

Image of the Month

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A 41-YEAR-OLD OTHERWISE HEALTHY WOMAN had a 1-year history of fatigue and 10-kg weight gain. Her biochemical laboratory study results were normal, and the physical examination findings were unremarkable. Abdominal ultrasonography showed a 3-cm mass in the pancreatic tail. On abdominal magnetic resonance (MR) imaging, a 3 × 2-cm well-demarcated mass was identified within the pancreatic tail revealing hypointensity on T1-weighted and hyperintensity on T2-weighted images

compared with the pancreas. After dynamic gadopentetate dimeglumine enhancement, the mass showed heterogeneity and hypervascularity with gradual homogeneous and persistent enhancement (**Figure 1**). The patient opted for removal of the potentially malignant neoplasm and underwent distal pancreatectomy and splenectomy. At surgery, a solid and noninvasive mass embedded within the pancreatic tail was found (**Figure 2**).

What Is the Diagnosis?

- A. Islet cell tumor
- B. Solid pseudopapillary tumor of the pancreas
- C. Pancreatic adenocarcinoma
- D. Intrapancreatic ectopic spleen

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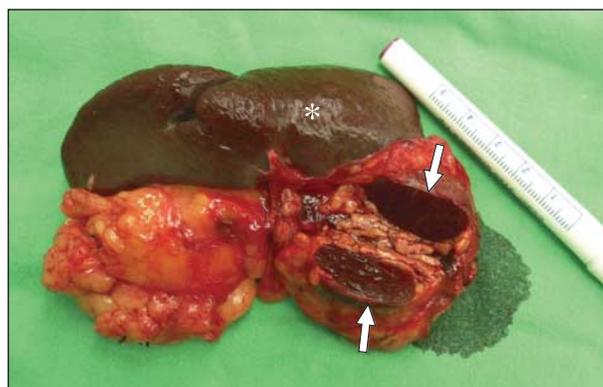
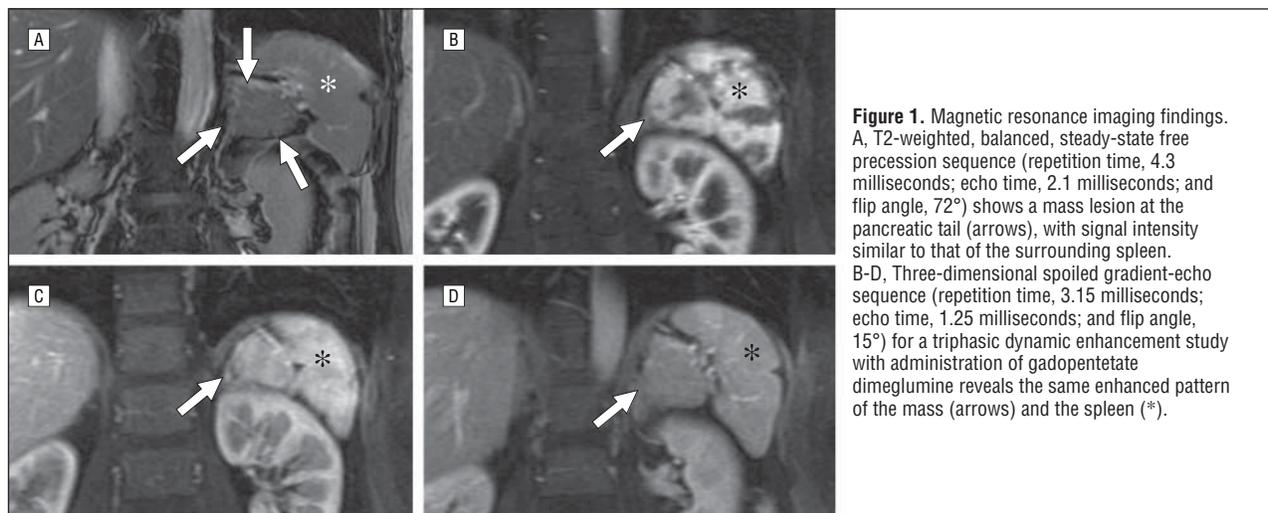


Figure 2. A pathologic specimen obtained by distal pancreatectomy and splenectomy shows the spleen (*), mass (arrows), and pancreatic tail. Ruler is in centimeters.