



2025

KARNATAKA RADIOLOGY EDUCATION PROGRAM

CASE PRESENTATION



CASE 1



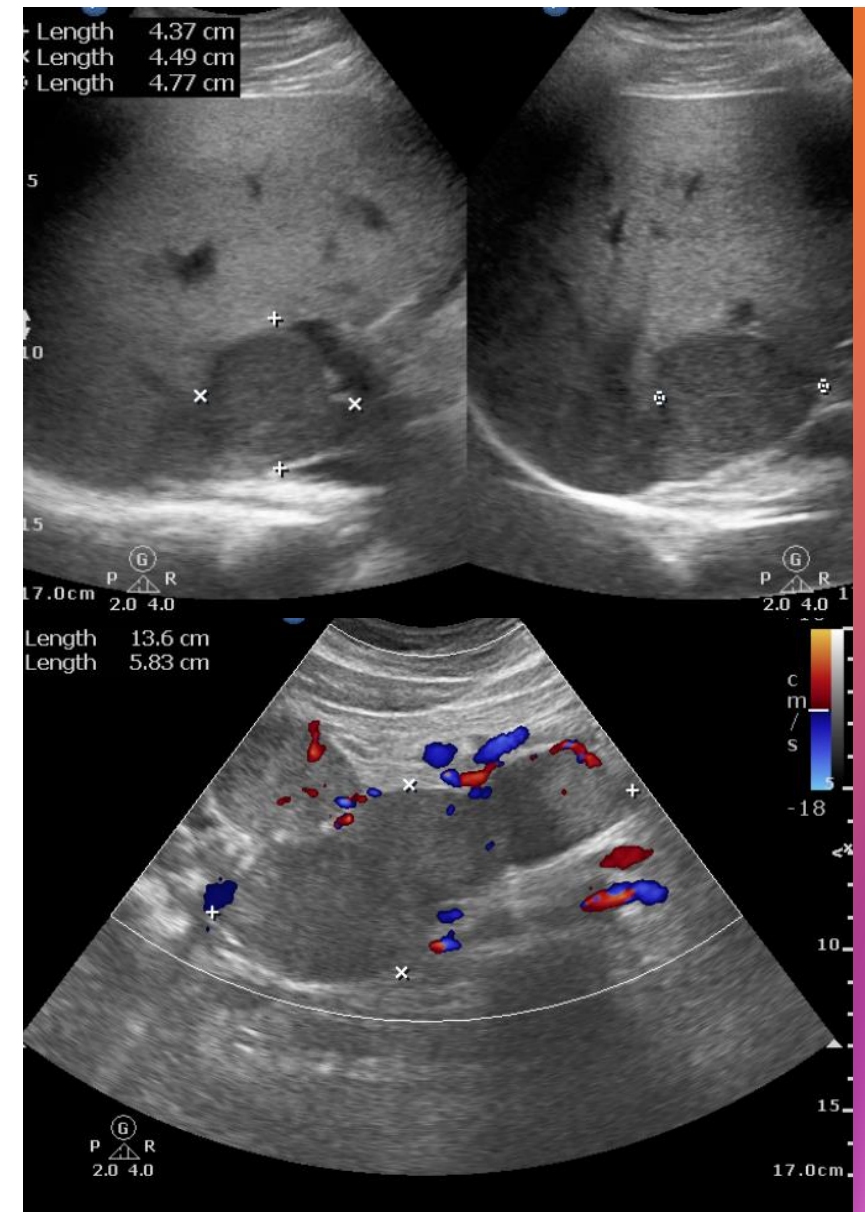
- 32 yr male

- c/o

abdominal bloating, dyspepsia, constipation,
occasional black colored stools x 3 years

- Previously rx for H pylori gastritis
- Past h/o appendectomy
- No other comorbidities
- Planned for USG

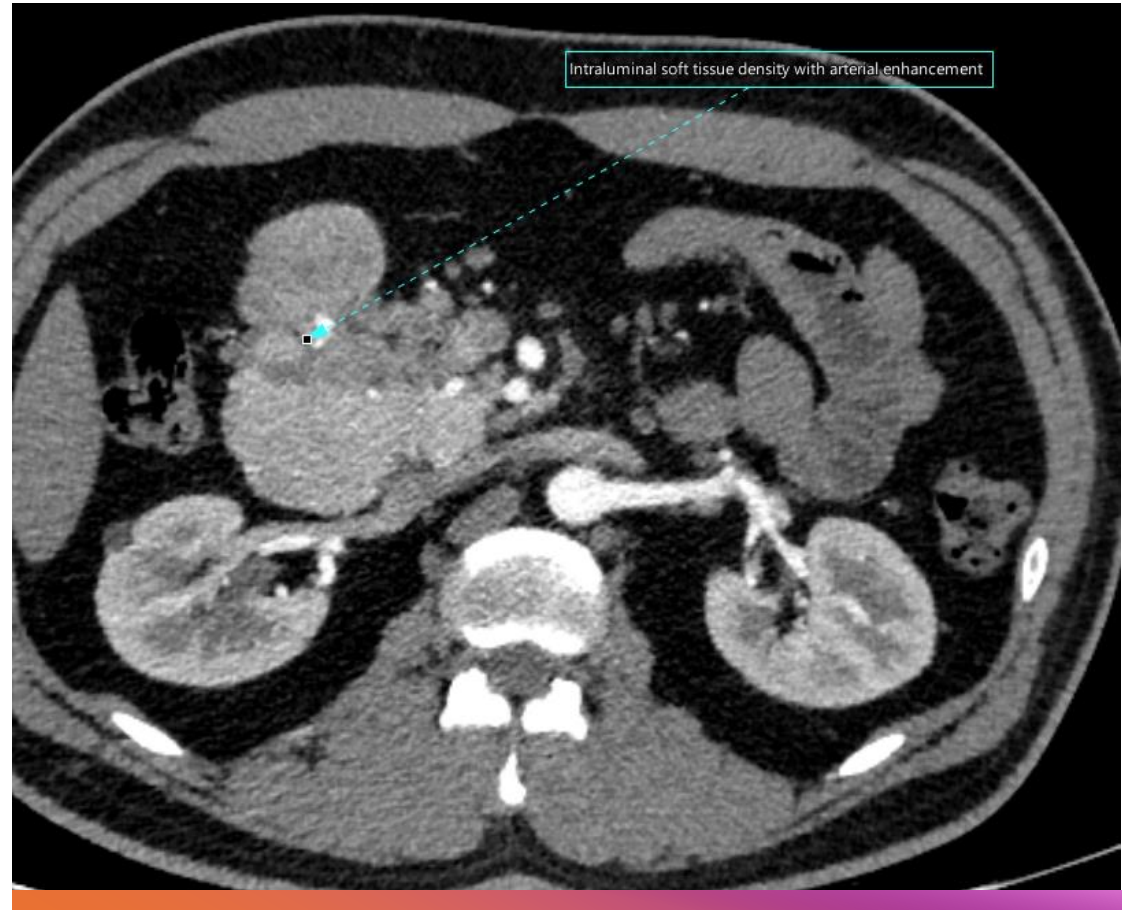
- USG:
- Well defined hypoechoic mass showing vascularity in:
 - segment VI of liver
 - retroperitoneum



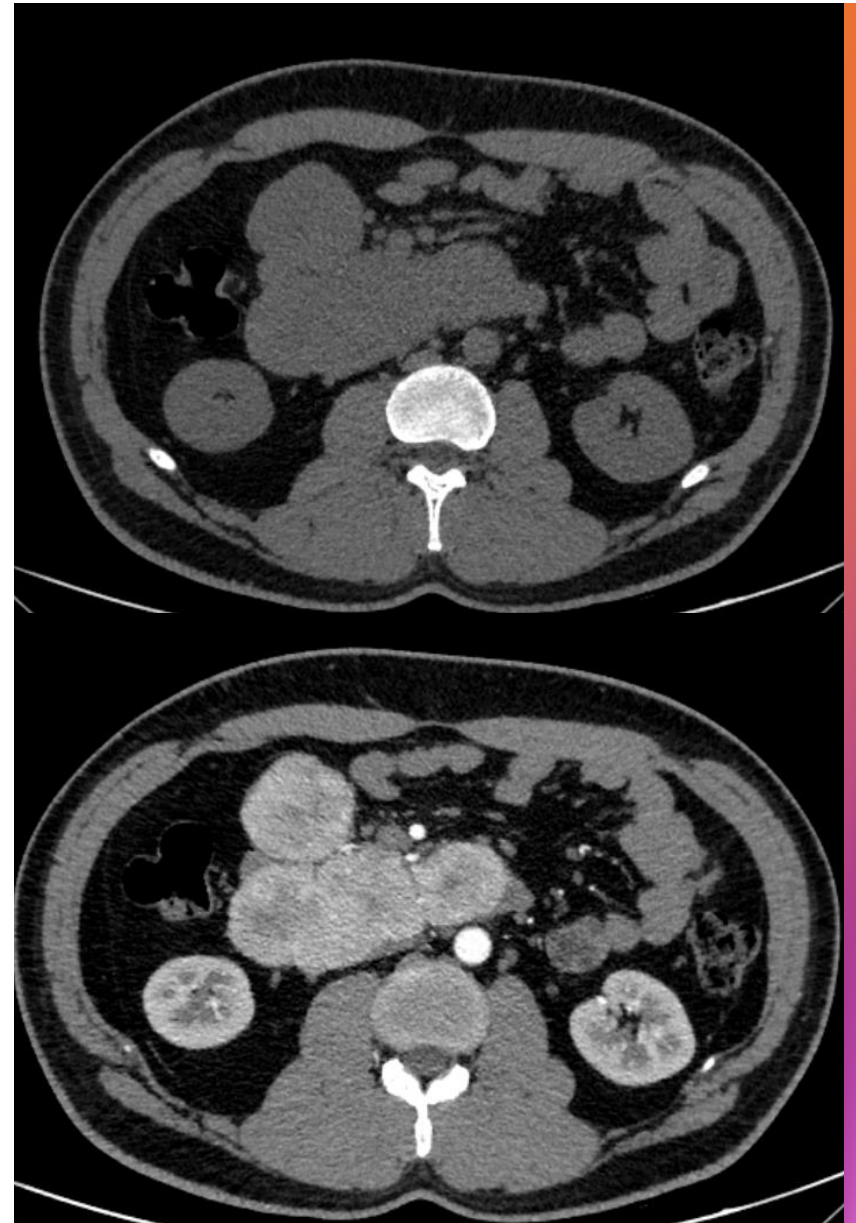
- CECT abdomen was recommended for further evaluation

CT Findings

- Intra luminal soft tissue density mass showing homogenous arterial enhancement in D2 segment of duodenum



- 3 well defined hypodense mass with central decreased attenuation showing heterogenous arterial enhancement with central non enhancing areas noted in inframesocolic space supplied by branches of SMA, of concern for omental metastasis.
- No evidence of invasion to adjacent structures



- Hypodense lesion with peripheral arterial enhancement and central non enhancing areas noted in seg V of liver, suggestive of hepatic metastasis



- Diagnosis:

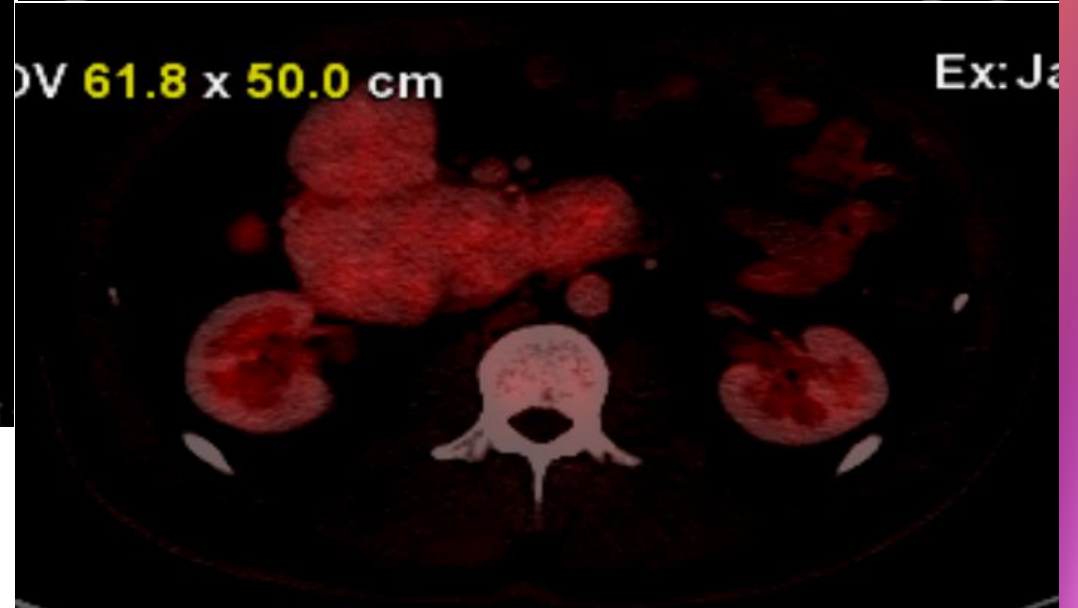
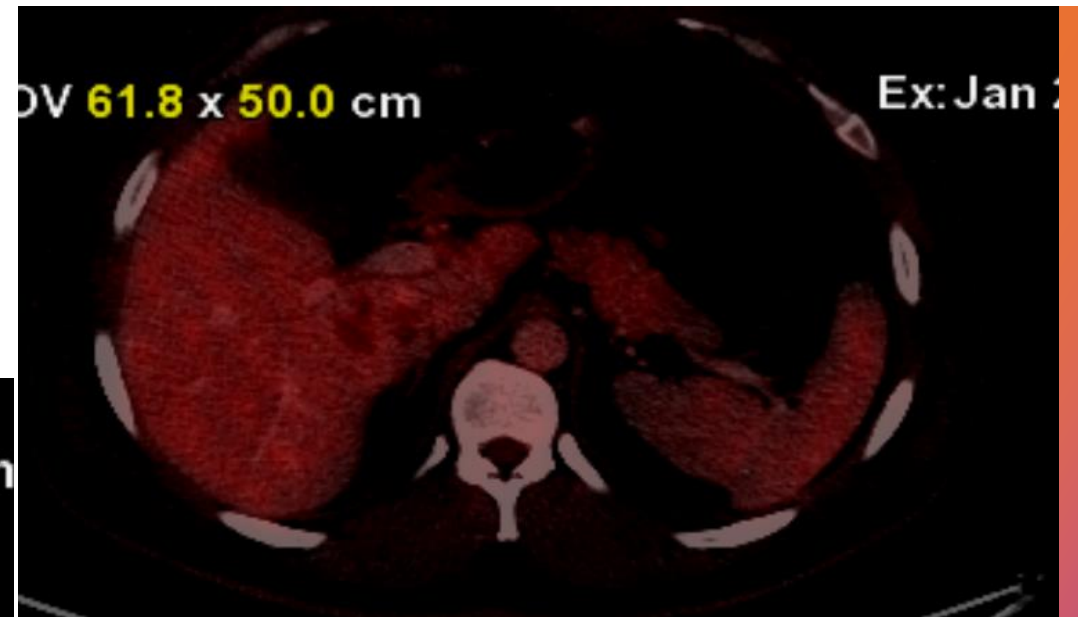
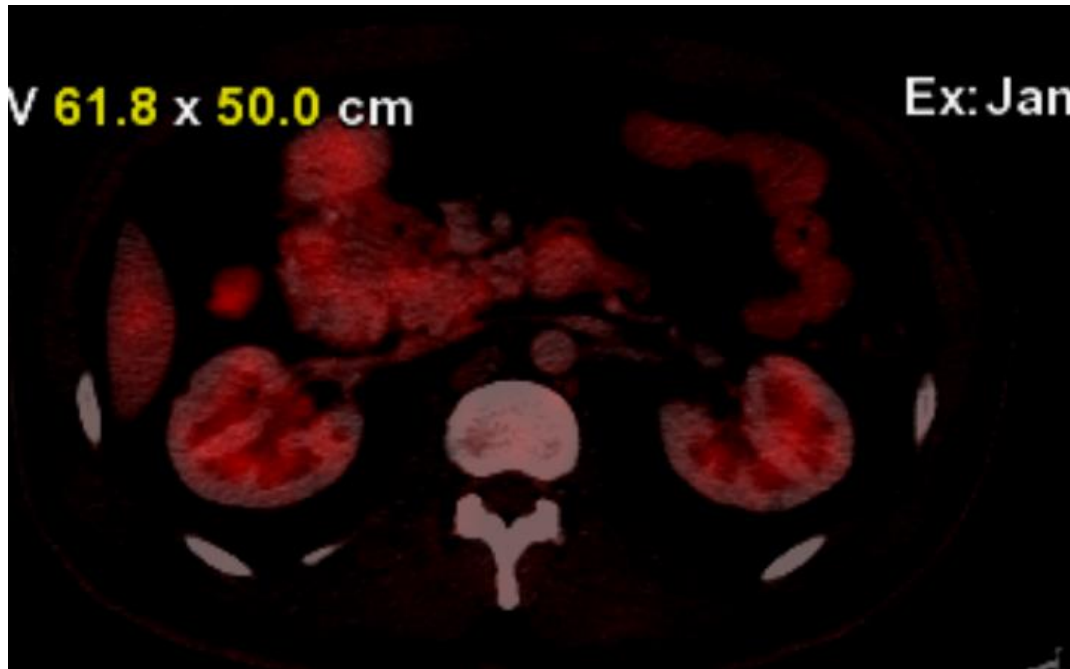
Duodenal NET with hepatic and omental metastasis.



- Patient planned for PET CT f/b endoscopic USG guided biopsy



- PET CT findings



Endoscopic USG guided biopsy

- Nodular lesion in D2 segment
- Well differentiated neuro endocrine tumour, Grade I
- Immunohistochemistry:
+ve for pancytokeratin, synaptophysin, chromogranin A & CD 56



- Planned for surgery

Whipple procedure (pancreaticoduodenectomy)

Hepatic metastatectomy

- Lost to follow up

