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## Two Cases of Hepatic Angiomyolipoma with Radiologic Similarity to Hepatocellular Carcinoma

Ho Guun Na, M.D., Yong Chan Lee, M.D., Young Jun Yun, M.D., Jae Yean Jung, M.D., Yong Suk Cho, M.D., Kwang Hyub Han, M.D., Chae Yoon Chon, M.D., Young Myoung Moon, M.D., Myeong Jin Kim, M.D.\* and Young Nyun Park, M.D. †

Departments of Internal Medicine, Radiology\*, and Pathology †, Yonsei University College of Medicine, Seoul, Korea

Hepatic angiomyolipoma (AML), a rare benign mesenchymal tumor, is composed of fatty tissue, proliferated blood vessels, and smooth muscle cells. Since the proportion of this three components is variable, radiologic and pathologic findings of the tumor can show different features, which makes its diagnosis difficult. On ultrasonography, it is usually a well defined hyperechoic mass and has occasional posterior enhancement of echoes as seen in hemangioma. On dynamic enhancement study, it shows not only prominent enhancement on the arterial-dominant phase and gradual hypoattenuation on the delayed phase, but also gradual and prolonged enhancement, and thus, it can be misdiagnosed as hepatocellular carcinoma or hemangioma. Positive reactivity for HMB-45, melanoma-specific antibody, makes the diagnosis possible and reactivity for smooth muscle actin confirms the diagnosis. We report two cases of hepatic AMLs, which were initially thought to be hepatocellular carcinomas because of early enhancement of the arterial phase and gradual hypoattenuation of the delayed phase on dynamic study of CT or MRI. One case was treated by chemoembolization of hepatic artery followed by hepatic resection, and the other was treated by hepatic resection after gun biopsy under ultrasound guidance. (Kor J Gastroenterol 2000;36:424 - 430)

Key Words: Hepatic angiomyolipoma, Dynamic enhancement study

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Tel: (02) 361-5428, Fax: (02) 393-6884

(angiomyolipoma)

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11 IU/L . PT 10.7 (100%), PTT 30.6 ,
             가
                                                       3.16 IU/ml
                                                        . HBsAg
                                                                      , anti-HBs Ab
                                               anti-HCVAb
                                                                                1.8 cm
          가
                                                                          가
                                                                                      (Fig.
                                               1A).
                                                                                 (Fig. 1B),
                            1,
                                                 (adriamycin 30 mg, lipiodol 4 cc, gelfoam)
                        가
                                                    . 4
                                        가
            , B
                     C
                                                      lipiodol
            1
                                               1.5 cm
   1.
           1
                                                         가
                                                                                    30%
  64
          가
   , 9
                                                                 HMB45
                                                                         smooth muscle actin
                       , 가
                                         В
                                                     (Fig. 2).
                                                    2.
                                                         2
                                                 54
                                                          가 1
                                                                          가
                                                                                   , 5
                                                                                    , 가
                       4080/mm3,
                                       12.7
g/dL,
               38.0%,
                            254,000/mm3
                             83 mg/dL,
            3.7 mg/dL, BUN 11.3 mg/dL, crea-
tinine 0.9 mg/dL, 5.4 g/dL, 3.5 g/dL,
            133 mg/dL, AST 17 IU/L, ALT 15
IU/L, ALP 38 IU/L,
                    0.4 mg/dL, -GT
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Fig. 1. Radiologic finding of abdominal ultrasonography (A) and dynamic CT scan (B) of case 1. (A) Abdominal ultrasonography shows a well-defined hyperechoic mass of oval shape about 1.8 cm in diameter at the segment VIII of the liver. (B) Dynamic CT shows a hepatic mass that appears homogenously enhanced on the arterial phase (up) and hypoattenuated on the delayed phase (down).

154 mg/dL, AST 12 IU/L, ALT 10 IU/L, ALP 48 IU/L, 0.6 mg/dL,-GT 10 IU/L . PT 12.8 (100%), PTT 41.7 , <2 IU/ml . HBs Ag , anti-HBs Ab anti-HCV Ab  $5.7 \times 3.9$  cm 가 8 1.5T (Horizon, GE Medical systems, WI, U.S.A.) (spoiled gradient echo) (inphase) (TR= 210 msec, TE=4.2 msec, flip angle [FA]=90°, receive bandwidth [RB]=31.3 kHz, field of view [OV]=28 × 21 cm, slice thickness/gap=10/0 mm, matrix size=256 x 128, 1 acquisition, scan time=22

(opposed phase)

(TR=150 msec, TE=1.5 msec,

Fig. 2. Immunohistochemical staining of case 1. The tumor is immunohistochemically positive for HMB-45.

8,080/mm3, 13.0 g/dL, 38.7%, 298,000/mm3 68 mg/dL, 8.7 mg/dL, 3.2 mg/dL, BUN 8.9 mg/dL, creatinine 0.7 mg/dL, 6.9 g/dL, 4.5 g/dL,

Fig. 3. Abdominal MR imaging of case 2. (A) Abdominal MRI shows a hepatic mass that has high signal intensity on T1-weighted inphase spoiled gradient echo (TR=210 msec, TE=4.2 msec, FA=90°) (left) and low signal intensity with ring cancellation artifact on opposed phase image (TR=150 msec, TE=1.5 msec, FA=90°) (median) and high signal intensity on T2-weighted breath-hold fast spin-echo (TR=3000 msec, effective TE-84 msec) (right). (B) Dynamic MRI shows a hepatic mass that appears well enhanced on the early arterial phase (left) and less on the delayed phase (right).

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FA=90°, RB=31.3 kHz, FOV=28 x 21 cm, slice
                                                                    , 8
thickness/gap=10/0 mm, matrix size=256 × 128, 1
acquisition, scan time=16 sec)
                                                               가
                                                                      , HBsAg
                                                                                       , anti-HBsAb
                T2
                                                         , anti-HCVAb
                                       (fast spin-
                                                            가
echo)
          (TR=3000 msec, effective TE=84 mesc,
RB=6 kHz, echo train=11, FOV=28 x 21 cm, slice
                                                                                   gun biopsy
thickness/gap=8/2 mm, matrix size=256 \times 128, 1
acquisition, scan time=54 sec)
                                                              , HMB45
                                                                         smooth muscle actin
                                        (gadopen-
  (Fig. 3A). 0.1 mmol/kg
tetate dimeglumine, Magnevist<sup>®</sup>,
                                                                                가
                                   Schering AG,
Germany)
                                                                                                8
                                                                                          가
30
                   ), 1
                         (
                                   ), 5
                                                            5 \times 4 cm
                                                                 가
 )
          (Fig. 3B),
                                                              gun biopsy
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. 11 6 가 .12 1976 Ishak3 가 가 90 가 3 467 가 7:3 , 10-79 가 40 , B 가 . 0.3-36 cm 8 cm .2 가 40-50% 5.8% mass level single , 3가 level dynamic CT가 10% 90% .8 -20 HU 50% .13 , 가 HMB45 , smooth muscle actin . 14 가 가 가 가 10 2 HMB45 smooth muscle actin ,10 40-80 11 가 15 1 가 2

gun biopsy

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- Nonomura A, Minato H, Kurumaya H. Angiomyolipoma predominantly composed of smooth muscle cells: problems in histological diagnosis. Histopathology 1998;33:20-27.
- Hoffman AL, Emre S, Verham RP, et al. Hepatic angiomyolipoma: two case reports of caudate-based lesions and review of the literature. Liver Transpl Surg 1997;3:46-53.
- Ishak KG. Mesenchymal tumors of the liver. In: Okuda K, Peters RL, eds. Hepatocellular carcinoma. New York: Wiley Medical, 1976:247-307.

 Lee YW, Chang JC, Byun WM, et al. Angiomyolipoma of the liver: a case report. J Kor Radiol Soc 1993;29:475-479

- Kim YB, Suh JS, Park TR, et al. A case of huge solitary angiomyolipoma of the liver. Kor J Intern Med 1995;10:73-77
- Park ER, Kim HR, Lee KA, et al. A case of hepatic angiomyolipoma diagnosed by fine-needle aspiration biopsy. Kor J Gastroenterol 1999;33: 859-863.
- Kyokane T, Akita Y, Katayama M, Sato T, Shichino S, Nimura Y. Multiple angiomyolipoma of the liver. Hepatogastroenterology 1995;42:510-515.
- Irie H, Honda H, Kuroiwa T, et al. Hepatic angiomyolipoma: report of changing size and internal composition on follow-up examination in two cases.
   J Comput Assist Tomogr 1999;23:310-313.
- Yeh HC, Klion FM, Thung SN, Worman HJ. Angiomyolipoma: ultrasonographic signs of lipomatous hepatic tumors. J Ultrasound Med 1996; 15:337-342.
- Yoshida H, Itai Y, Ohtomo K. Small hepatocellular carcinoma and cavernous hemangioma: differentiation with dynamic FLASH MR imaging with Gd-DTPA. Radiology 1989;171:339-342.
- 11. Ahmadi T, Itai Y, Takahashi M, et al. Angiomyolipoma of the liver: significance of CT and MR dynamic study. Abdom Imaging 1998;23:520-526.
- Sakamoto Y, Inoue K, Ohtomo K, Mori M, Makuuchi M. Magnetic resonance imaging of an angiomyolipoma of the liver. Abdom Imaging 1998;23:158-160.
- Chaib E, Pugliese V, Garbugio-Filho V, Saad WA, Pinotti HW. Angiomyolipoma of the liver. Int Surg 1996;81:320-322.
- 14. Cha I, Cartwright D, Guis M, Miller TR, Ferrell LD. Angiomyolipoma of the liver in fine-needle aspiration biopsies: its distinction from hepatocellular carcinoma. Cancer 1999;87:25-30.
- 15. Sawai H, Manabe T, Yamanaka Y, Kurahashi S, Kamiya A. Angiomyolipoma of the liver: case report and collective review of cases diagnosed

 $\textbf{430} \quad \text{ The Korean Journal of Gastroenterology: Vol. 36, No. 3, 2000}$ 

from fine needle aspiration biopsy specimens. J Hepatobiliary Pancreat Surg 1998;5:333-338.

16. Guidi G, Catalano O, Rotondo A. Spontaneous

rupture of a hepatic angiomyolipoma: CT findings and literature review. Eur Radiol 1997;7:335-337.