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An enlarging abdominal mass

J Torkington, E R A Darrah, B O'Riordan

A 69-year-old farmer's wife presented with a 3-month history of a swelling over the lateral abdominal wall. Examination by her general practitioner suggested a diagnosis of lipoma but the lump grew rapidly over the ensuing weeks and the possibility of malignant change was raised. Therefore a CT scan was performed (figure).

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Figure Abdominal CT scan

Questions

- 1 Describe the CT scan appearances.
- 2 Suggest the most likely diagnosis?
- 3 How does this condition normally present?

Answers

QUESTION 1

The CT scan shows a large loculated, partially solid, partially cystic mass involving the abdominal wall and the right lobe of the liver. Calcification of the wall of the cyst is present, as are several smaller cysts.

QUESTION 2

The heterogeneity of the cyst and the local invasion would suggest a malignant process. However, the cyst wall calcification and the presence of daughter cysts is pathognomic of hydatid disease.

QUESTION 3

Hydatid disease typically presents either as an incidental finding (35%) when calcification in the wall of a cyst is seen on a plain abdominal X-ray or with right upper quadrant pain (66% of those with symptoms), with or without a palpable mass (39% of those with symptoms).¹

Less common presentations relate to complications of hydatid infection. These include infection of cyst (7%), intrabiliary rupture (3.5–13%) and anaphylactic shock (0.4%).^{1,2}

Pleural complications with rupture through the diaphragm are well documented in 5–22% of cases.³ Musculoskeletal and direct skin involvement are rare, as is fistula formation to the duodenum or colon.^{3–5}

Discussion

Incision and drainage of an infected hydatid cyst eroding through the abdominal wall was performed. Large volumes of pus and membranes were evacuated and the wound left open. The patient was commenced on albendazole.

Histological examination of the membranous fragments showed the typical hooklets and cysts of hydatid disease and serological tests confirmed antigens against *Echinococcus granulosus*. The wound was regularly cleaned and left to heal successfully by secondary intention.

Final diagnosis

Hydatid disease.

Keywords: hydatid disease; echinococcus

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