

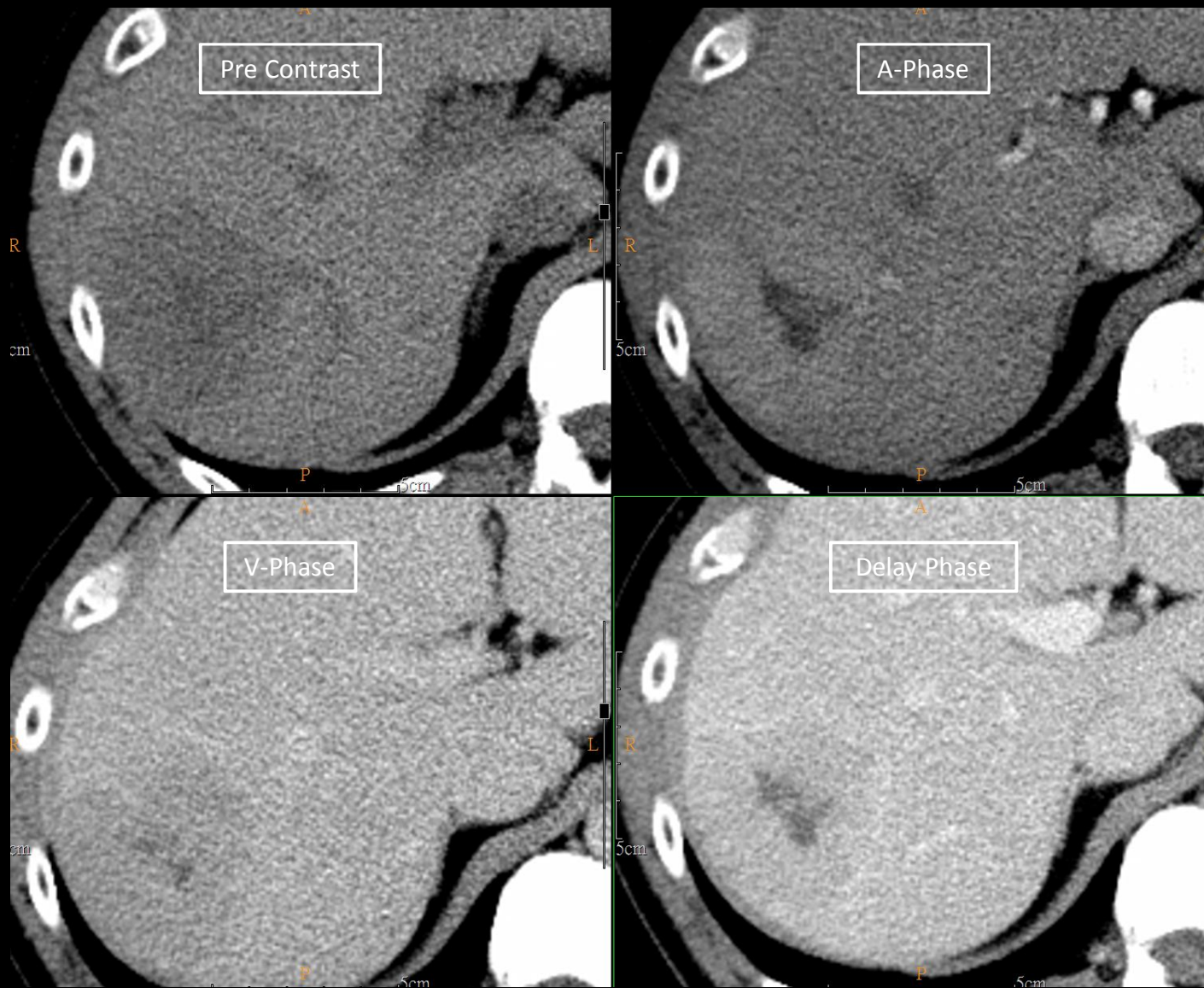
Case 2

37M 邵X勤

Hepatic tumor was found during health exam

Images

- 2018-12-26 Abdomen CT



A 5.8 cm mass lesion at S7 of liver parenchyma, with central scar appearance, arterial enhancement, and venous washout pattern

Differential Diagnosis

- Fibrolamellar HCC
- Focal nodular hyperplasia (FNH)
- Conventional HCC

- Hepatic cavernous hemangioma
- Peripheral cholangiocarcinoma

Clinical Course

- Underwent sono-guided liver biopsy
- Pathology
Liver, segment 7, sonography-guided biopsy, hepatocellular carcinoma

Discussion

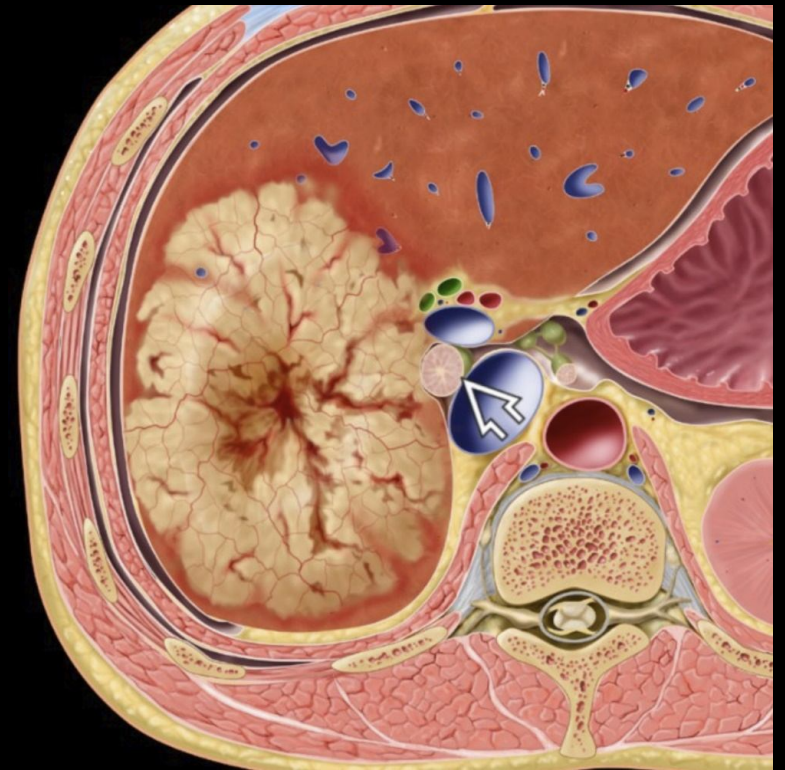
Fibrolamellar HCC

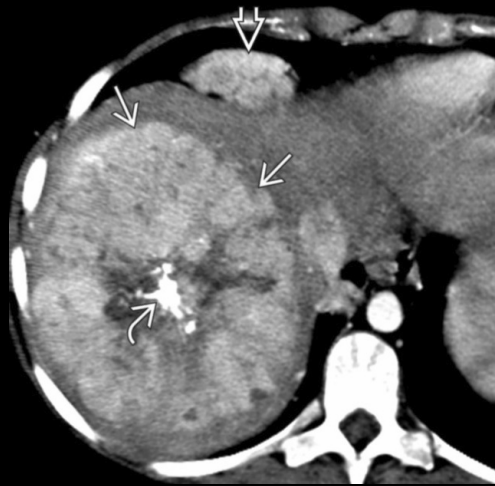
Fibrolamellar HCC

- Uncommon malignant hepatocellular tumor
- Distinct clinical, histopathologic, and imaging features differentiate it from conventional HCC
- Young adults (20 to 40 years of age) without gender predilection
- No association with cirrhosis, alcoholism, or hepatitis B/C infection
- Normal AFP

Imaging Findings

- Heterogeneously enhancing, large, lobulated mass with hypointense central scar and radial septa
 - Calcification and necrosis are common (>50%)
 - Nodal metastases (> 50%)
 - Vary from 5-20 cm (mean: 13 cm)
 - "Satellite" nodules are often present
- Slow-growing tumor that usually arises in normal (noncirrhotic) liver
- Better prognosis than conventional HCC but still locally invasive and frequently metastatic





Heterogeneous, hypervascular mass with a large, calcified central scar and cardiophrenic lymphadenopathy





T2WI MR: A large, heterogeneous mass with hypointense central scar



T1 C+ MR: Heterogeneous enhancement

Differential Diagnosis

- Focal Nodular Hyperplasia (FNH)
 - Marked **homogeneous** enhancement on **arterial phase** CT or MR
 - **Scar**: Hyperintense on T2WI
 - **Nonencapsulated** and **no calcification**
 - **Homogeneous uptake + delayed retention hepatobiliary MR agents (gadoxetate)**
 - > Most specific imaging feature of FNH
 - Microscopic pattern
 - > **Normal hepatocytes**; disorganized bile ductules

