

Abstract

A 72 year old African male presented with a 2 weeks history of haematuria with clots, dysuria, nocturia, frequency and subsequently 2 day history of acute urinary retention (AUR). There were no colonic symptoms of mucus discharge, blood per rectum or malaena stools. Imaging studies demonstrated a tumour mass invading the roof of the urinary bladder whilst cystoscopic findings were inconclusive. Following surgical intervention, the mass was subjected to histopathological evaluation which confirmed colonic adenocarcinoma metastasis in the urinary bladder. It is now 4 ½ years since surgery was carried out and follow up shows good prognosis.