



臺北醫學大學附設醫院

TAIPEI MEDICAL UNIVERSITY HOSPITAL

與大師對話

2018-10-16

台北榮民總醫院放射線部 李潤川 主任

台北醫學大學附設醫院影像醫學部 孔慶惠 主治醫師 / 江妤 住院醫師

規則

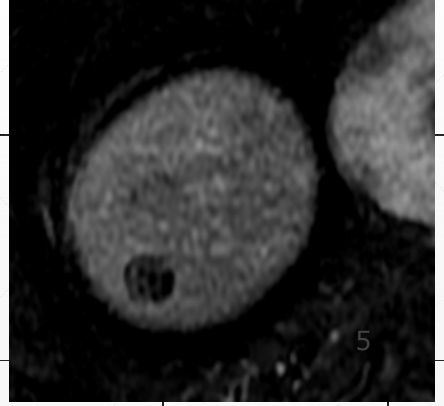
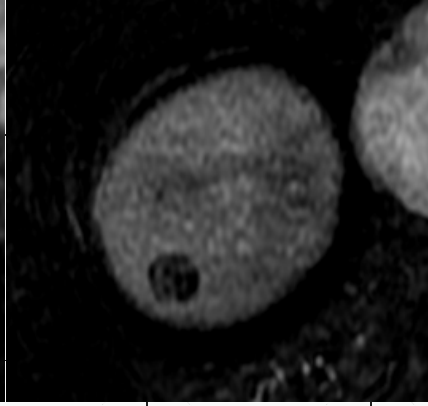
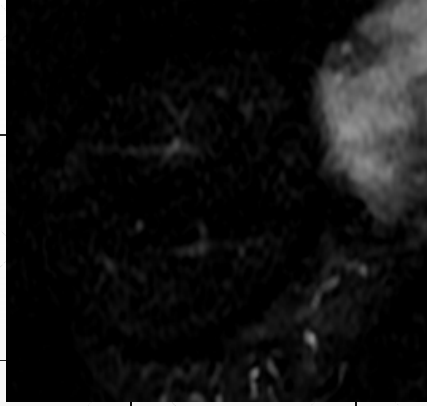
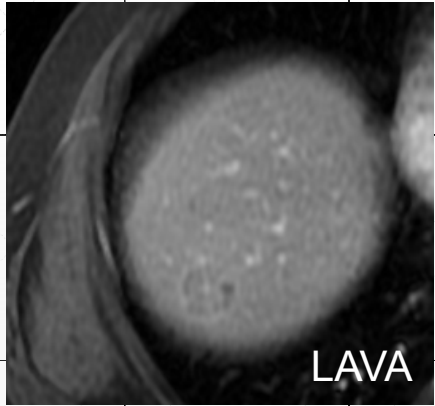
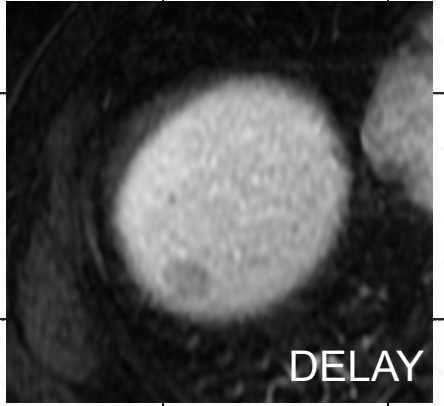
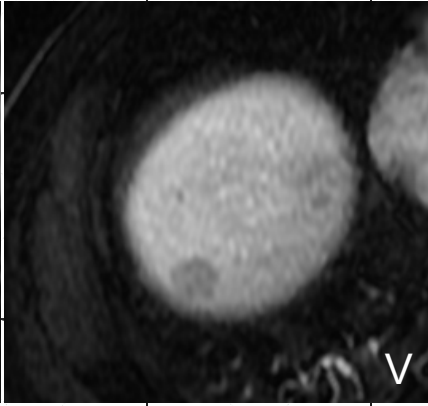
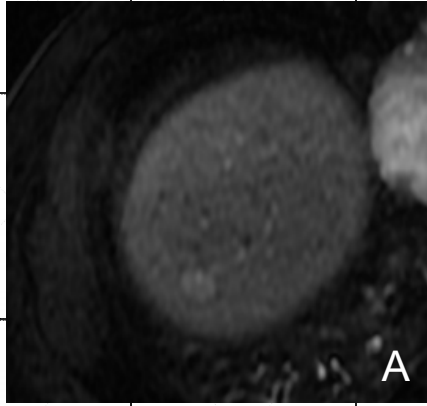
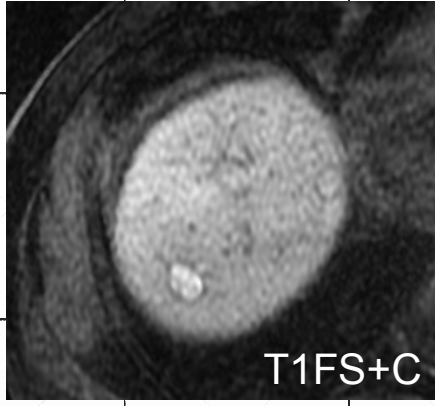
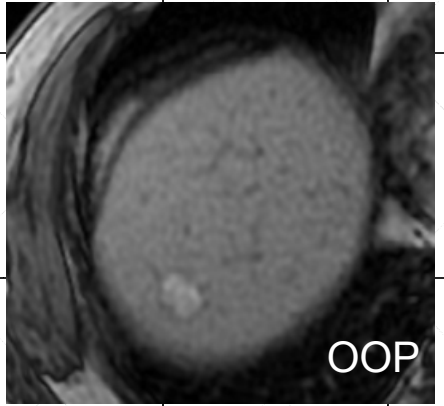
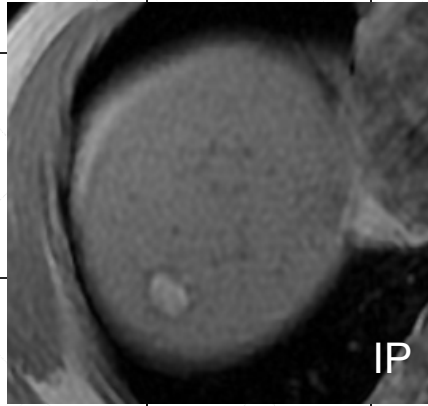
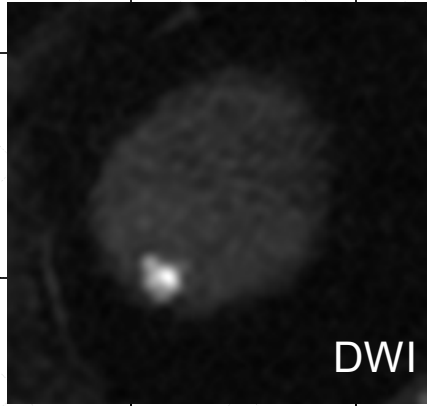
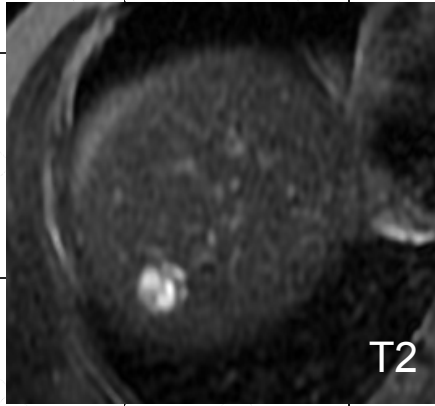
- 依照臨床時序，請大師模擬一線放射科醫師；於未知診斷，或者有限度臨床線索之情形下，進行閱片及解讀。
- 鑑別診斷為主要，確定診斷為次要。
- 目的在於學習大師之影像判讀邏輯思考。
- 針對肝膽影像判讀。
- 大師評論本院影像品質建議及改進。

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69 y/o, Male, HCV, RCC

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- 69 y/o, Male, HCV carrier noted for one year
- PHx: right kidney RCC s/p right nephrectomy (pT4N1M0, Stage 4) for 6 years, CT f/u every 3-6 mo with stable condition.
- Last CT follow up: 2018-03-29 (-)
- 2018-07-09 CT → 2018-08-18 MRI



A 1.5x1.2cm sized space-taking lesion in hepatic dome with hyperintensity on T1WI, central hyperintensity & peripheral iso- to mild hyperintensity on T2WI, poor contrast enhancement of the lesion on Gd-T1WI.

Differential diagnosis

Focal liver lesion with hemorrhage

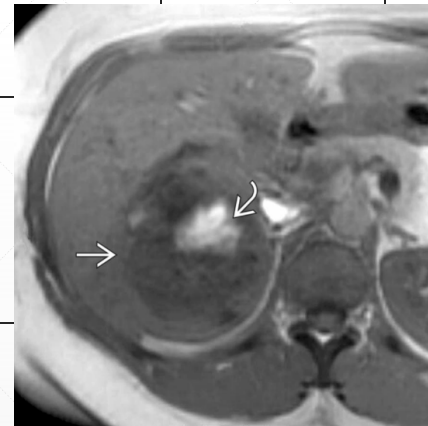
- Hypervascular metastasis (RCC)
- Hepatocellular carcinoma
- Hepatic adenoma
- Hemorrhagic hepatic cyst

Pathology

- Sono-guided biopsy: **poorly-differentiated carcinoma**
 - Positive for cytokeratin (AE1/AE3)
 - Focal and weak positive for EMA
 - Negative for CK7, CK20, CD34, Glypican-3, Hepar-1, Vimentin, CD10, CA9, PAX-8, CD56, chromogranin-A and Synaptophysin
 - Ki-67 proliferative index about 40%
 - The histopathologic and results of immunohistochemistry studies are not similar to the previous right renal specimen.

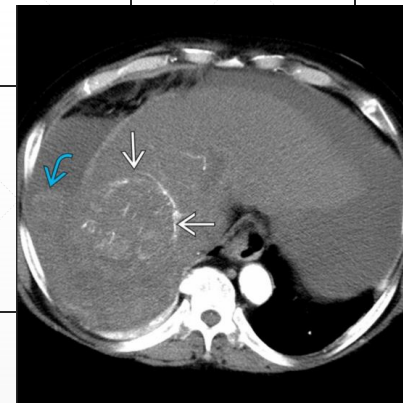
Discussion: Focal liver lesion with hemorrhage

- Hepatic adenoma
 - Foci of hemorrhage within tumor is common feature on MR
 - Spontaneous bleeding within or around hepatic mass in young female without cirrhosis is almost diagnostic of adenoma
 - Other signs of adenoma
 - Lipid or fat content
 - Multiplicity
 - Encapsulation



Discussion: Focal liver lesion with hemorrhage

- Hepatocellular carcinoma (HCC)
 - Spontaneous hemorrhage within tumor is uncommon
 - Spontaneous rupture through capsule is relatively common for large hepatocellular carcinoma (HCC)
 - Other signs of HCC
 - Occurrence within cirrhotic liver
 - Hypervascularity with washout
 - Encapsulation



Discussion: Focal liver lesion with hemorrhage

- Hepatic cyst
 - Clotted blood in cyst may be mistaken for tumor but will not show enhancement
- Metastases
 - Hemorrhage is uncommon, usually associated with hypervascular metastases
 - Melanoma, renal cell carcinoma (RCC), choriocarcinoma, thyroid carcinoma, teratoma, breast cancer, bronchogenic carcinoma

