



IMAGE OF THE MONTH

A rare case of hemangioma complicated with hepatic hemangiomatosis

Un caso raro de hemangioma complicado con hemangiomatosis hepática

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This was a 47-year-old man, with no previous medical history, who consulted for sudden onset of abdominal pain. Stony hepatomegaly was palpable occupying both hypochondriac regions and reaching the iliac crests, for which an abdominal ultrasound was performed, followed by a computed tomography scan (Fig. 1), which showed hepatomegaly measuring $37 \times 29 \times 23$ cm due to a space-occupying lesion in the right lobe of the liver compatible with giant cavernous haemangioma. This was confirmed by contrast magnetic resonance imaging (Fig. 2), which showed that the rest of the liver parenchyma was occupied by countless lesions, suggestive of hepatic haemangiomatosis with absence of normal liver parenchyma.

Haemangiomas are the most common type of benign liver tumour.^{1,2} They are often isolated incidentalomas, but they can also cause abdominal pain, bleeding, jaundice due to biliary compression and disseminated intravascular coagulation (Kasabach-Merritt syndrome).^{1,2}

Diffuse hepatic haemangiomatosis is the replacement of the liver parenchyma by haemangiomas, and often has associated systemic involvement.² The typical profile is a neonate with an abdominal mass and congestive heart failure.³ Diagnosis in adults without involvement of other organs, as in our case, is very unusual.³

In patients with symptomatic haemangiomas, surgical treatment should be considered,¹ and transplantation in



Figure 1 Cross-section of contrast-enhanced abdominal computed tomography showing hepatomegaly occupying both hypochondriac regions with giant cavernous haemangioma in the right liver lobe.

patients with unresectable lesions, or multiple haemangiomas in both lobes of the liver or those affecting the hilum.¹ In our case, liver transplant was decided on after histological confirmation of the lesion.

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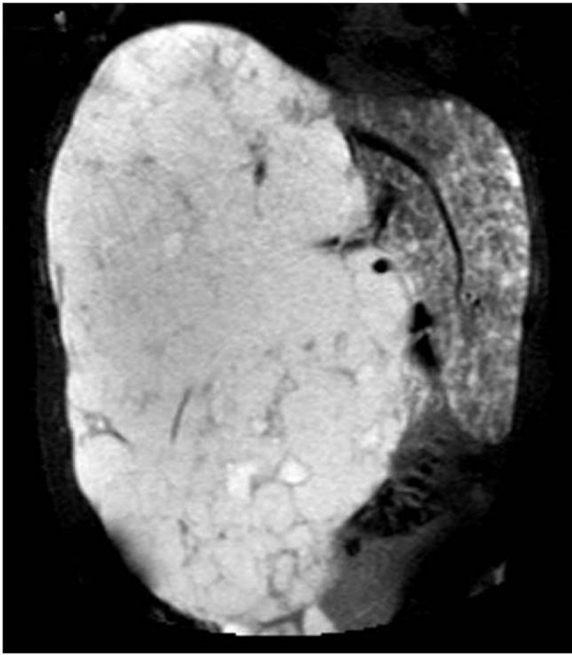


Figure 2 Coronal slice of contrast-enhanced MRI of the liver, T2-weighted sequence, showing hepatomegaly occupying both hypochondriac regions and reaching the iliac crest. The liver parenchyma is completely occupied by lesions compatible with haemangiomas.

References

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