

General Data

Gender: female

Age: 51-y/o

Residence: 台灣省宜蘭縣

Occupation: 白鐵工廠女工

General History-1

- This 51-y/o female patient is a victim with colon carcinoma s/p left hemicolectomy with end-to-end on 88/11/16.
Adenocarcinoma with pericolic adipose tissue invasion was impressed and she received chemotherapy with HDFL*26.

- 88/11/15 KUB
- Increased soft tissue density just beneath the gastric region with abdominal cut-off of the bowel gaseous near the splenic flexure of the T-colon, with mural thickening of the descending colon, **colon tumor mass** should be considered.



- **Normal plain abdominal film**
- The arrows point to the lateral borders of the psoas muscles. The renal outlines are obscured by the overlying colon.



- **Small bowel obstruction due to adhesion**
- The jejunal loops are markedly dilated. The jejunum is recognized by the presence of valvulae conniventes. Note the large bowel contains less gas than normal.



- **Large bowel obstruction due to carcinoma at the splenic flexure**
- There is marked dilatation of the large bowel from the caecum to the splenic flexure.



- 91/5/15 KUB
- For follow up.



- **Paralytic ileus.**
- There is considerable dilatation of the whole of the large bowel extending well down into the pelvis. Small bowel dilatation is also seen.



- **Volvulus of the caecum**
- The twisted obstructed caecum and ascending colon now lie on the left side of the abdomen and appear as a large gas shadow. There is also extensive small bowel dilatation due to obstruction by the volvulus.



- **Toxic dilatation of the large bowel due to ulcerative colitis.**
- The dilatation is maximal in the transverse colon. Note the loss of haustra and islands of hypertrophied mucosa. Two of these pseudopolyps are arrowed.



General History-2

- Last Sep., she suffered from abdominal floating and echo revealed right ovarian tumor. CEA and CA125 were within normal range at that time and she denied dysmenorrhea. Explore laparotomy, ATH+BSO, peritoneal washing were performed in 2001/9/24. Pathologic report showed a picture of intestinal type mucinous cystadenoma of borderline malignancy.

Upper Abdominal CT 90/9/13

- Large cystic mass with multi-septa was noted in the lower abdominal and compressed over the bladder.
- Conclusion: **Suggestive of ovarian CA**

HiSpeed CT/i SYS=CT01

A 116

TAIPEI MED. UNIVERSITY HOSP.

Ex: 17707

Req. No.: 300913011

Se: 3

LEN RUI-MEI

IC 1100.5

51 F 644109

Le: 24+C

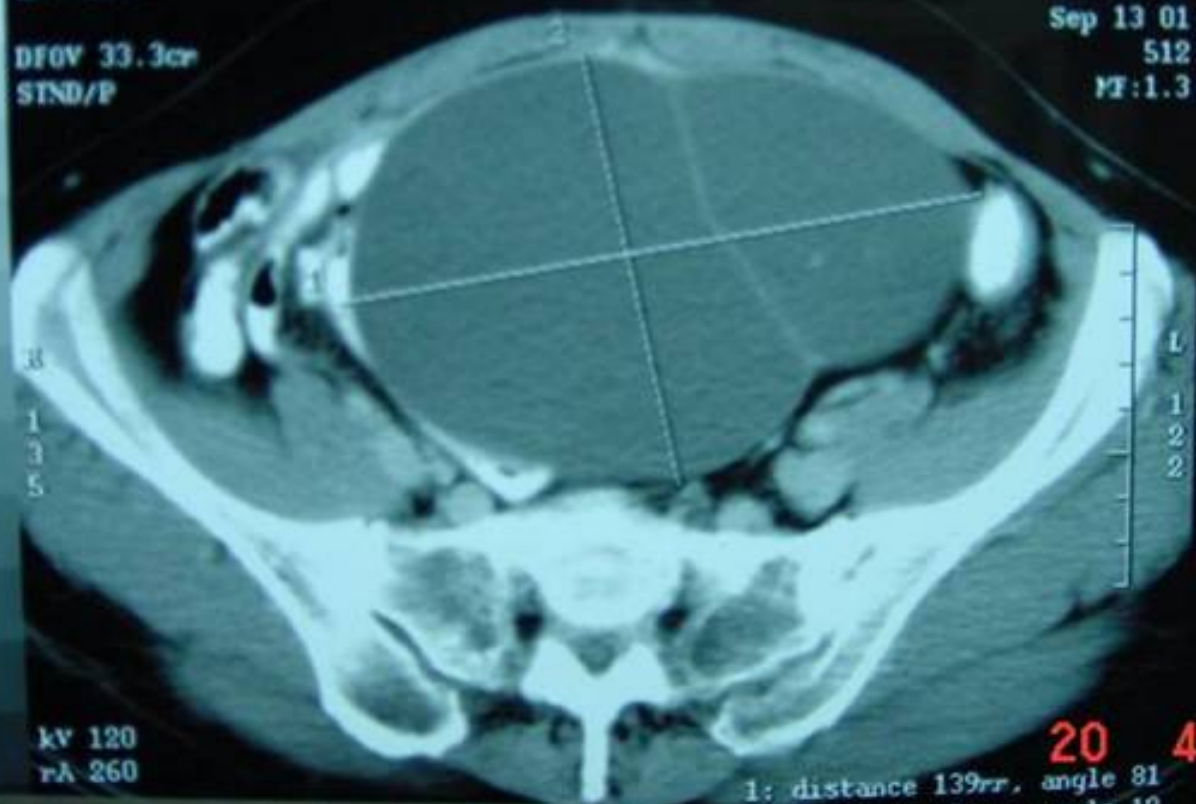
Sep 13 01

512

DFOV 33.3cm

PT:1.3

STND/P



kV 120

mA 260

20 4:33 PM

1: distance 139mm, angle 81

2: distance 94mm, angle 12

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OSP.
3011
-MEI
4109
3 01
512
:1.3

HiSpeed CT/i SYS=CT01
Ex: 17707
Se: 3
IC 174.5
Ir: 22+C
DFOV 33.3cm
STND/P

A 116

TAIPEI MED. UNIVERSITY HOSP.
Req Num: 300913011
LIN RUI-MEI
51 F 644109

Sep 13 01
512
MF:1.3

L
1
2
2

R
1
2
5

L
1
2
2

R
1
3
5

31rr2
31rr2
31rr2

kV 120
rA 260

Large
10.0

1: r 21.13, sd 6.63, a 50.3
2: r 17.36, sd 6.90, a 50.3

20 4:33 PM

064410



HiSpeed CT/i SYS=CT01

A 123

TAIPEI MED. UNIVERSITY HOSP.

Ex: 17707

Req Num: 300913011

Se: 2

LIN RUI-MEI

IC 165.5

51 F 644109

Ir: 13

Sep 13 01

DFOV 31.7cm

512

STND/P

MF:1.2

R

1
4
1

L

1
4
1

kV 120

mA 260

Large

10.0 mm

Tilt : 0.0

1.0 s 03:01:16-yy

1: m 15.95, sd 5.20, a 30.11, r 2

2: m 21.40, sd 6.11, a 30.11, r 2

20 4:34 PM



Ovarian carcinoma

- CT scan showing large partly cystic, partly solid ovarian carcinoma (arrows).
- The tumor, which contains irregular areas of calcification, has invaded the right side of the bladder.
- The rectum is indicated by a curved arrow.



Ovarian cyst

- CT showing similar sized cyst in right ovary (arrows).
- Note the thin wall and uniform water density centre.



Dermoid cyst

- CT scan shows oval shaped fat density of a dermoid cyst (D) containing calcified material (arrow).



Fig. 8.6 Dermoid cyst.

(a) CT scan shows oval shaped fat density of a dermoid
(b) Plain film of another patient showing well developed

omental and peritoneal metastases are difficult to detect

Abdominal CT 9/15/16

- This is a victim of colon CA, Duke C2, status post-operation and C/T, and ovarian cystadenoma with borderline malignant change, status post ATH + BSO.
- 3 cm cyst in right side ovary noted.
- No recurrent, no paraaortic LNs enlargement.

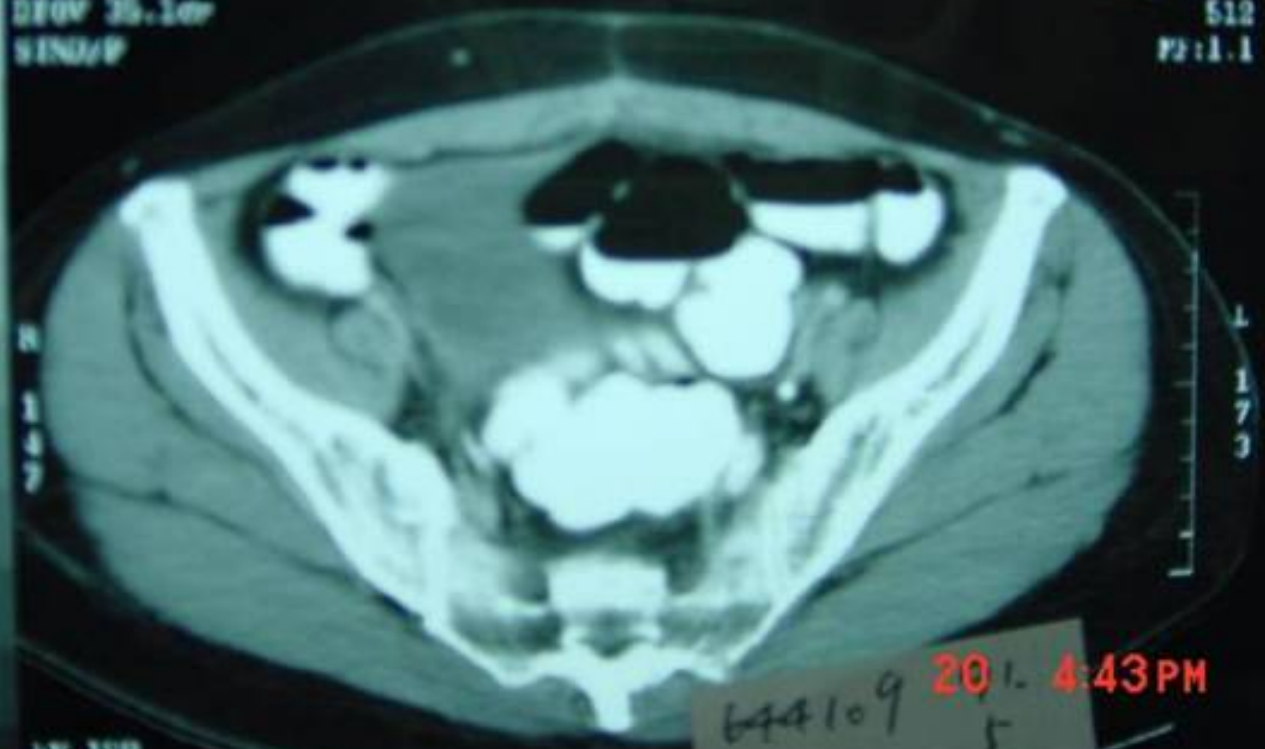
SP.
006
P11
109
02
612
1.1

HiSpeed CT/i SIS-CT01
Ex: 20901
Se: 3
IC 1440.0
In: 5400
DFOV 36.1cm
SIN/P

A 162

TAIPEI MED. UNIVERSITY HOSP.
Req No: 310515006
LIN HUI-P11
51 F 644109

May 15 02
512
P2:1.1



644109 201. 4:43 PM
5.

About colon cancer

- 5-year survival rate: C2 => 20~30%
- Approximately 80% of recurrences occur within 2 years of resection, most often in the form of hepatic metastases or local recurrence.