

MICOD – 15/04/2024

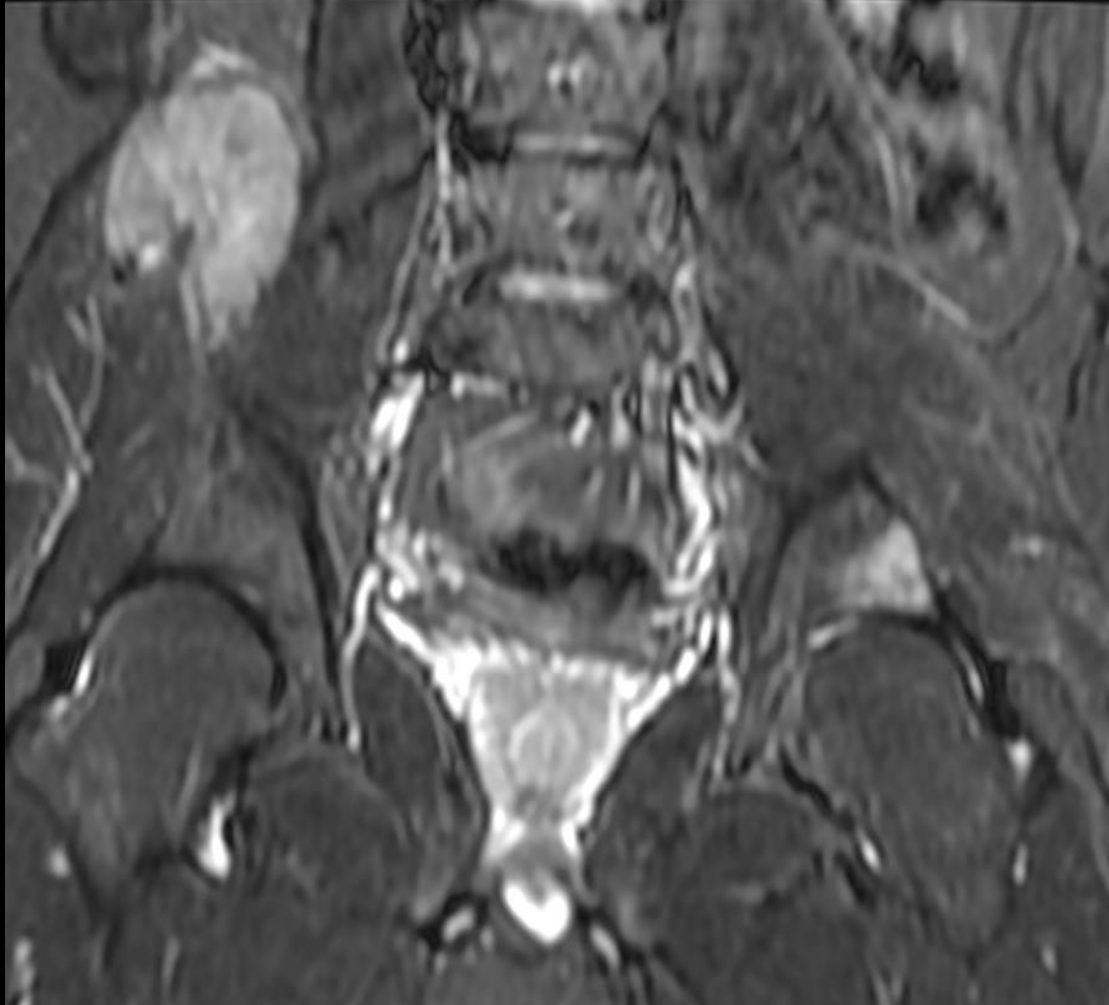
Case contributor – Dr. Chinmay P. Mehta

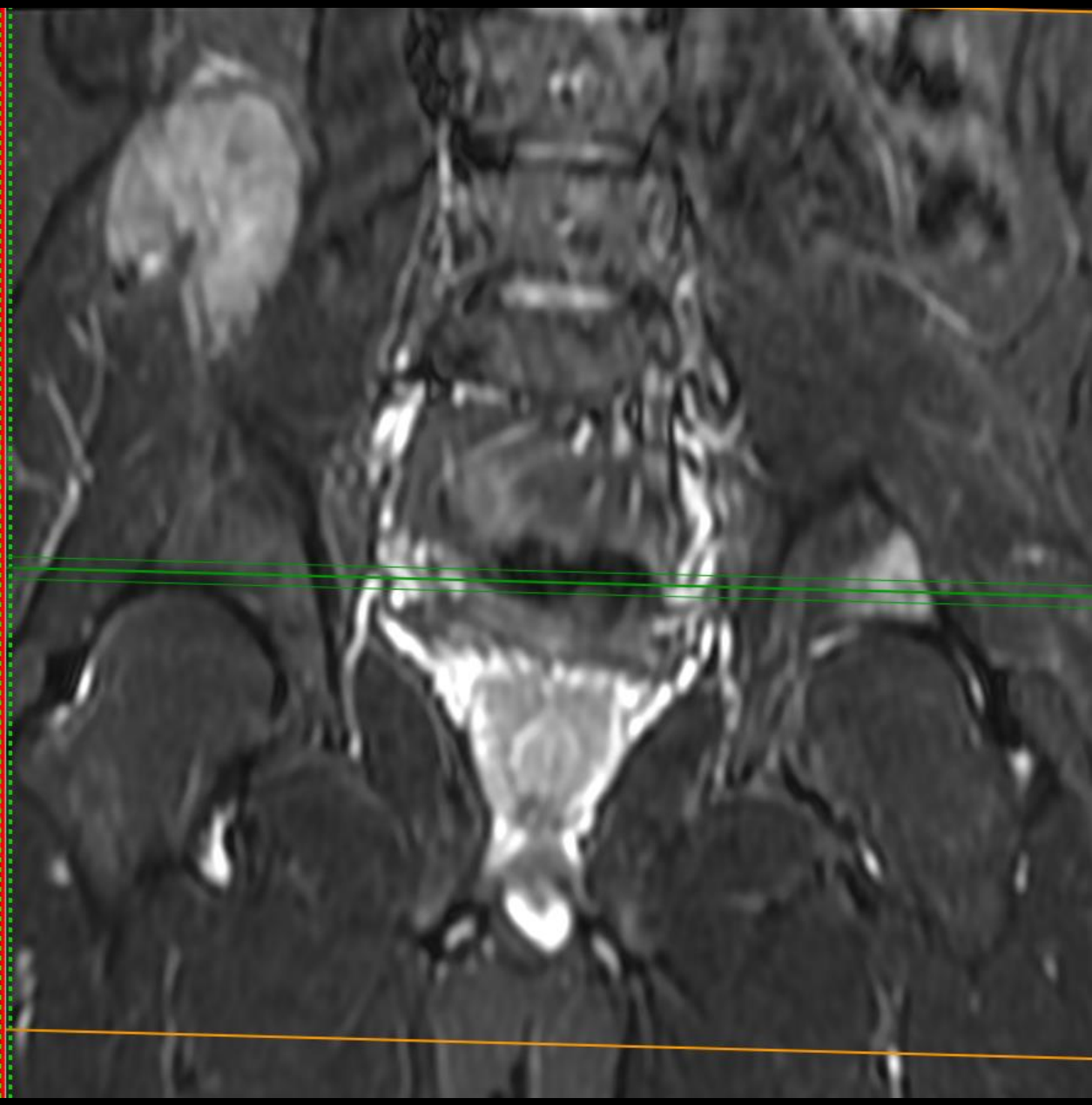
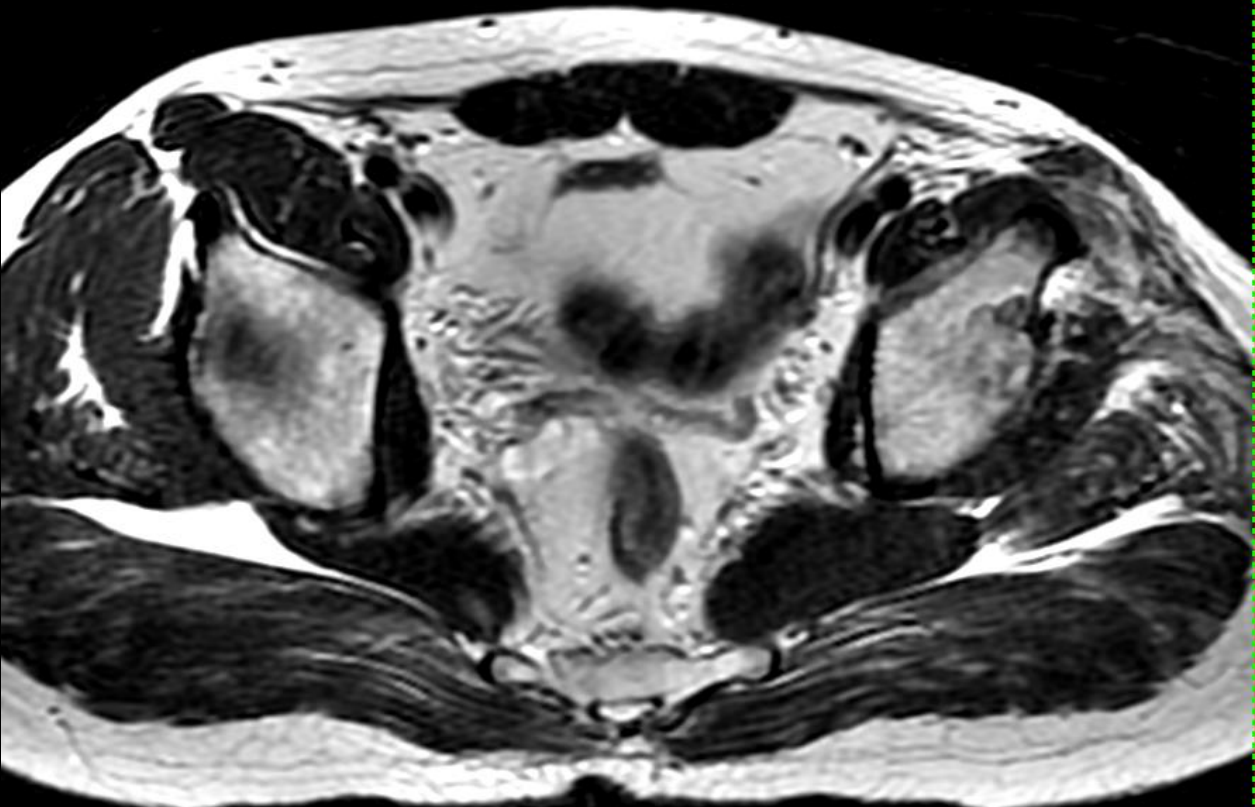
MI-COD

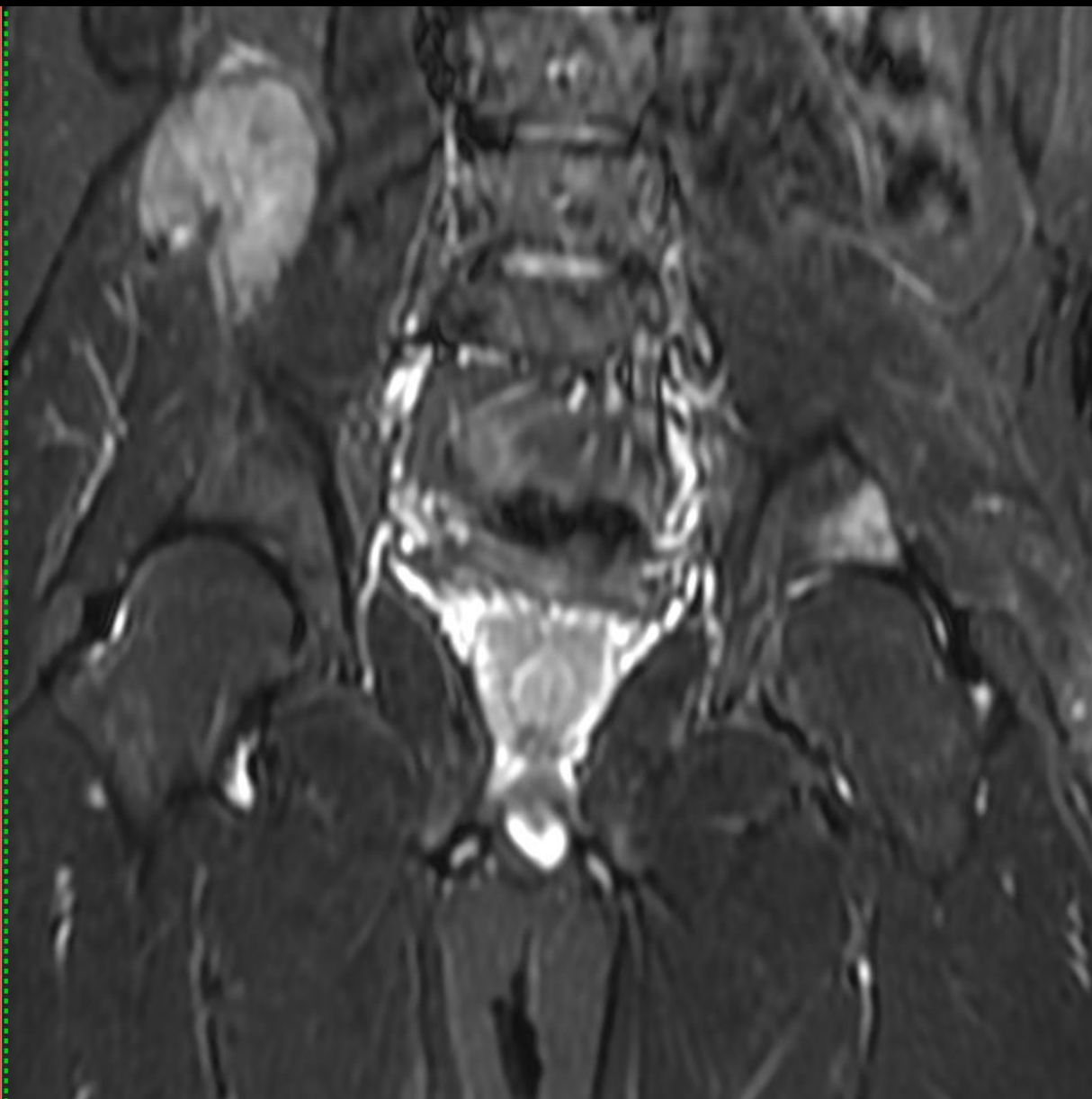
MSS INDIA- Case Of the Day



27yr old patient- known case of hereditary multiple exostosis and operated 1 year ago for left iliac blade chondrosarcoma- now presents with right iliac swelling.







PET CT WITH SUV VALUES



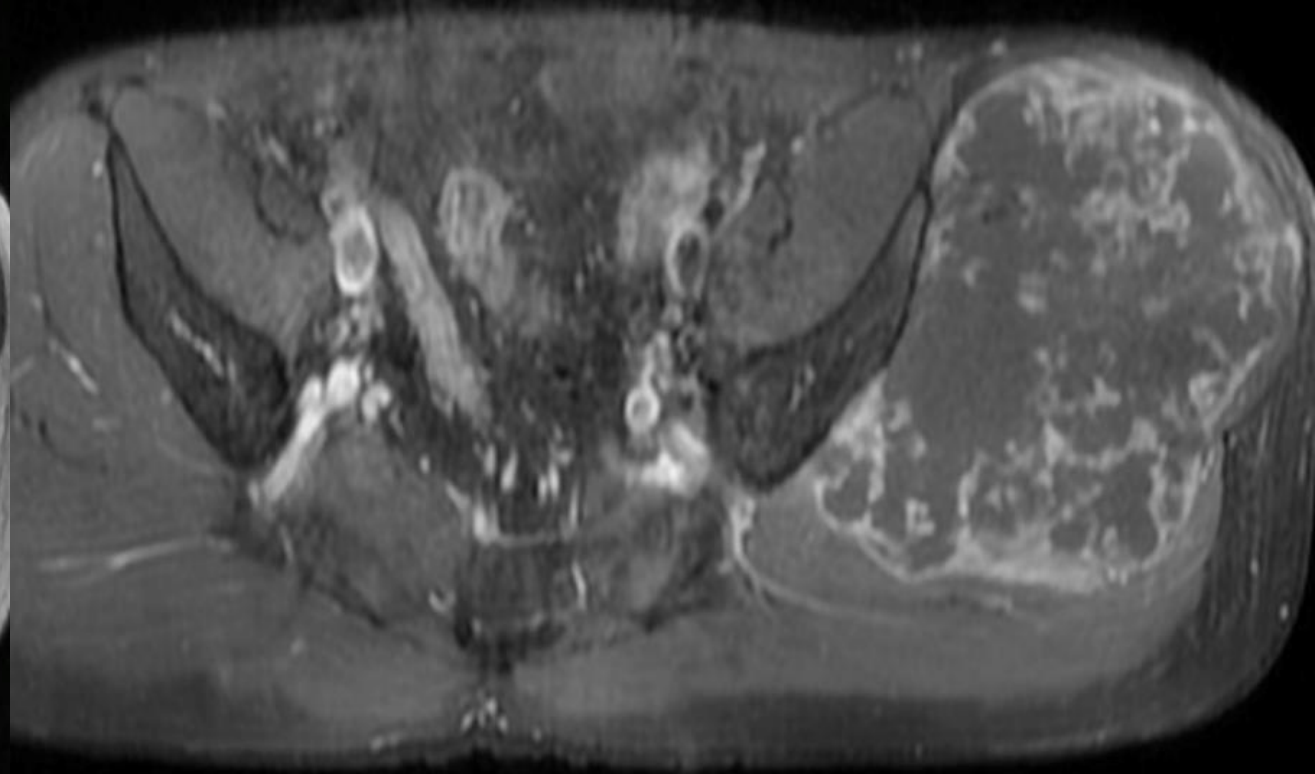
Page:2

An irregular osteolytic lesion is now seen in the left acetabulum showing uptake of FDG (SUVmax: 26.9). An irregular osteolytic lesion is also seen involving the right iliac bone, and associated with a large extra osseous enhancing soft tissue component involving the subjacent iliacus muscle and the overlying gluteal muscles. The lesion measures about 5.5 x 4.8 cm in maximum transverse dimensions with subtle uptake of FDG (SUVmax: 9.9). No other metabolically active skeletal lesion is seen.

PRE-OPERATIVE IMAGES



PRE-OPERATIVE IMAGES



Q1. What next ?

1. Diagnosis of recurrent chondrosarcomas / metastasis and treat accordingly.
2. Biopsy the left acetabular lesion.
3. Biopsy the right iliac blade lesion.
4. Biopsy both the lesions.

ANSWER:

1. Diagnosis of recurrent chondrosarcomas / metastasis and treat accordingly.
2. Biopsy the left acetabular lesion.
3. Biopsy the right iliac blade lesion.
4. Biopsy both the lesions.

DIAGNOSIS

- Bilateral denovo osteosarcomas.
- No history of radiation.

TAKE HOME MESSAGE

- Always look at the priors.
- T2 sequence gives a clue to the matrix of the lesion which looked like chondroid in the primary tumor however was T2 isointense in the 2nd episode and unlike a chondroid tumor.
- Biopsy.. Biopsy and biopsy the lesions except the classical 'Touch me not' tumors.