Incidental Association of a Hepatic Vascular Tumor

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A 52-year-old woman was admitted with complaints of intermittent right abdominal quadrant discomfort and postprandial nausea and vomiting. Laboratory tests were all in the normal range except that she had anemia. On enhanced CT imaging, the classic hepatic cavernous hemangioma signs (white arrow) were observed, while the centre of the nodular lesion (yellow arrow) was not enhanced during all postcontrast scans (Fig. 1).

Surgical intervention revealed besides the hemangioma tissues, a 3×2cm, grey-white tumor. The histopathologic examination found hepatic epithelioid hemangioendothelioma with cavernous hemangioma. Microscopy demonstrated many eosinophilic bodies intracytoplasmically (hematoxylin-eosin, 400x) (Fig. 2). Immunohistochemical staining for CD31, CD34 and the factor VIII-related antigen (Fig. 3, 100x) was positive. The patient had an uneventful postoperative recovery and remains free of recurrence three years after operation.

Hepatic epithelioid hemangioendothelioma is a rare low-grade malignant vascular neoplasm and was first reported in 1984 by Ishak et al [1]. This association of a hepatic vascular neoplasm is rare. The progression depends on the stage or size of the tumor. Surgical resection or orthotopic transplantation is considered the best choice [2].

Our case illustrates that careful operation, excising all doubtful lesions is crucial for finding an incidental tumor and improving patient survival. The histopathologic examination is usually required to establish the definitive diagnosis.

References