

## Image of the Month

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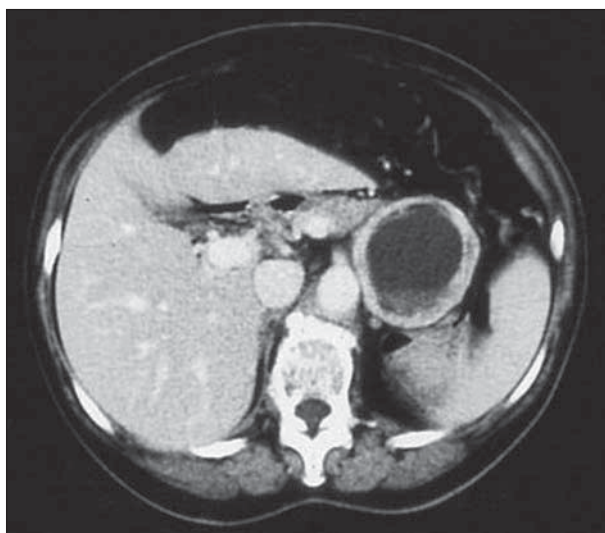
**A** 69-YEAR-OLD WOMAN WHO HAD EPILEPSY and hypertension presented with a 5-month history of weight loss (5 kg), vague pain, and discomfort in the lower quadrants of the abdomen. She had no fever, vomiting, or diarrhea and no history of clinical pancreatitis. Physical examination findings were unremarkable; general laboratory test results and serum levels of tumor markers were within normal limits. Ultrasonographic examination revealed a predominantly cystic mass

(7 × 6 × 5 cm) in the body and tail of the pancreas. A contrast-enhanced computed tomographic scan showed a well-defined, round, low-density mass in the region of the pancreatic tail, consisting of a predominantly cystic area with corpuscular content. After the injection of contrast medium, enhancement of posterior polypoid lesions and of the external wall was seen (**Figure 1**).

### What Is the Diagnosis?

- A. Pancreatic pseudocyst
- B. Retroperitoneal schwannoma
- C. Left adrenal gland tumor
- D. Serous cystadenoma of the pancreas

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**Figure 1.** Contrast-enhanced computed tomographic scan showing a round, encapsulated, cystic lesion on the level of the body and tail of the pancreas.