in gynecologic regions, this unique case of ARMS of the uterine corpus in an elderly patient can contribute to our understanding of this uncommon type of tumour.

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