

A Case of the Week

Case 445

A seventy-nine-year-old male presented with a right swollen portion at lateral abdomen. He had realized it since this January. Today, he realized the surface of the swollen portion falling into self-broken, coming out pus. Then, he came to visit us. Laboratory test revealed white blood cells 5070/mm³, CRP 2.21 mg/dL. He took non-enhanced CT, contrast-enhanced CT and MRI for further investigation (Figs 1-5).

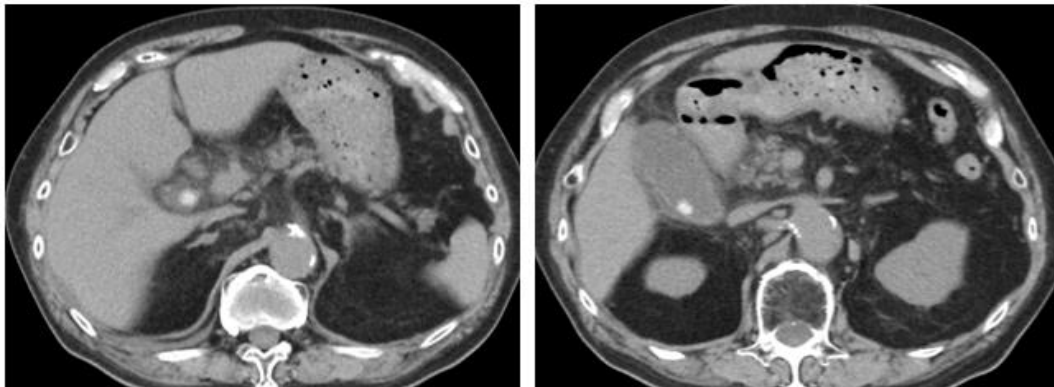


Fig.1 Before cholecystectomy, a few gall bladder stones (A, B) with thickened mural (B) is depicted on non-enhanced CT.

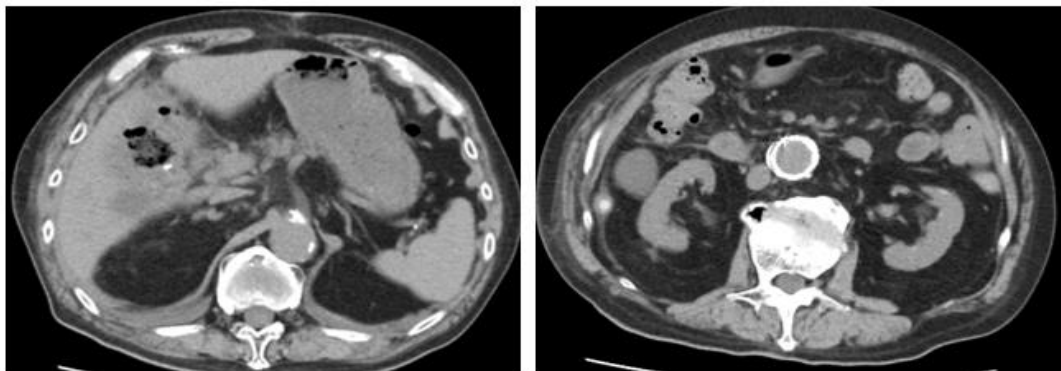


Fig.2 After laparoscopic cholecystectomy, air collection in gall bladder fossa (A) and a dropped stone (B) at the subhepatic space are depicted on axial non-enhanced CT.

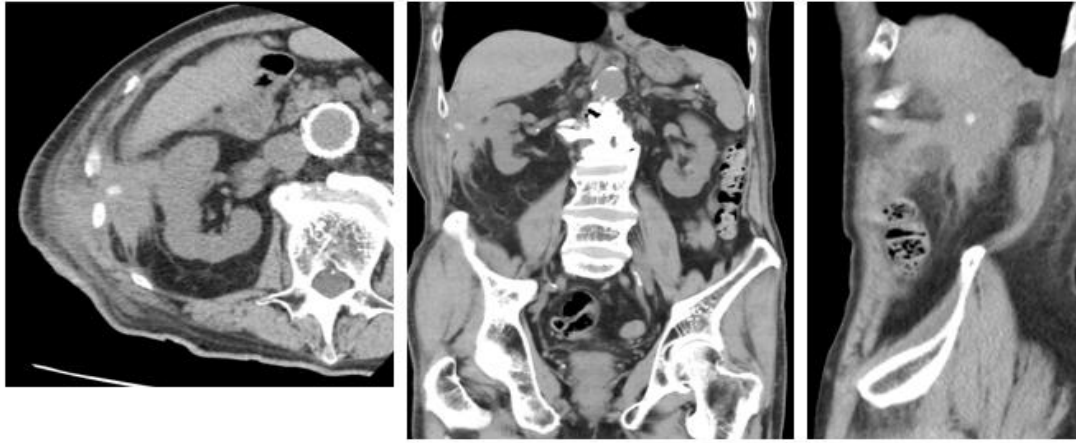


Fig.3 Nine months later, soft tissue density lesions containing high density stone expand to subhepatic space, perirenal space, posterior pararenal space, inter-rib muscle and subcutaneous tissue on axial (A), coronal (B) and sagittal (C) images.

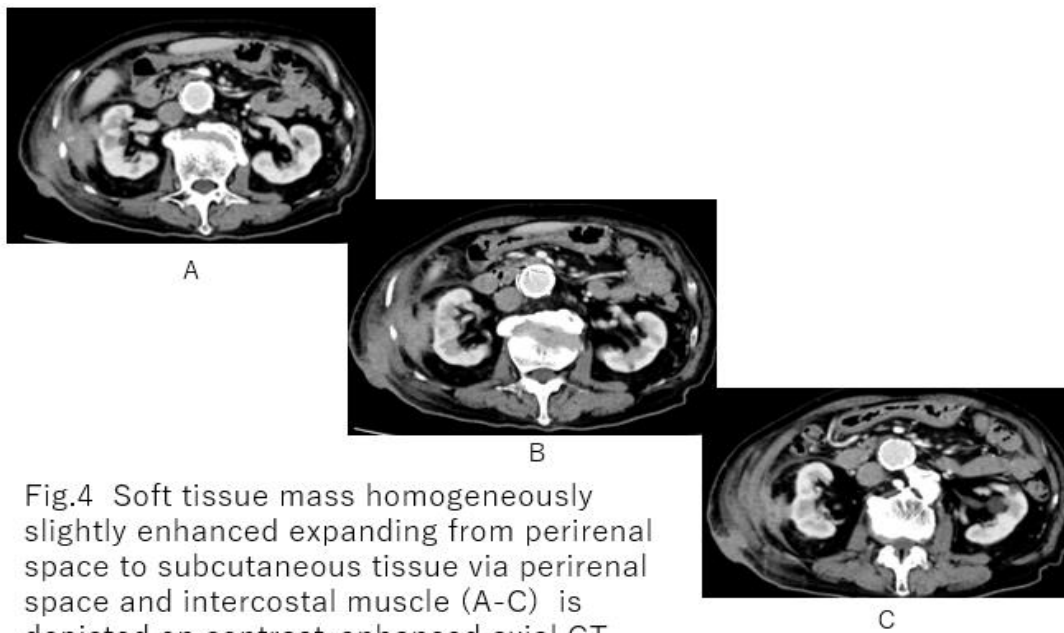


Fig.4 Soft tissue mass homogeneously slightly enhanced expanding from perirenal space to subcutaneous tissue via perirenal space and intercostal muscle (A-C) is depicted on contrast-enhanced axial CT images.

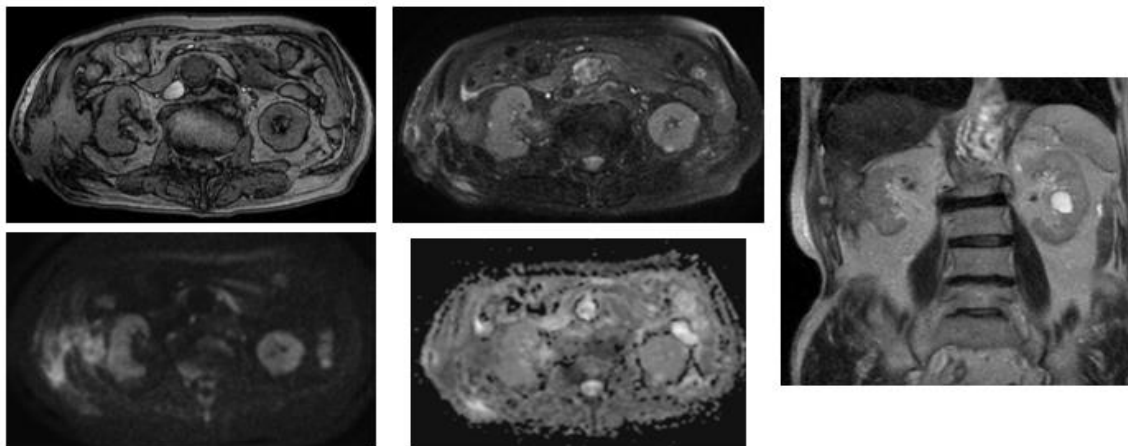


Fig.5 Infiltrative lesions from posterior pararenal space to subcutaneous surface via subcutaneous tissue, intercostal muscle and perirenal space are depicted iso signal intensity on MRI with T1WI (A), fat suppression T2WI (B), and coronal T2WI. These lesions include mixed signal intensities of high and low on Diffusion WI (D) whose water molecules diffusions indicate disorder and preserving, respectively.

What is the imaging diagnosis?

1. Inflammatory granuloma
2. Leiomyosarcoma
3. Fibrosarcoma
4. Malignant lymphoma

answer

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