

Hepatocellular carcinoma not associated with virus B and C and alcohol

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A 56-year old female was admitted to the hospital. The patient had been well until two months earlier, when diffuse abdominal pain developed, weakness and progressive loss of weight (≈ 11 kg). Laboratory studies were performed: Hematologic and blood chemical tests, hematocrit 36.4%, white-cell count 14.3 per mm^3 , differential count, neutrophils 62.7%, lymphocytes 24.5%, monocytes 7%, eosinophils 0.9%, platelets $401,000$ per mm^3 . Glucose 133 mg/dL. Normal urea nitrogen and creatinine

and electrolytes. Aspartate aminotransferase 50 U/liter, alanine aminotransferase 65U/liter, normal bilirubin, alkaline phosphatase 638 U/liter. Serologic tests: Hepatitis A, B and C antibodies negatives. The patient did not refers alcohol consumption. Abdominal enhanced computed tomography scan revealed a hypodense lesion compatible with liver tumor in the left lobe with extension to segments 4 and 8 (*Figure 1*). Also it was performed a magnetic resonance (*Figure 2*) which showed T2 a multilobed lesion that comprise the cava vein, aorta, and the right kidney.

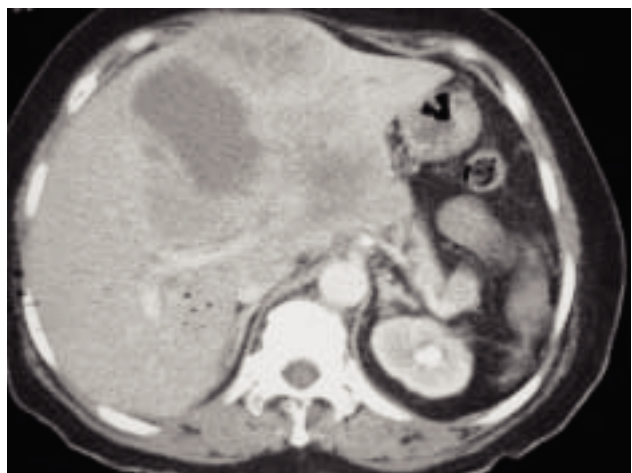


Figure 1.

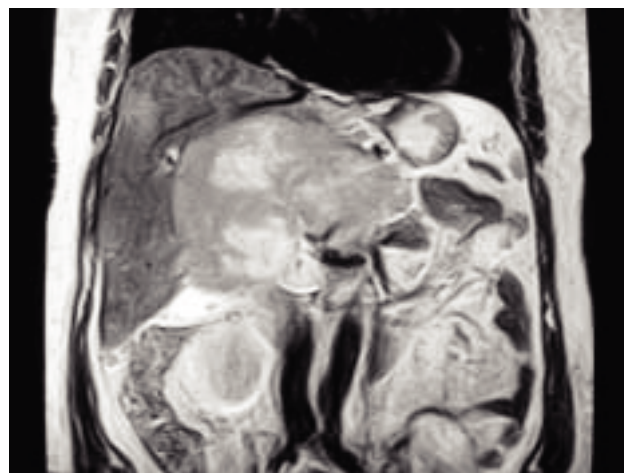


Figure 2.

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