

# Neurilemmoma of the Greater Omentum: A Case Report

Chia-Man Chou, Cheng-Chung Wu, Dah-Cherng Yeh, Tse-Jia Liu, Mu-Chun Li\*

The greater omentum is frequently the site for secondary malignant growths, and primary omental tumors are rare. Benign solitary schwannoma or neurilemmoma is the most common tumor of the peripheral nerves, and is seldom found in the abdomen. Moreover, the greater omentum has a paucity of nervous tissue, so neurilemmoma is extremely rare. To our knowledge, only three cases were documented in the English literature. We report a 67-year-old female patient who presented with occasional epigastric dull pain. Abdominal computed tomography and angiography revealed a hypervascular mass in the upper abdomen. Laparotomy and pathology confirmed that the mass was neurilemmoma in the greater omentum.

**Key words:** greater omentum, neurilemmoma, abdominal computed tomography

Omental tumors are rare and mostly asymptomatic<sup>1</sup>. It seems true that the greater omentum is the least affected by the disease of its own, but is often the site for secondary malignant growths<sup>1</sup>. Neurilemmoma is frequently found in the peripheral nerves. Moreover, since the greater omentum lacks nervous tissue, neurilemmoma of the greater omentum is an extremely rare neoplasm<sup>2</sup>. To our knowledge, only three cases were documented in the current English literature<sup>1,2</sup>. Herein, we report a 67-year-old female who presented with epigastric discomfort and an intra-abdominal mass was incidentally found on image studies. Pathological examination of the resected specimen proved to be a neurilemmoma of the greater omentum.

## Case Report

A 67-year-old female, moderately nourished, was admitted to the hospital due to intermittent epigastric fullness and dull pain for six months.

On examination, there was no palpable mass or significant tenderness in the abdomen. All laboratory data were within normal limits. Upper gastrointestinal barium study and gastroduodenoscopy revealed negative findings. Abdominal ultrasonography showed a hypochoic

lesion in the right upper abdomen. Abdominal computed tomography (CT) showed a heterogeneous lesion with cystic component inferior to the fundus of the gall bladder (Fig 1). Abdominal angiography showed a hypervascular mass lesion in hepatic flexure area that was mainly supplied by the omental branch of gastroduodenal artery (Fig 2).

Laparotomy disclosed a mobile, solid tumor, 7×5×4 cm<sup>3</sup> in the greater omentum with several cystic contents (Fig 3).

Microscopic examinations revealed a well-encapsulated compact mass with cells aligned in whorls, the nuclei lined up in a palisading pattern, and areas of cystic changes with hemorrhage or clear straw-colored fluid contents (Fig 4). Histological diagnosis is solitary neurilemmoma.

She was followed-up at our outpatient clinic, abdominal CT showed no evidence of recurrent tumor.

## Discussion

"Neurilemmoma" or "Schwannoma", now accepted and used interchangeably by most authorities, is a neoplasm of the nerve sheath from Schwann's cell<sup>2,3</sup>.

Most often, it occurs along the course of peripheral

From the Department of Surgery, Department of Pathology\*, Taichung Veterans General Hospital, Taichung, Taiwan

Received for publication: November 28, 2000

Reprints and correspondence to: Chia-Man Chou, Department of Surgery, Taichung Veterans General Hospital, No 160, Sec 3, Taichung-Kang Rd, Taichung, Taiwan, Tel: 886-4-23592525 ext 5021, Fax: 886-4-23599715, E-mail: cmchou@vghtc.vghtc.gov.tw