

Introduction

The objective of this study was to highlight the rarity of the localization of African histoplasmosis in the penis and the difficulties of its management

Case presentation

A 27 year old student, black, rural resident, had consulted in the urology department for chronic non-healing ulceration onset for 8 months associated with dysuria and burning urination two weeks ago. The beginning was marked by painless erythematous nodules measuring 1x1cm which gave rise to multiple ulcers on the glans of the penis and around the urethral meatus. There was no evidence of trauma, surgery, weight loss, fever, cough or other constitutional symptoms. Examination of the genitourinary organs shows a large ulcer with irregular contours, circumferential shape of 6x4x3cm of the glans. The ulceration fundus is dirty, hemorrhagic and necrotic, with a poorly limited urethral orifice (Fig.1).



Figure 1: Macroscopy of a large gland ulcer with necrotic and haemorrhagic remanence

The bilateral inguinal lymph nodes were enlarged between 0.5 and 2 cm in diameter, firm, and mobile. The rest of the clinical examination of the genitals was normal. Biological studies have revealed a high sedimentation rate (54 mm for the first hour). A biopsy was made and anatomo-pathological examination carried out on the samples. The histopathological examination presented inflammatory granulomas made of epithelioid cells, lymphoplasmocytes, polynuclear eosinophils and giant multinucleated 4 cells with ovoid yeasts surrounded by a clear halo (Fig.2).

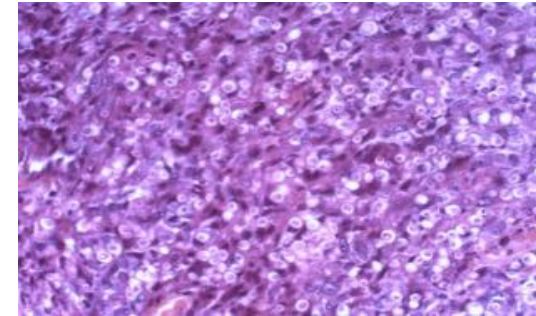


Figure 2: Photomicrograph showing large by a clear halo of *Histoplasma capsulatum var. duboisii* (HE, X 400)

The PAS and Grocott stains revealed numerous fungal structures with a morphology measuring 7 to 15nm (Figs.3). The diagnosis of histoplasmosis by *Histoplasma capsulatum var. duboisii* has been confirmed.

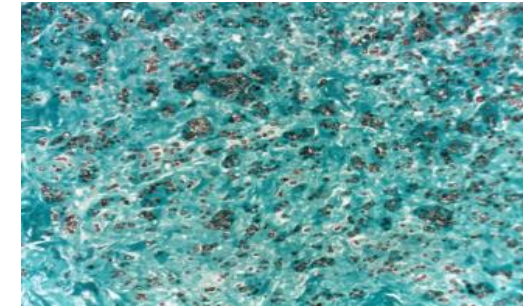


Figure 3: Photomicrograph showing *Histoplasma capsulatum var. duboisii* yeast well individualized (Gomori Grocott, X 200)

Conclusion

African histoplasmosis of the penis is an extremely rare entity. The diagnosis of certainty often involves histology and mycological examination

Bibliographic references

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- 2- Darré T, Saka B, Mouhari-Touré A, Dorkenoo AM, Amégbor K, Pitche VP et al. Histoplasmosis by *Histoplasma capsulatum var. duboisii* observed at the Laboratory of Pathological Anatomy of Lomé in Togo. *J Pathog.* 2017;2017:2323412.