

THE UNITED REPUBLIC OF TANZANIA



MINISTRY OF HEALTH, COMMUNITY  
DEVELOPMENT, GENDER, ELDERLY  
AND CHILDREN

MUHIMBILI NATIONAL HOSPITAL  
MLOGANZILA



**An Angiomyofibroblastoma”** by Sanglyun Nam,MD,PhD, **Adam Moshi, MD,** Jungtae Kim MD,PhD, JiHyun Kim, MD and Kyongjin Kim, MD,PhD. Journal of Gynecologic Surgery DOI: 10.1089/gyn2019.0119

**Background:** An angiomyofibroblastoma (AMF) is a mesenchymal tumor that affects mostly reproductive-age woman; very rare cases have been reported in men. An AMF is generally an asymptomatic mass that primarily arises in the vulvar region. The tumor grows slowly but becomes quite large.

**Case:** A 29-year-old nulliparous woman was diagnosed with having an AMF that was asymptomatic and huge. The AMF distorted both labia. This case was managed with a total vulvectomy and by addressing the serious skin defect caused by this surgery. A “double-barreled” colostomy was performed to protect this patient from any potential stool-induced infection. After these procedures, she received negative-pressure wound therapy (NPWT) dressings for 2 months, and reconstructive surgery with full-thickness skin grafts from both thighs was then performed. The colostomy was closed once the skin defect was closed.

**Results:** The reconstructive surgery was successful with no adverse outcomes.

**Conclusions:** It is important to confirm AMF histopathologically. When AMF is suspected for a vulvar lesion, complete excision of this tumor is the treatment of choice. NPWT is an appropriate way to facilitate wound healing. In a limited-resource country, NPWT can be useful for patient care.