



Image of the month

Rectal syphilis

Sífilis rectal

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Fig. 1

A 40-year-old male patient with HIV consulted for rectal syndrome. Rectal examination revealed an irregular ulcerated lesion on the anterior aspect at 1 cm from the anorectal ring. Rectosigmoidoscopy confirmed an ulcerated vegetating lesion, and a biopsy was taken. Magnetic resonance imaging (Fig. 1) confirmed the presence of a subperitoneal rectal lesion with mesenteric and extra mesenteric rectal adenomegaly, probably a T3 N1 tumour. The pathological anatomy revealed a non-specific polymorphous inflammatory lesion, leading to a suspected diagnosis of syphilis. The diagnosis was confirmed by serology. The patient was treated with penicillin with complete clinical and endoscopic remission.

Syphilis affects more than 12,000,000 people/year. At the anorectal level, its manifestation is polymorphic. Its infrequent presentation as a pseudotumour carries a consequent risk of overtreatment.

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