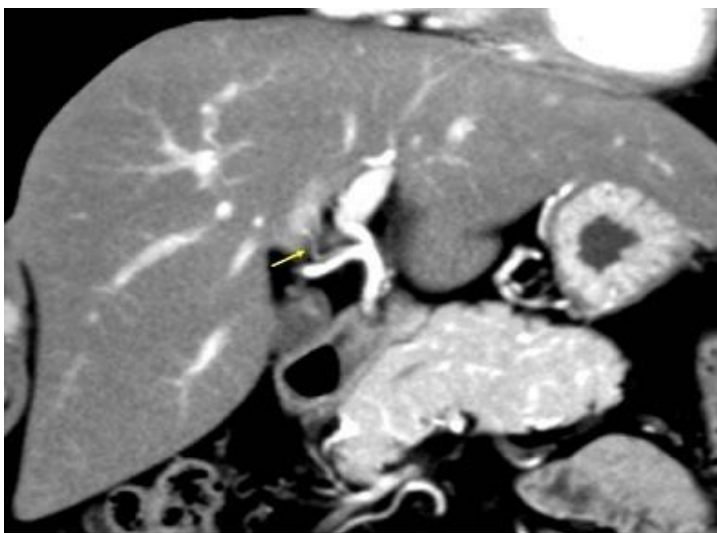
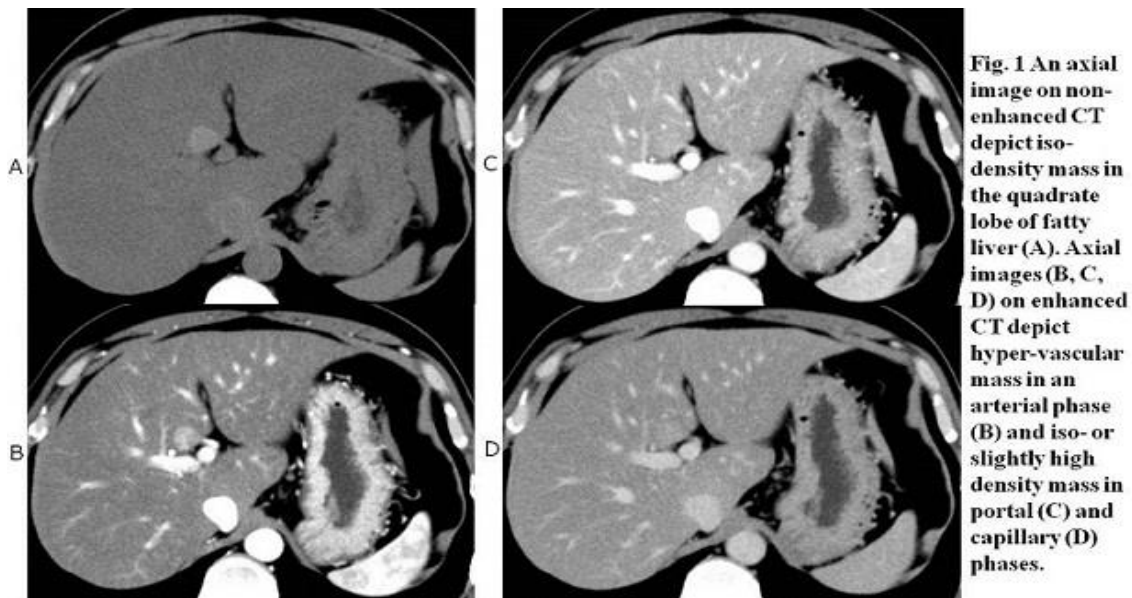
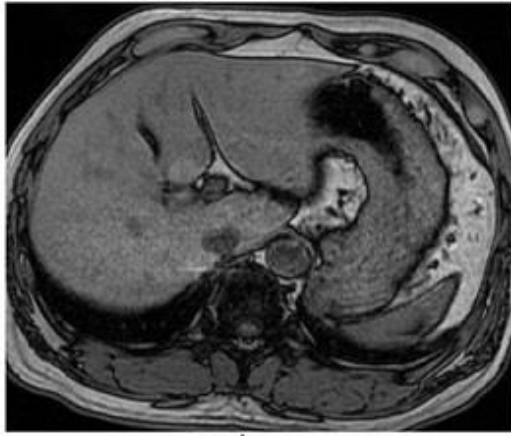


# A Case of the Week

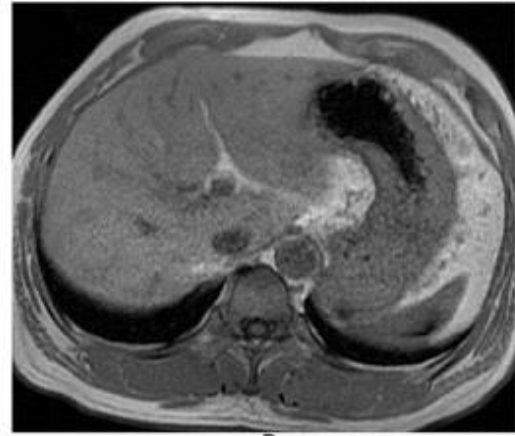
## Case 78

A fifty-year-old male periodically visited a local clinic because of diabetes mellitus, hyper-lipidosis (-steatosis), liver function test abnormality and regurgitation esophagitis. He had drunk much alcohol every day in the past. Although he stopped drinking alcohol, laboratory test revealed no improvement of liver function test. Then, he presented our hospital for further examination. Laboratory test revealed AST 64 U/L, ALT 96 U/L,  $\gamma$ GTP 108, and blood sugar 152 mg/dL. Abdominal echo showed the suspicious mass in the quadrate lobe of the liver. Abdominal CT and MRI were followed in order to investigate whether malignant or benign (Figs 1 to 5).



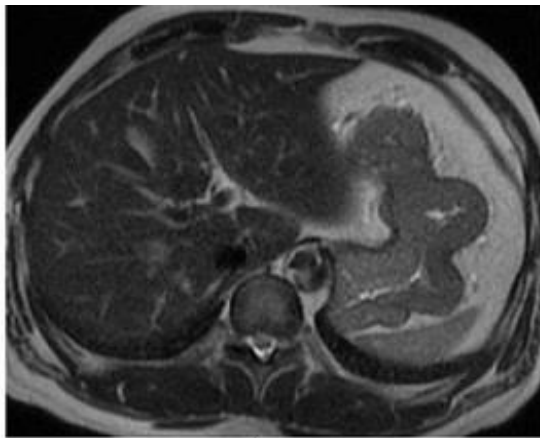


A

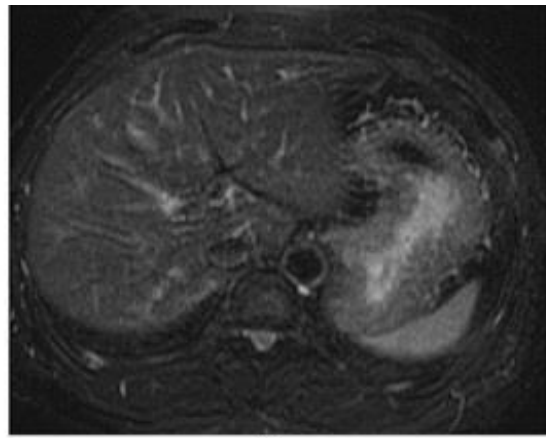


B

**Fig. 3** Out-of-phase of T1WI (A) depicts a high-signal intensity mass in the quadrate lobe, while in-phase of T1WI (B) depicts no clear mass to identify in the quadrate lobe .

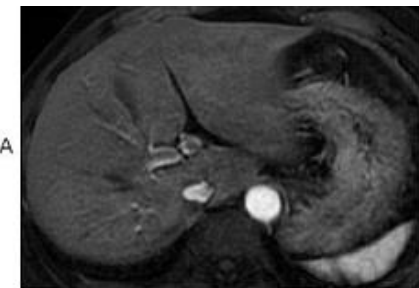


A

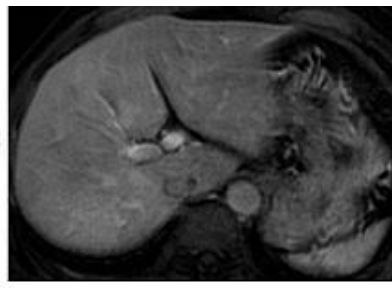


B

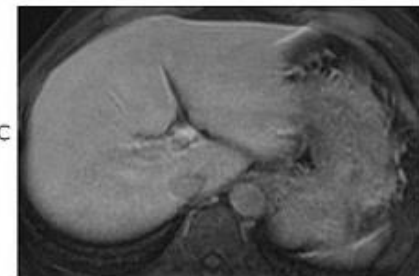
**Fig. 4** Axial images of T2WI (A) and fat suppression T2WI (B) depict no high-signal intensity mass in the quadrate lobe.



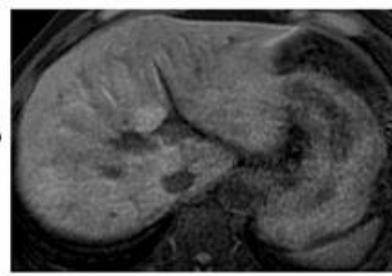
A



B



C



D

**Fig. 5** Axial images on dynamic MRI with T1WI using EOB depict no identification of mass in arterial phase (A), portal phase (B) and capillary phase (C) but high signal intensity in the quadrate lobe only in hepatic cell phase (D).

What is probable imaging diagnosis of the lesion in the quadrate lobe on abdomen CT and MRI?

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1. Liver hemangioma
2. Liver metastasis
3. Hepatocellular carcinoma
4. Focal nodular hyperplasia
5. Pseudo-lesion

answer

2017.11.1