

*Klaikeaw N***Case 1**

A 37-year-old man with HBsAg positive had developed 3 cm. liver mass without any symptoms. The alpha fetoprotein was not rising. The imaging findings and biopsy cannot provide a definitive diagnosis. The surgical resection was performed and pathologic section shows tumor composes of mature adipose tissue, smooth muscle cells and thick walled blood vessels with loss of elastic lamina. Smooth muscle cells are epithelioid or spindled with eosinophilic cytoplasm. Mitotic figures are rare.

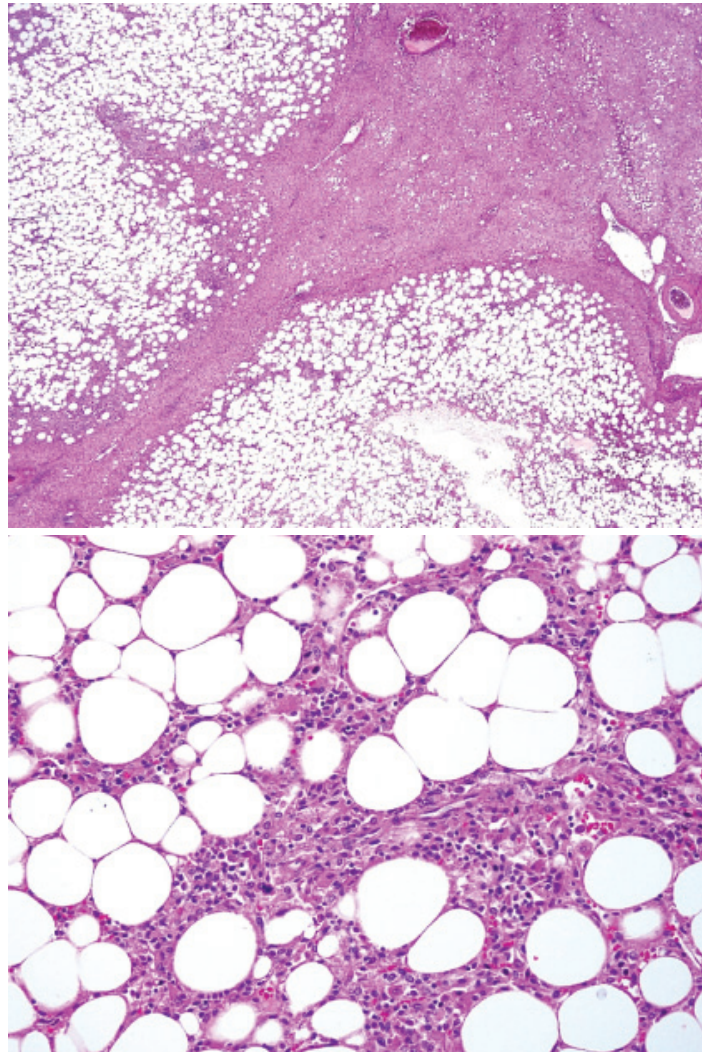


Figure 1.

What is the most likely diagnosis?

(Answer see page 164)

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Case 2

A 30-year-old male patient presented with dyspepsia and malaise. His physical examination revealed hepatomegaly. His ultrasonography show enlarged liver with mass. Liver biopsy shows eosinophilic abscess and granulomatous reaction containing Charcot-Leyden crystals.

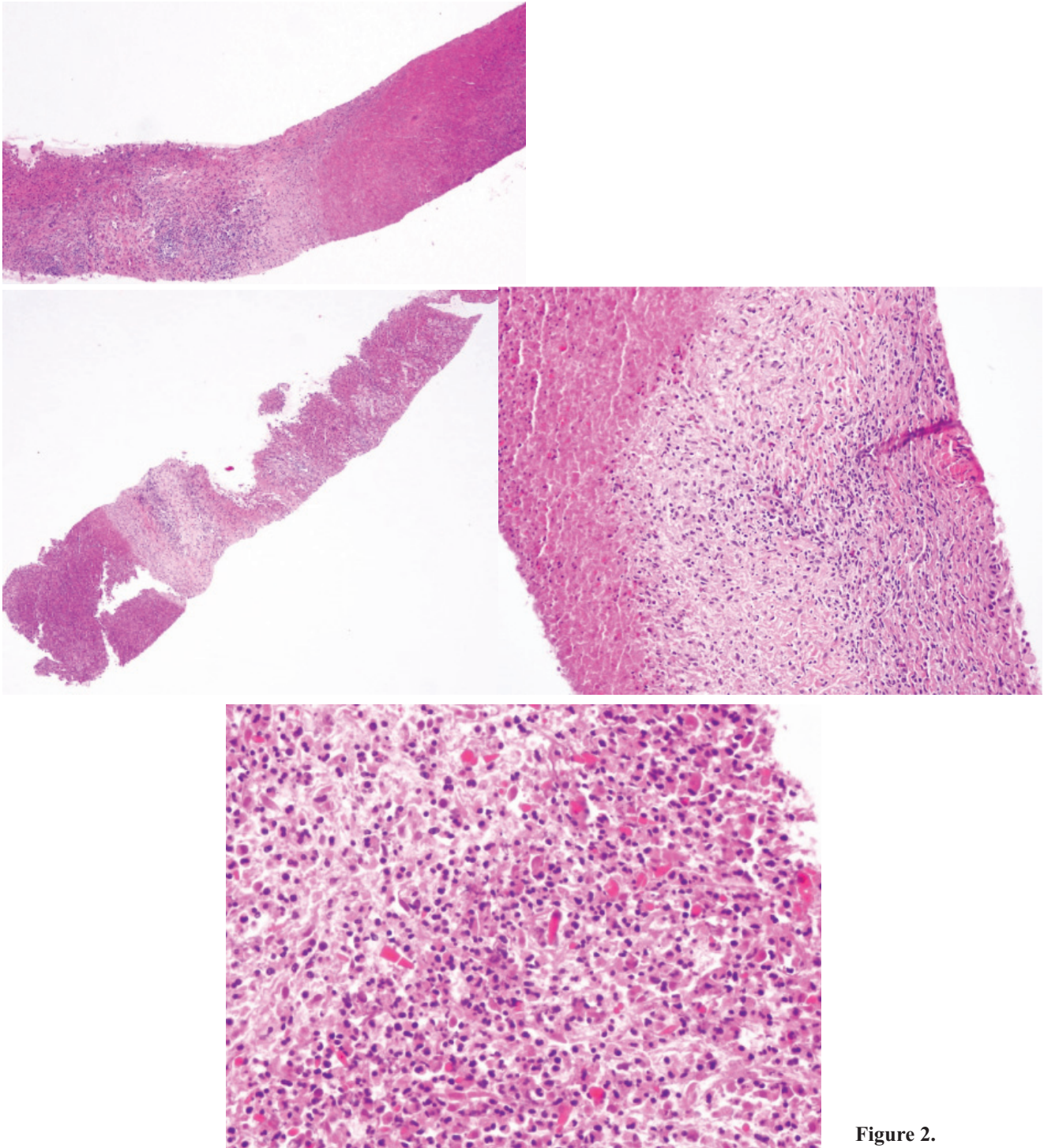


Figure 2.

What is the most likely diagnosis ?

(Answer see page 164)

Case 3

A 45-year-old female was presented with the symptom of generalized edema. She complained dyspnea, anorexia, nausea and epigastric discomfort. Her physical examination findings including neck vein engorgement, abdominal distension, hepatomegaly and pitting edema. The serum tests showed ALT 30 IU/L, AST 55 IU/L, ALP 398 IU/L and alb 3.8 g/dL. The results for HBsAg and anti-HCV were negative. Ultrasonography of liver showed diffuse coarse echo and hypoechoic pattern with hepatomegaly. Liver biopsy was performed and reported that there are diffuse eosinophilic material deposition in subendothelial lining sinusoidal spaces with positive birefringence of Congo red stain.

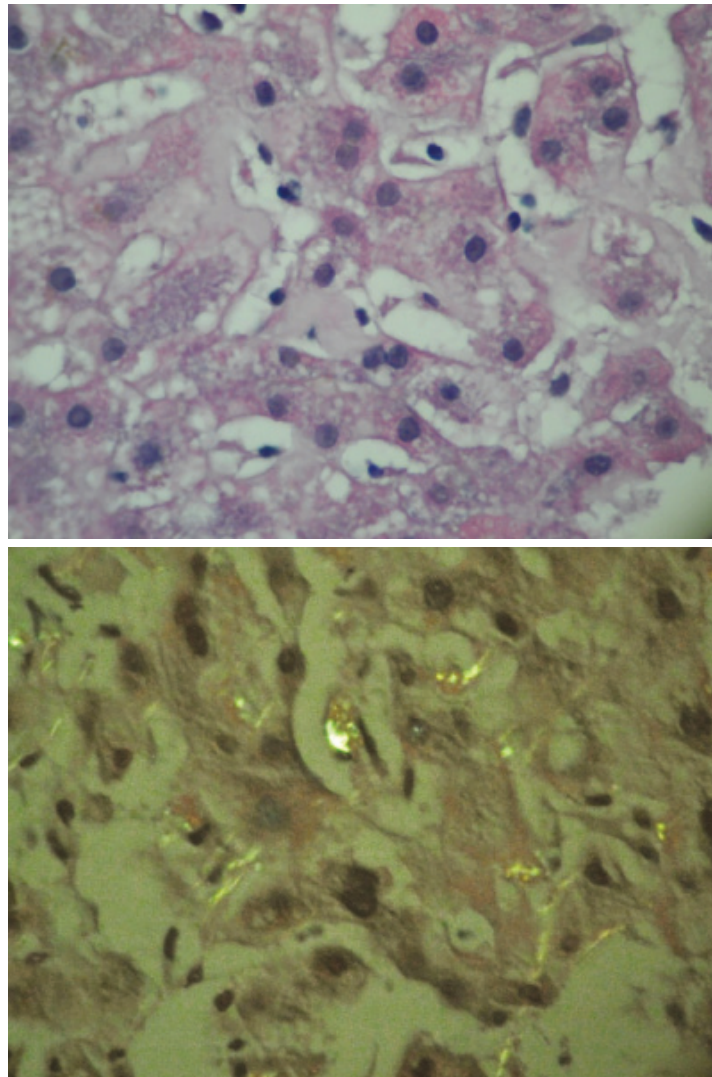


Figure 3.

What is the most likely diagnosis?

(Answer see page 164)

Answer for patho corner

- Case 1 = AML (angiomyolipoma) of liver
- Case 2 = most likely parasitic infestation
- Case 3 = Liver Amyloidosis