

## Case Analysis

# Inflammatory Pseudotumor of the Liver: Analysis of Seven Resected Cases

Yi-Ju Chen, Cheng-Chung Wu, Dah-Cheng Yeh,  
Shao-Bin Cheng, Chii-Shuenn Yen\*, Po-Cheung Kwan\*

**Objectives:** Inflammatory pseudotumor (IPT) of the liver is a rare benign lesion which is commonly misdiagnosed as malignant tumor or liver abscess. Surgery is generally unnecessary because of its benign course. The purpose of this study is to determine non-surgical treatment options for IPT.

**Patients and Methods:** Among 1262 patients who underwent liver resection for tumors from September 1989 to June 2004, seven patients had pathologically confirmed IPT of the liver. All the seven patients' background characteristics, pathologic findings of the tumor, as well as early and late results were reviewed and analyzed.

**Results:** The liver function tests were all within normal range with a normal serum  $\alpha$ -fetoprotein (AFP) and carcinoembryonic antigen (CEA). Abdominal ultrasonography showed all tumors as hypoechoic lesions with unclear margin. Enhanced computed tomography (CT) scans showed a low-density area with marginal enhancement in six patients. One patient had liver cirrhosis. No complications occurred in any patient after surgery. All patients survived, with the longest survival time to date being 14 years.

**Conclusions:** In patients with or without positive hepatitis seromarkers and normal tumor markers, if abdominal ultrasonography shows hypoechoic lesions with unclear margin and CT scan shows a low-density area with marginal enhancement, IPT of the liver could be suspected. If percutaneous liver needle biopsy confirms the diagnosis of IPT of the liver, surgery can be avoided.

**Key words:** inflammatory pseudotumor, benign liver tumor

Inflammatory pseudotumor (IPT) was first described in the lung in 1939<sup>1</sup> and has subsequently been documented in other organs. IPT of the liver was first reported in 1953 by Pack and Baker.<sup>2</sup> They reported a patient who had undergone a right hepatic lobectomy for a presumed malignant tumor with subsequent histology demonstrating an IPT of the liver. This type of tumor has

the appearance of malignancy but a clinical benign behavior,<sup>3</sup> hence, surgical treatment may not be indicated in IPT.<sup>4</sup> Preoperative diagnosis of IPT is usually difficult because such a tumor appears as a large, diffuse, and infiltrative lesion, which may often have concomitant portal vein occlusion radiologically, and patients may present with a history suggestive of malignancy.<sup>5</sup> In pre-

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

Received: September 26, 2005 Accepted: February 17, 2006

Address reprints request and correspondence to: Dr. Yi-Ju Chen, Department of Surgery, Taichung Veterans General Hospital, 160, Sec 3, Taichung-Kang Rd, Taichung, Taiwan, Tel: 886-4-23592525 ext 5021, Fax: 886-4-23581890