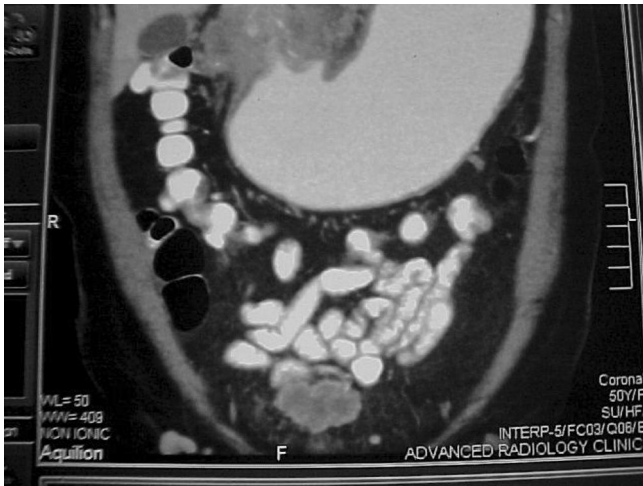


QUIZ 1

Submitted by: Dr. Hina Javed, Dr. Shehzad Baber Kureshi

Advanced Radiology Clinic, Karachi, Pakistan

PJR April - June 2009; 19(2): 68-69



A



B

Questions

- Q.1 What are the C.T findings in image A?
- Q.2 What are the C.T findings in image B?
- Q.3 What is your possible diagnosis?
- Q.4 What other tumors can metastasize to ovaries?

QUIZ 1

Answers

Answer 1: There is evidence of soft tissue density mass involving the gastric pylorus. 1st and 2nd parts of the duodenum. The mass is associated with marked asymmetric circumferential thickening of its walls with luminal narrowing and distortion. The mass is abutting and compressing the pancreatic head with loss of intervening fat planes and also the hepatic flexure of the colon. There is presence of multiple enlarged lymph nodes in the perigastric region and also in the porta hepatis.

Answer 2: There is evidence of soft tissue density masses involving both ovaries. There is also presence of peritoneal masses subjacent to the anterior abdominal wall in the hypogastric region. Findings are consistent with metastatic peritoneal implants.

Answer 3: Primary stomach tumors with metastasis in both ovaries, these findings are consistent with Krukenberg's Tumor.

Answer 4: In pathologic studies of ovarian metastases, bilateral ovarian lesions occurred in 33%–64% of those from breast cancer, in 58%–71% from colon cancer, in 67%–83% from gastric cancer, and in 80% from lymphoma. Ovarian metastases from endometrial cancer are more likely to be unilateral, however, with only 14%–21% reported as bilateral.

References

1. Demopoulos RI, Touger L, Dubin N. Secondary ovarian carcinoma: a clinical and pathological evaluation. *Int J Gynecol Pathol* 1987; **6**:166-75.
2. Takeshima N, Hirai Y, Yano K, Tanaka N, Yamauchi K, Hasumi K. Ovarian metastasis in endometrial carcinoma. *Gynecol Oncol* 1998; **70**:183-7.