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Single focal hepatic lesions: keep in mind lymphoma and myeloma

Abstract:

Background: A solitary liver mass with negative solid-tumor markers (AFP/CEA/CA19-9) and no chronic liver disease should raise suspicion for hematologic malignancy, especially primary hepatic lymphoma (PHL) or, far less commonly, hepatic plasmacytoma (MM) in the setting of multiple myeloma. Imaging (abdomen CT, abdomen MRI and liver CEUS) is often suggestive, but not specific; biopsy is mandatory for a definitive diagnosis.

Methods: A narrative literature review was performed to summarize the epidemiology, imaging features, histopathology, and management of single focal hepatic lesions associated with lymphoma and multiple myeloma. We presented, also, two of our cases.

Clinical Presentation of Hematological Liver Lesions:

Most patients were asymptomatic or with non-specific symptoms such as abdominal discomfort or weight loss. Often, the patients are middle-aged men; the majority of cases of PHL are diffuse large B-cell type. Laboratory tests were often unremarkable, with AFP, CEA, and CA 19-9 typically within normal limits. In hepatic plasmacytoma, a history of MM or elevated serum paraprotein levels can aid diagnosis. These lesions are usually hypovascular on CT, MRI, and CEUS, but documented hypervascular cases exist; do not over-rely on enhancement pattern.

Conclusions: MM e PHL can masquerade as HCC or cholangiocarcinoma, including periportal “soft-tissue cuffing.” Maintain suspicion when markers are negative and the liver is otherwise “healthy.” Ancillary clues are: splenic lesions, hepatosplenomegaly, vessel encasement without thrombosis, and minimal biliary obstruction favor hematologic malignancy. PHL and MM lesions are a special alert from the doctors taking care of the patient with single hepatic lesion, especially without cirrhosis. Probably in the future, diagnostics with artificial intelligence will be able to support these unusual diagnoses.

Keywords: solitary liver mass, primary hepatic lymphoma, hepatic plasmacytoma, CEUS, MRI, CT abdomen.

Biography: Dr. Daniela Tirotta studied Internal Medicine at the Ancona University, Italy. She worked as an internist in the Rimini AUSL, then in the Forlì AUSL. She attended the Clinical Governance master's degree in Internal Medicine, at the Carlo Cattaneo University, Milan. She has published more than 25 research articles in SCI (E) journals, HI 15.