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BACKGROUND AND AIMS: Mesentery hemangioma is very rare. We will present one rare case of mesentery hemangioma with mainly cystic nature and intratumoral hemorrhage in CT and MRI which mimicking ovary or mesenteric cystic tumor. The correct diagnosis could not be made preoperatively.

METHODS: One 67 year old male suffered from abdominal pain and distension for 2 months. Physical examination revealed one movable tumor in right lower abdomen. CT scan showed one 14 cm cystic lesion in pelvis region. Internal high density with fluid-fluid level in precontrast CT scan could be found. Just mild focal wall thickening and enhancement in post contrast image. The other findings included some fine internal septum and two small calcification in lesions wall. This was a male patient, but the CT findings was similar to the ovary cystic tumor with intracystic hemorrhage often found in female. MRI study showed change position of the cystic tumor to right upper abdomen. Extensive mobility of the lesion indicated mesentery origin. The cystic lesion showed heterogenous signal intensity in T1WI and T2WI. One component inside the cystic lesion showed low signal in T2WI, high signal in T1WI. Old hemorrhage was considered. Like CT scan, just mild focal wall enhancement could be detected. The differential diagnosis may include mesenteric cyst, cystic lymphangioma, or extensive necrotic stromal cell tumor with intratumoral hemorrhage.

RESULTS: The pathological findings showed mesentery hemangioma with organized hematoma.

CONCLUSION: Atypical image pattern of hemangioma with extensive cystic nature, just mild focal wall enhancement and intracystic hemorrhage in CT and MRI made the diagnosis difficult. In female patient, ovary cystic tumor would be suspected based on the imaging findings and lesion location. But in male patient, mesentery origin cystic lesion was suspected. Comparising with CT scan and MRI study in this patient, extensive mobility of the lesion indicated mesenteric origin. When encountering a tumor in the mesentery with extensive cystic change and intratumoral hemorrhage, hemangioma should be added to the differential diagnosis.