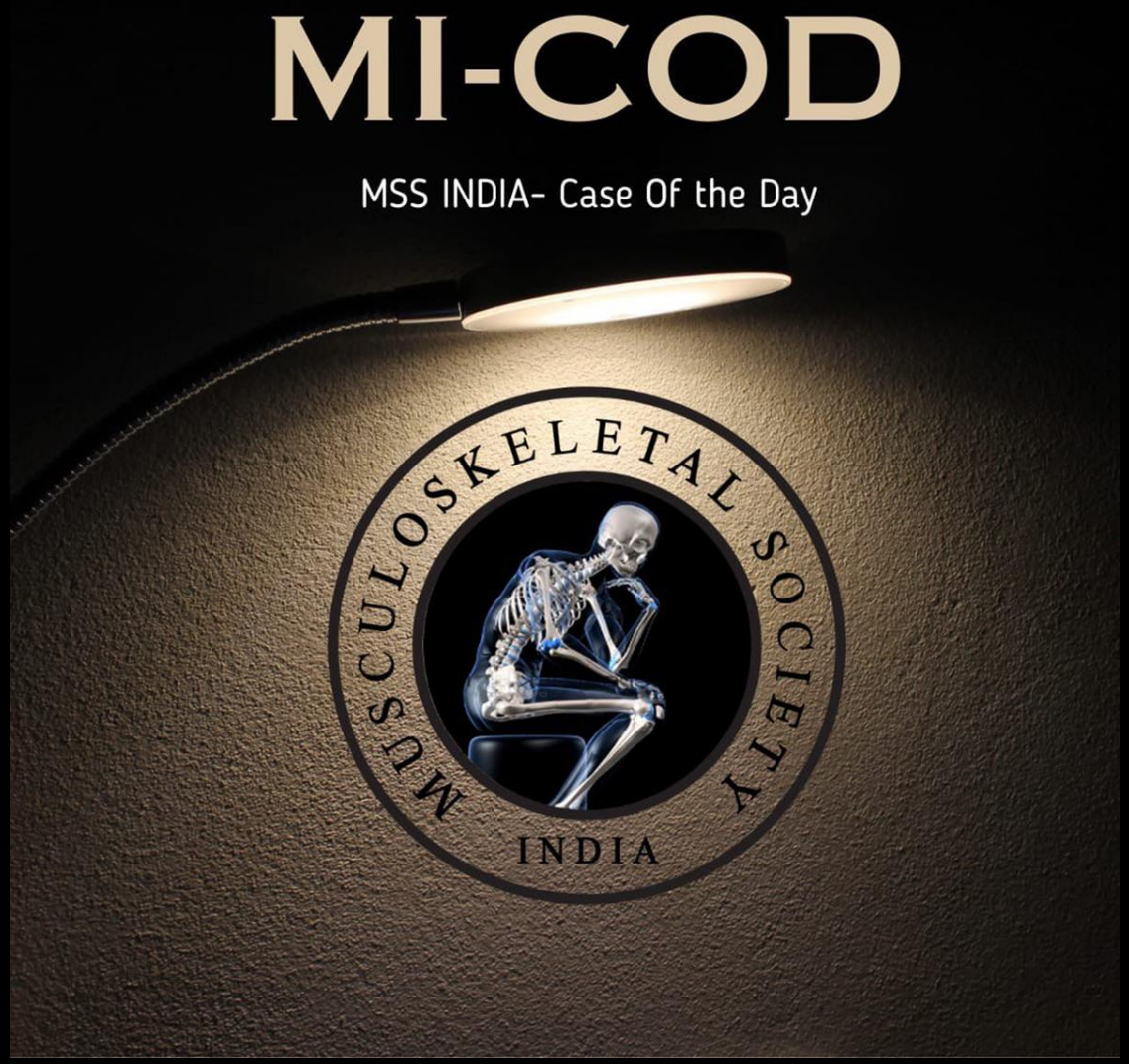
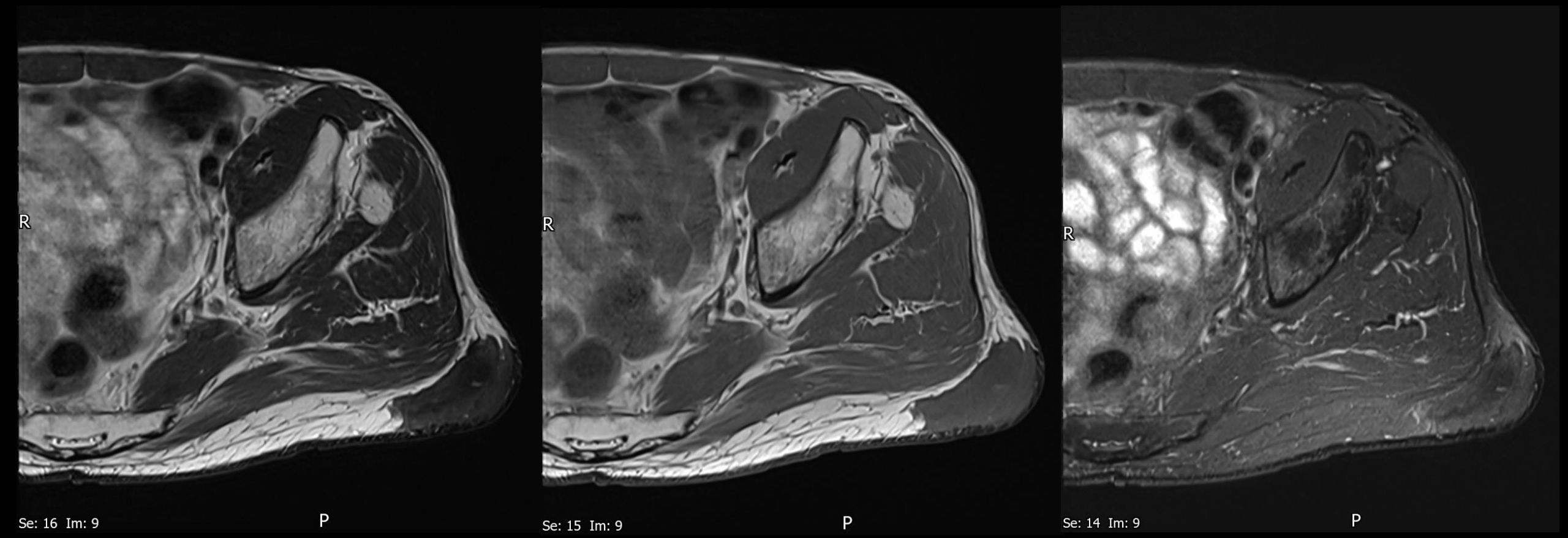
MICOD – 27/08/2024
Case contributor – Dr. Raj Chari



70-year-old gentleman, smoker with acute on chronic lower limb ischaemia and history of multiple procedures for atherosclerotic disease, presented with growing painless mass in the hip

Ultrasound Image

70-year-old gentleman, smoker with acute on chronic lower limb ischaemia and history of multiple procedures for atherosclerotic disease, presented with growing painless mass in the hip



Axial T2, T1, STIR MR images

70-year-old gentleman, smoker with acute on chronic lower limb ischaemia and history of multiple procedures for atherosclerotic disease, presented with growing painless mass in the hip

What is going on?

How do we biopsy if necessary?

Is this a bit of a desi ghee?

Is this a bit of a tumorlike brie?

Perhaps due to vascular spree?

Or has he fallen off a tree?

Insulin Induced Lipohypertrophy

- Common complication of insulin therapy in subcutaneous tissue observed in patients with diabetes, manifests as soft benign nodules on the skin surface.
- It's occurrence is associated with the lipogenic action of insulin at the site of injection and repeated trauma related to performing insulin injections at the same site.
- Risk factors are needle reuse, a lack of rotation of injection sites, a small size of rotation area, a high daily insulin dose, a long duration of insulin treatment, a high body mass index, poor glycaemic control, and low level of patient education have been reported from clinically diverse diabetic cohorts.
- The risk in patients treated with multiple daily insulin injections has been reported to be lower when using insulin analogs than human insulin.
- The insulin absorption from affected areas is impaired and can be probably attributed to the local inflammatory reaction, increased local fibrosis, and decreased vascularity.

Doctor: does diabetes run in your family?
Me: doc, no one runs in my family

THANK YOU