

Lipoma Mimic a Presentation of Atypical Lipomatous Tumor

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INTRODUCTION:

Atypical Lipomatous Tumor (ALT) is a locally aggressive mesenchymal neoplasm composed either entirely or partially of an adipocytic proliferation showing at least focal nuclear atypia in both adipocytes and stromal cells. Occurs predominantly in middle age adults, with peak incidence between fourth and fifth decades of life. ALT represent the largest subgroup of adipocytic malignancies accounting for 40-45% of all liposarcoma.

REPORT:

A 59 year old gentleman with no known medical illness presented with non tender mass over his right palm. Rapidly growing for the past 1 year. Complains of difficulty making a fist which is inhibiting his daily life activities. He had no previous trauma or surgery done and denies loss of appetite/ weight. On physical examination a firm non pulsatile mass palpable over right palm measuring 6x4 cm. No notable skin involvement and the mass appeared not fixed to adjacent bony structures. No sensory deficit identified and axillary lymph node cannot be palpated.

Proceeded with plain MRI right hand, which demonstrated a lobulated lesion with fatty signal intensity at the palmar aspect of right hand measuring 6.0 x 3.0 x 6.3cm (W X AP X CC). No calcification or cystic component within, no marrow edema of the visualized bones. Features in keeping with right palmar lipomatous tumor, atypical lipomatous tumor needs to be considered.

The operation, excision biopsy of right palm tumor was carried out. Complete en bloc tumor resection was successful. The gross specimen consisted of yellow tissue measuring 60x 55x 25 mm with lobulated, rubbery, rather well-circumscribed surfaces. HPE findings was in keeping with lipoma – benign tumor composed of lobules of adipocytes separated by fibrous septa. Post operatively, full hand function

regained and wound well healed with no neurological deficit.

Figure1 : MRI findings

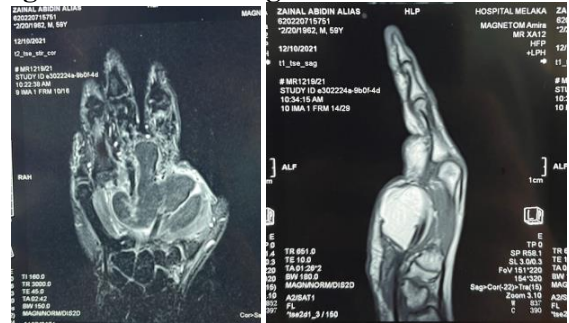


Figure 2 : Intraoperative findings



CONCLUSION:

Distinguishing between lipoma and ALT can be difficult based on MRI alone. Because of differences in treatment, prognosis, and long-term follow-up, it is important to histologically distinguish simple lipoma from ALT.

REFERENCES: 1. Gaskin C. M., Helms C. A. Lipomas, lipoma variants, and well-differentiated liposarcomas (atypical lipomas): results of MRI evaluations of 126 consecutive fatty masses. *AJR. American Journal of Roentgenology*. 2004;**182**:733–739