Diagnosis at first glance: bladder parachute in an HIV-infected patient

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CASE REPORT

A 31-year-old HIV-infected woman was admitted to the hospital for examination of multiple lesions in the rectum and vagina. A large number of verrucous lesions located throughout the urethra and endocervix were observed and biopsied. The lesions appeared 3 years ago and spread considerably, despite empirical therapy with interferon. During the last year, the patient suffered from recurrent urinary tract infections, which were treated with different antibiotics, and intermittent urinary flow obstruction. Abdominal ultrasonography showed concentric thickening of the urethral wall, continuing along the cervix and the urinary bladder baseline. Some of the lesions protruded towards the vesical lumen. Intravenous urography showed intraluminal filling defects in the lower part of the bladder which resembled the balloon of a parachute (Figure 1).
Cystoscopy revealed whitish, cotton-like lesions on the bladder neck (Figure 2). An endoscopic resection was performed, but revealed nothing. Antiretroviral therapy was initiated.

**QUESTION**

What is your diagnosis?

*Figure 2* Cytoscopy: whitish, cotton-like protrusions on the bladder neck.