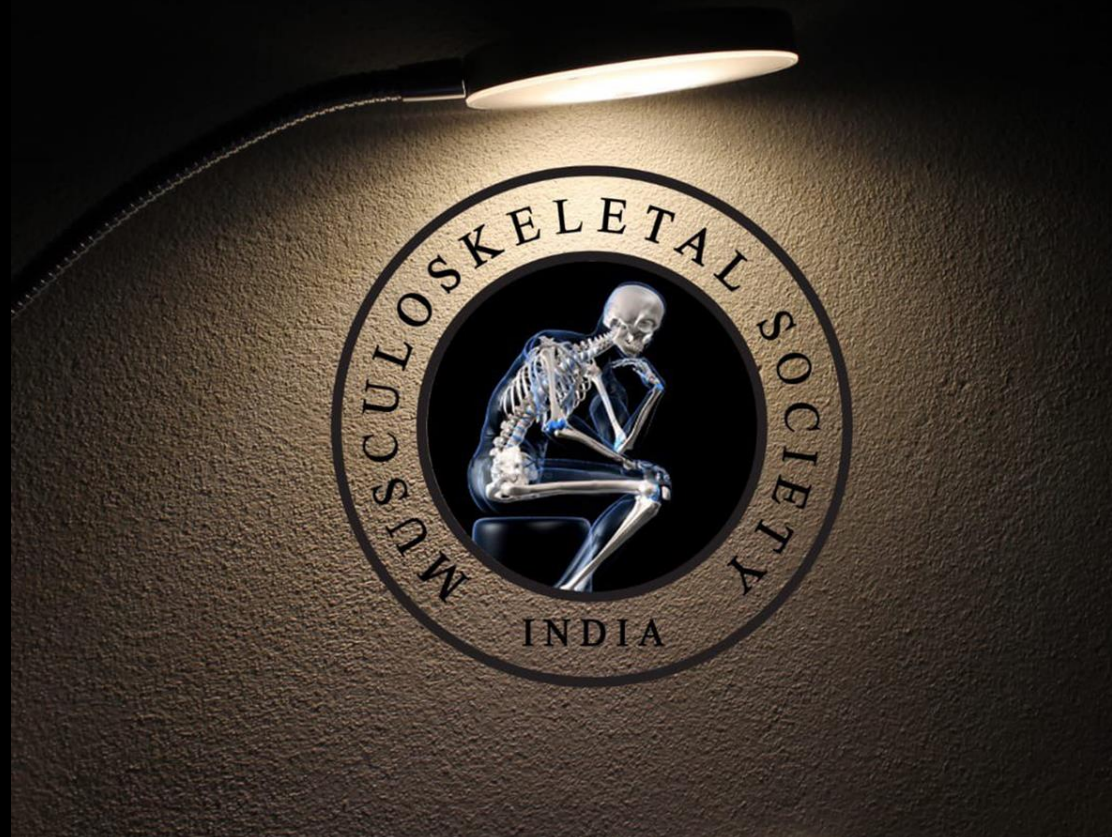


MICOD -04/07/2024

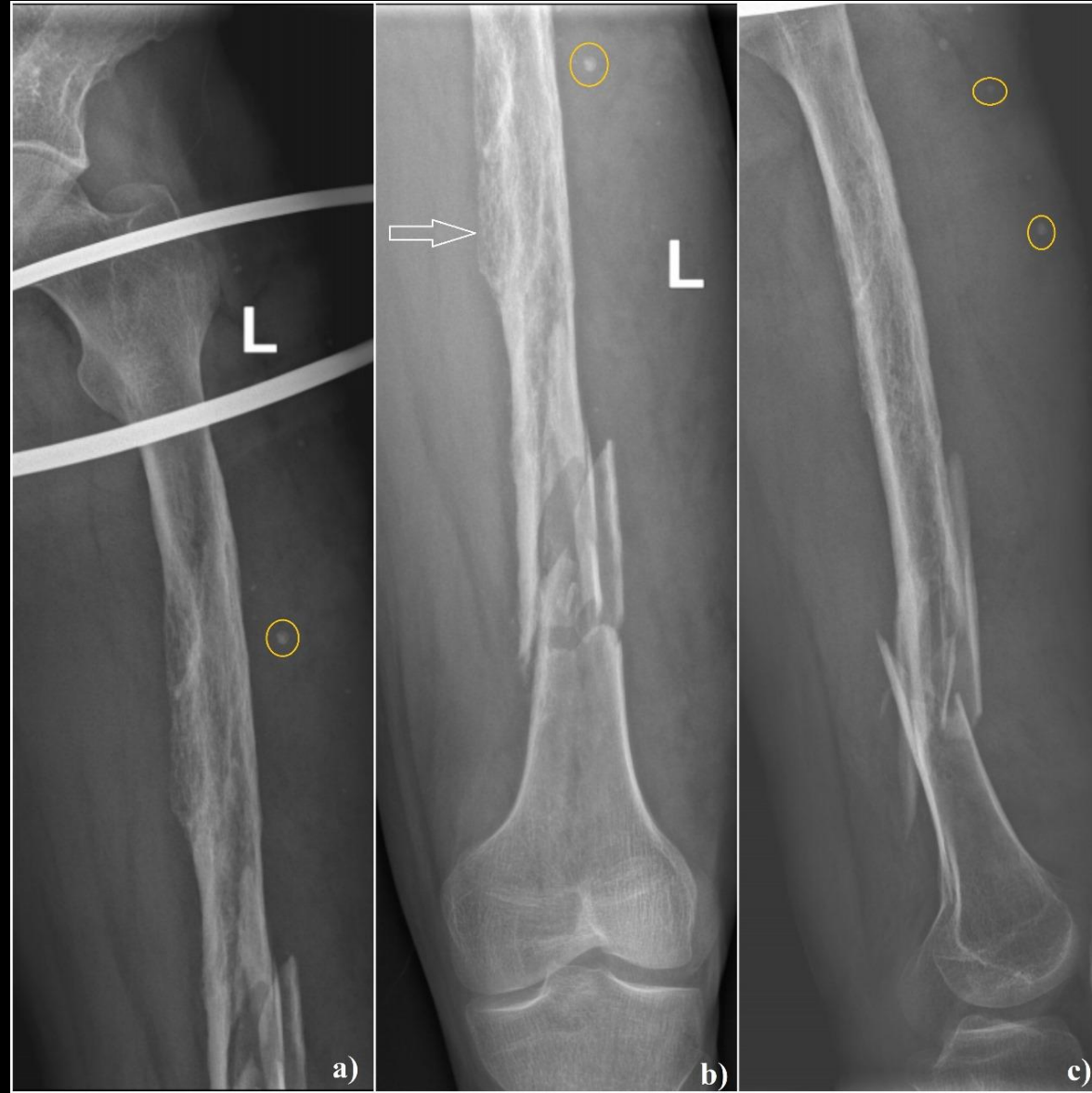
Case contributor – Dr. Sonal Saran

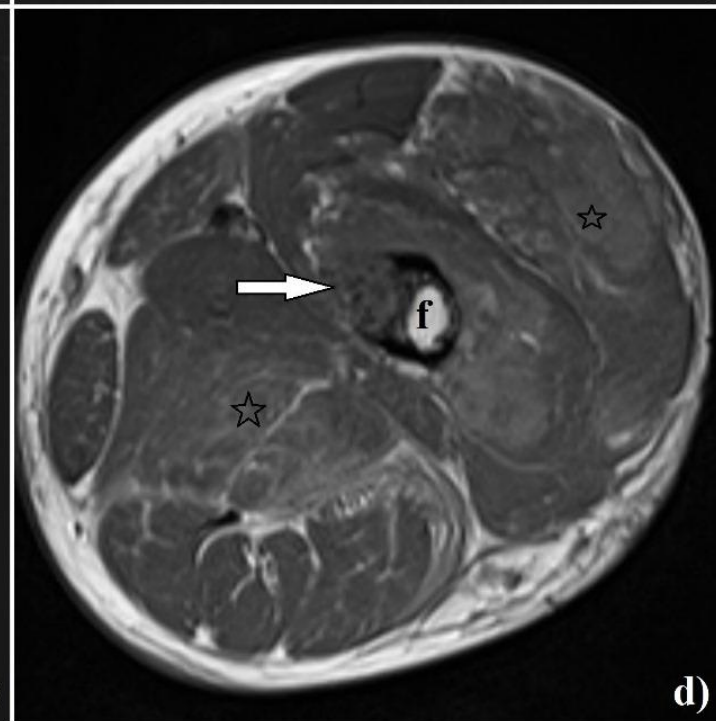
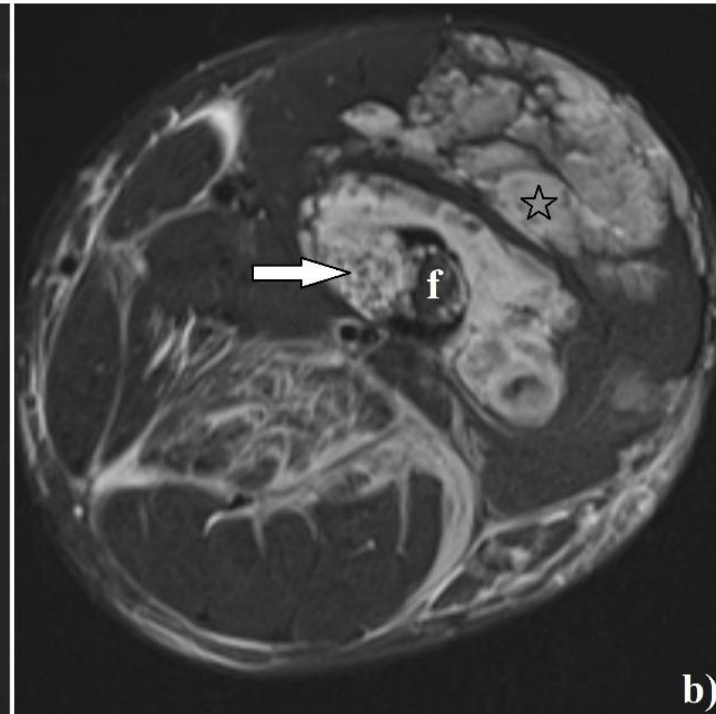
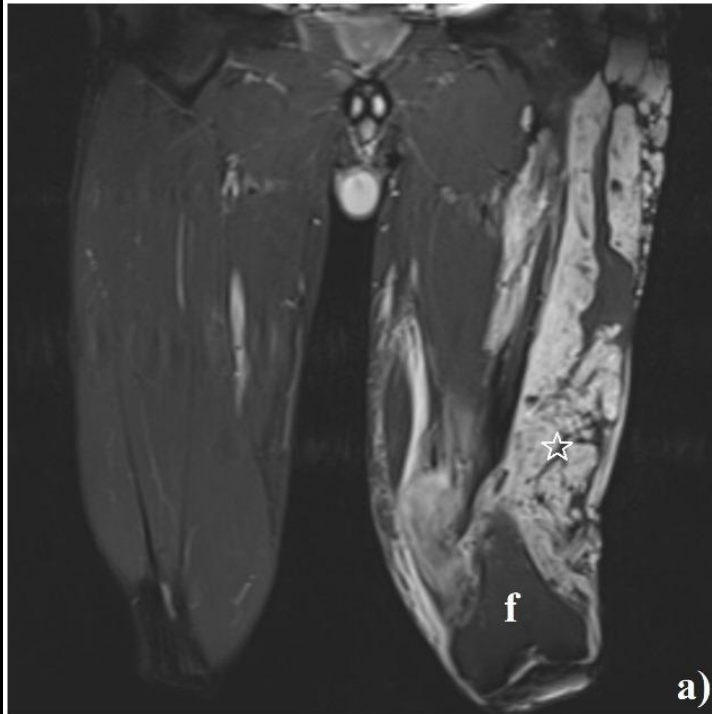
MI-COD

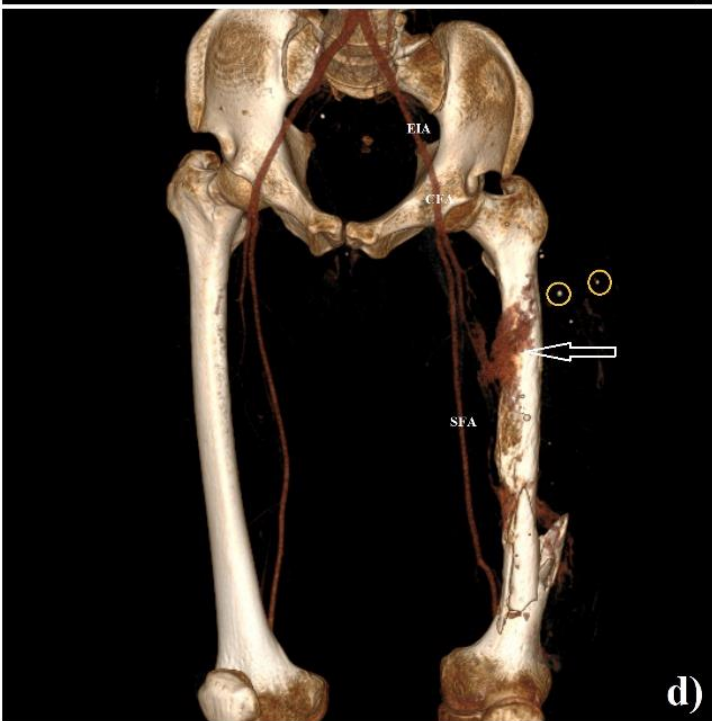
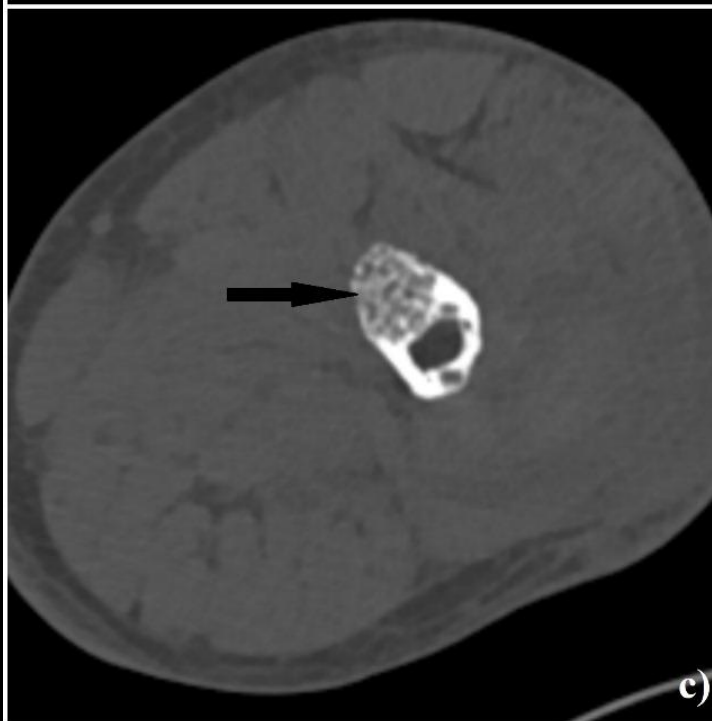
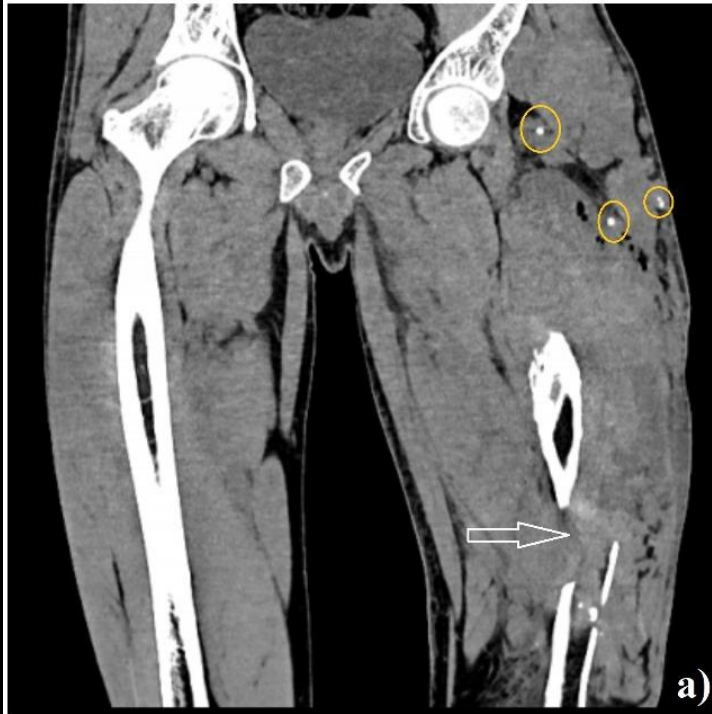
MSS INDIA- Case Of the Day



30-year-old male who presented with a pathological fracture of the left femur following trivial trauma.





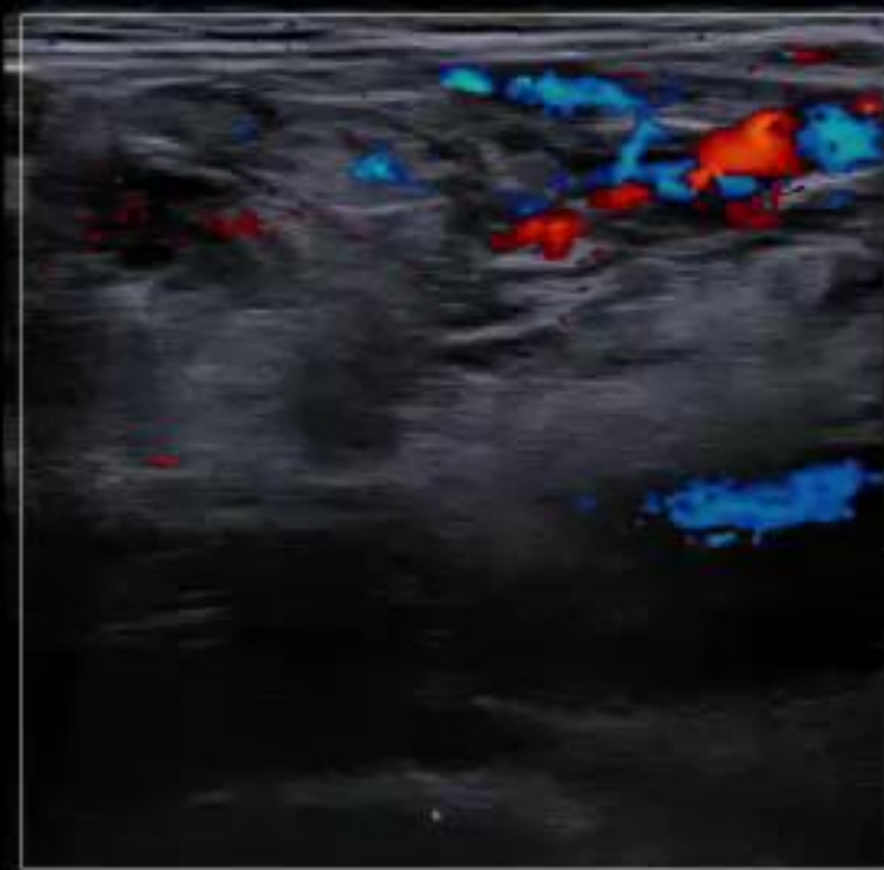




a)



b)



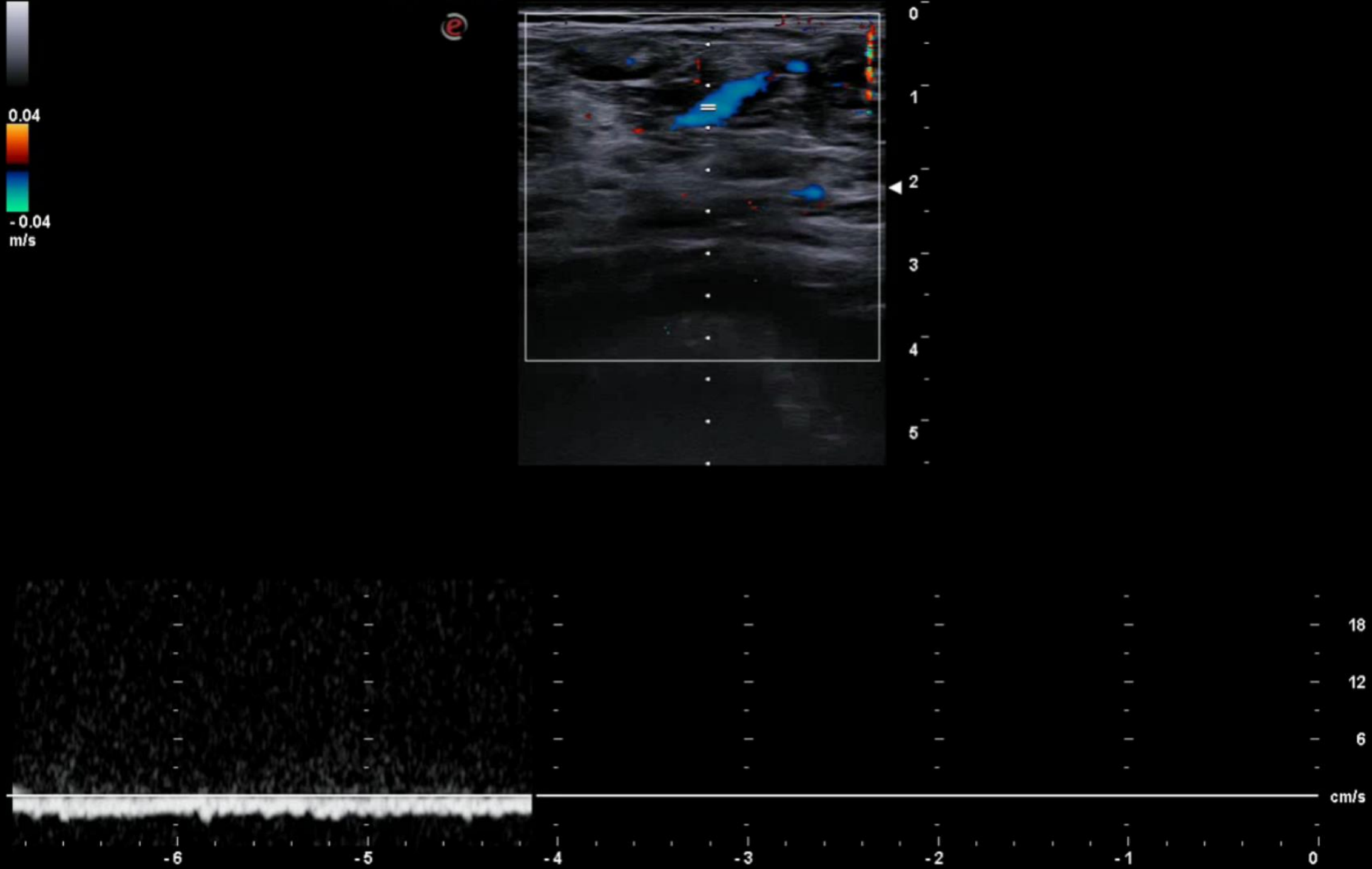
C

1

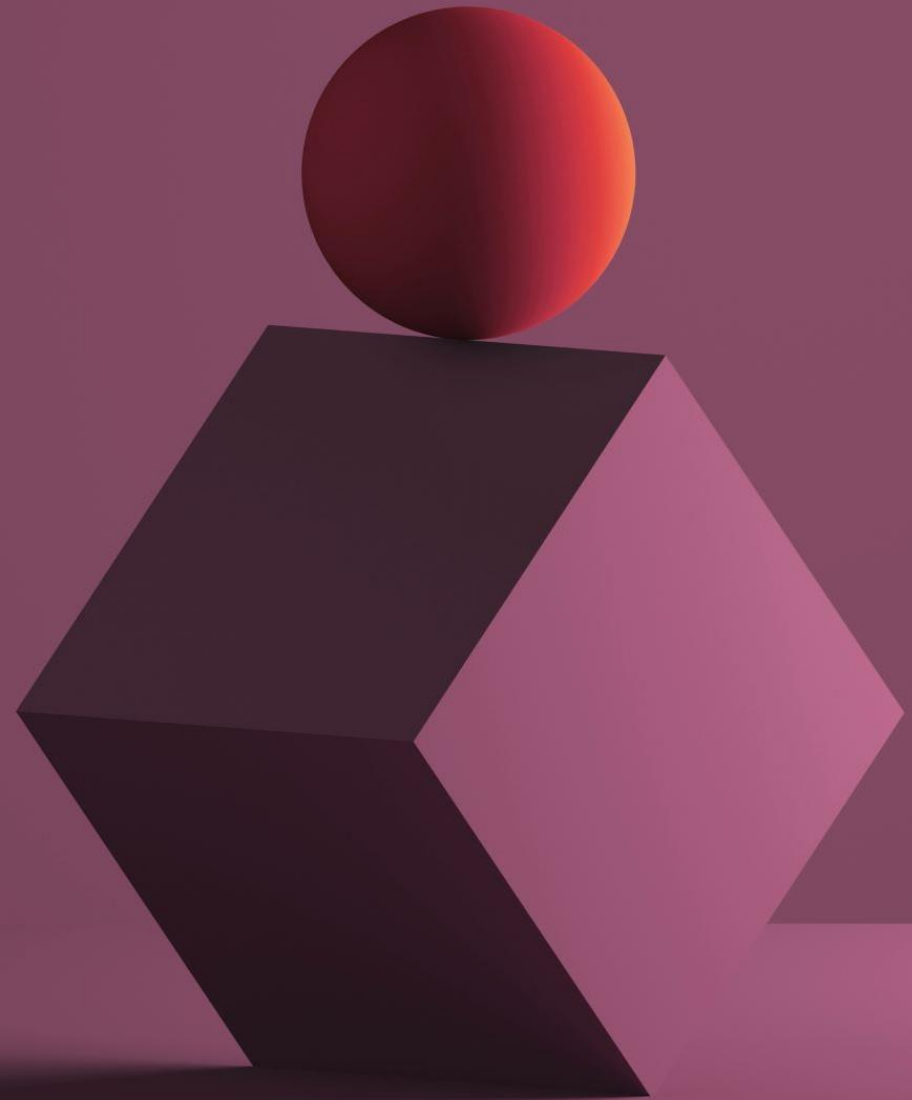
2

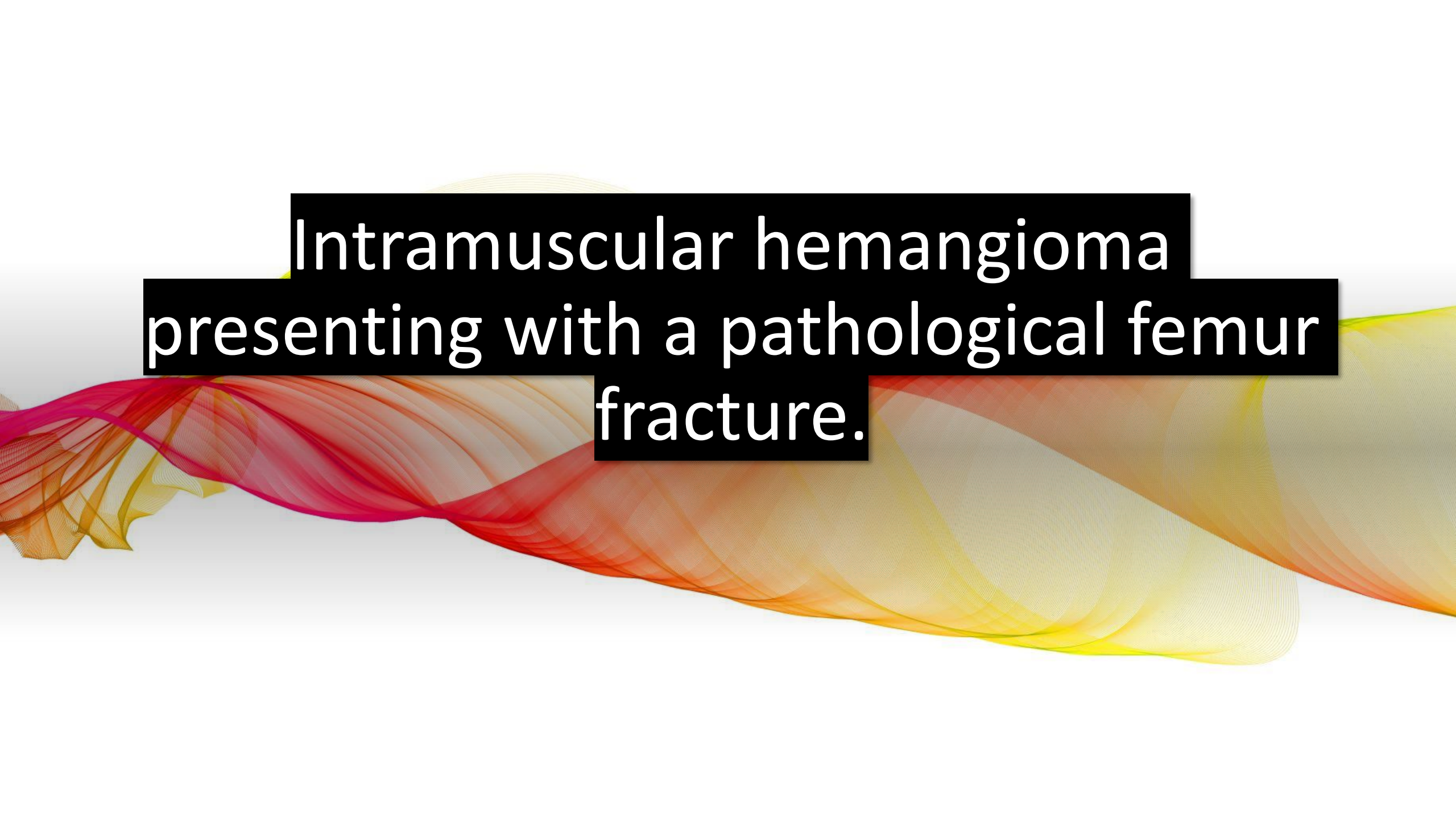
3

4



Diagnosis??

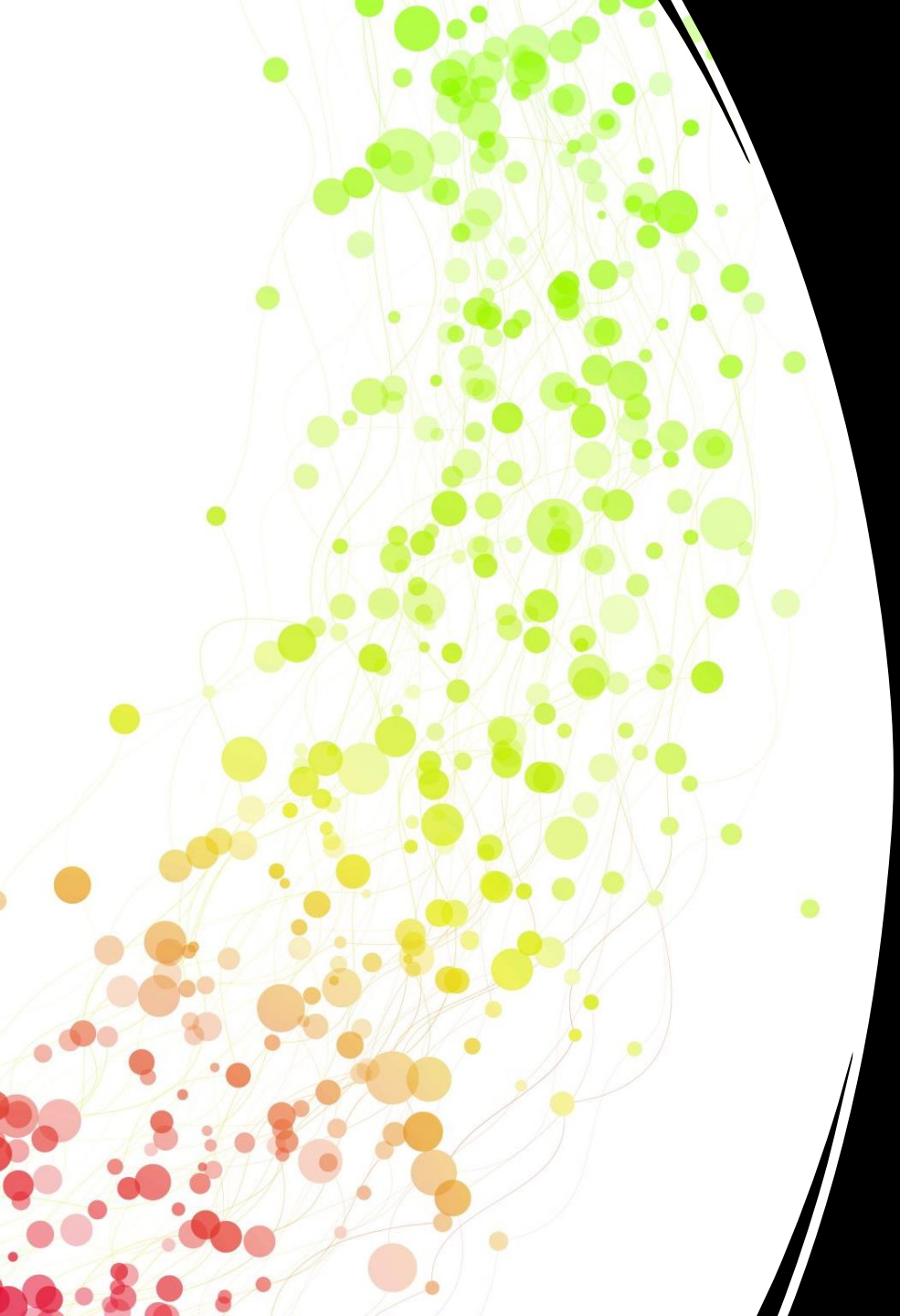




Intramuscular hemangioma
presenting with a pathological femur
fracture.

- Hemangioma is the most common soft-tissue tumor which is histologically benign and has a vascular origin.
- Intramuscular hemangioma presenting with a pathological fracture is extremely rare, with only a few cases reported so far.
- Imaging plays a key role in diagnosis and management and includes conventional radiography, ultrasonography, and magnetic resonance imaging (MRI).
- A histological diagnosis is rarely needed.
- The treatment must be individualized and includes options such as conservative management, embolization, sclerotherapy, and, infrequently, surgical excision.

- A radiograph will demonstrate the presence of calcified phleboliths within the lesion.
 - Ultrasonography can demonstrate the presence of soft-tissue mass with vascular channels and phleboliths.
 - Doppler helps in delineating the vascularity of the mass. Arterial feeders and venous drainage can also be identified on an ultrasound Doppler study.
 - Superior soft-tissue resolution and multiplanar capability, MRI is the diagnostic modality of choice, and most cases do not require histopathological confirmation.
 - The lesion appears iso to hyperintense on T1 and **hyperintense on T2-weighted sequence with few T2 hypointense foci within due to the presence of phlebolith.**



THANK YOU
