

影像沙龙病例分享

西安交通大学第二附属医院

医学影像科 李兴华

病例病史

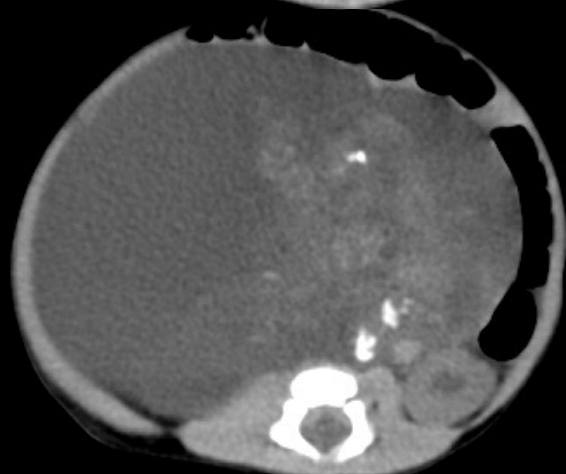
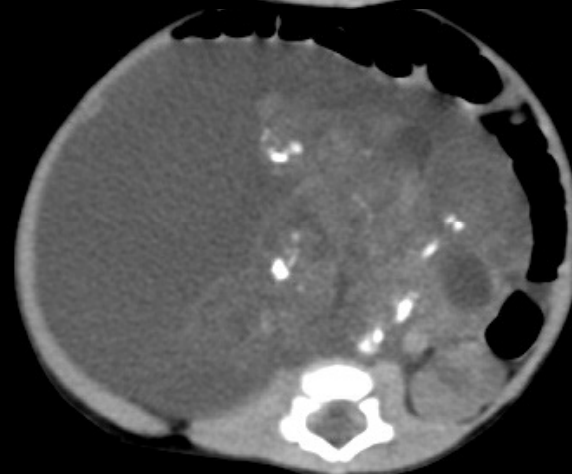
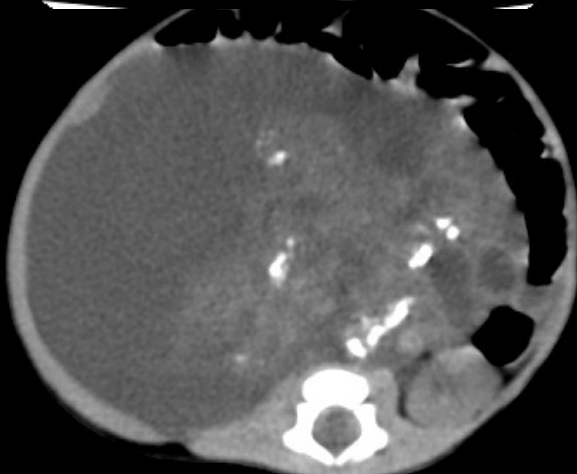
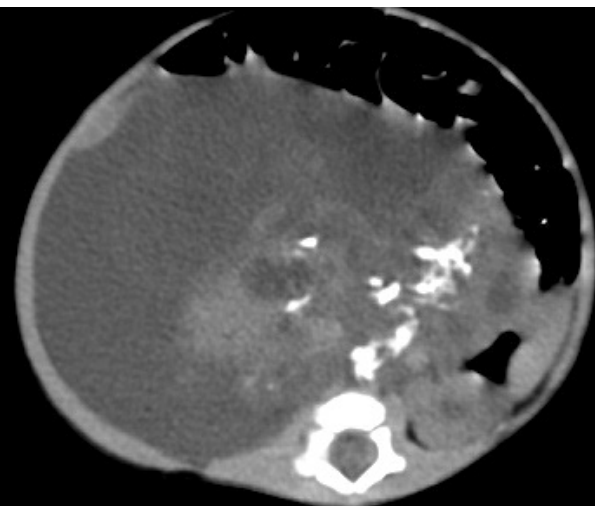
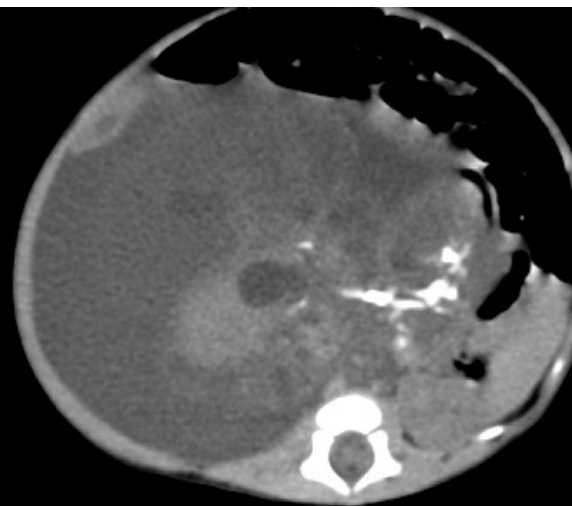
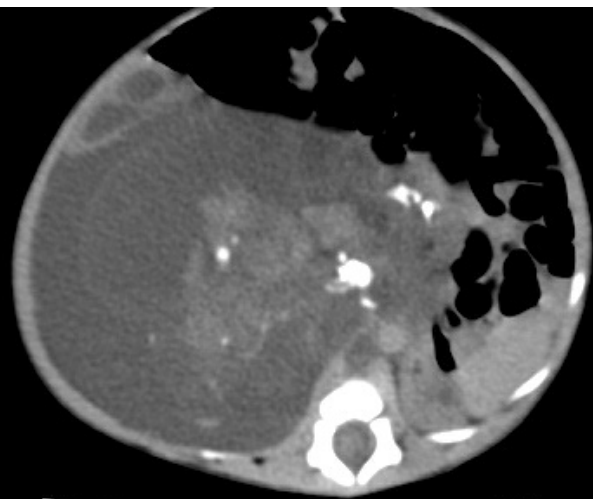
- 患者：女，3天
- 主诉：发现腹部包块50天余
- 现病史：50天前即患儿母亲怀孕28周发现患儿腹部囊性包块，此后行规律产检，超声提示腹部包块逐渐增大，出生后发现患儿腹胀明显。
- 个人史：1胎1产，足月剖宫产，出生体重3.65kg，出生时情况良好。

病例病史

- 家族史：无家族性疾病
- 专科查体：腹部轻度膨隆，可触及一大小约12.5cm×8.0cm×11.6cm的包块，质地不均匀，界线清楚，基底部固定，活动度欠佳。
- 实验室检查：小儿肿瘤标志物

甲胎蛋白（AFP）：177673.00ng/ml（0-7.02）

神经元特异性烯醇化酶（NSE）：45.64ng/ml（0-16.3）

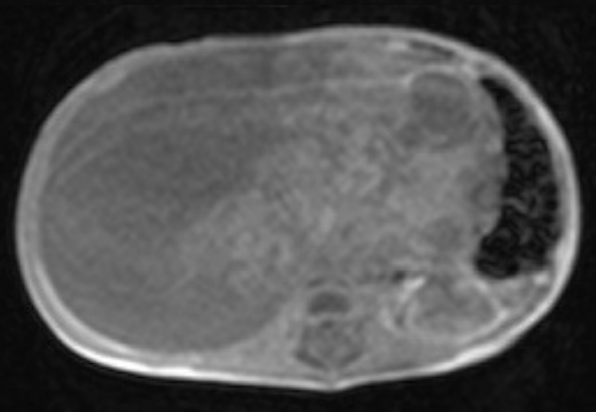
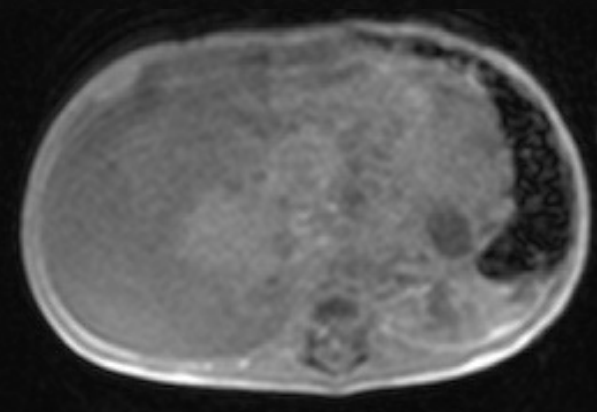
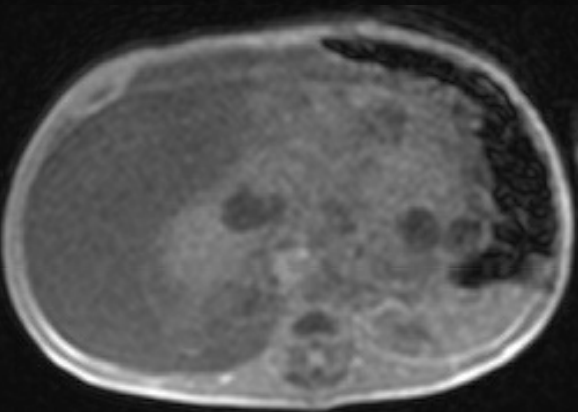
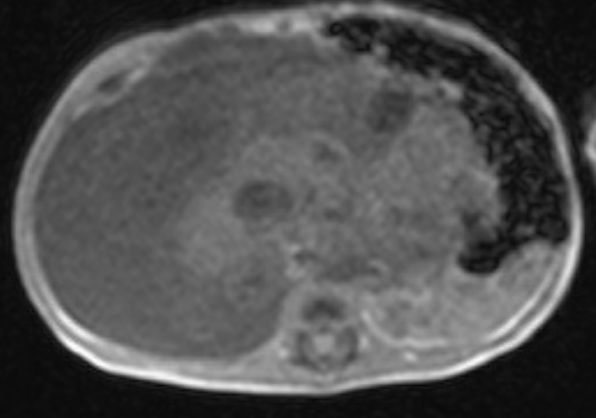
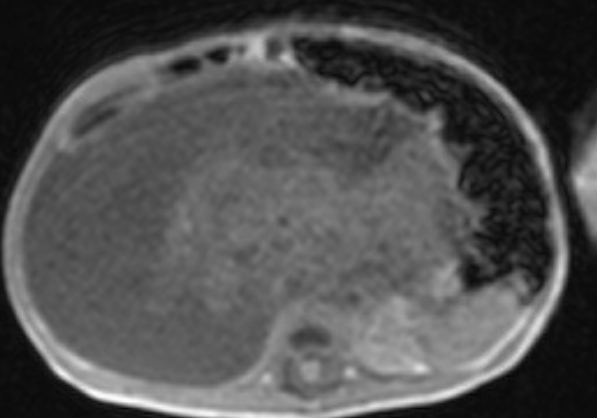
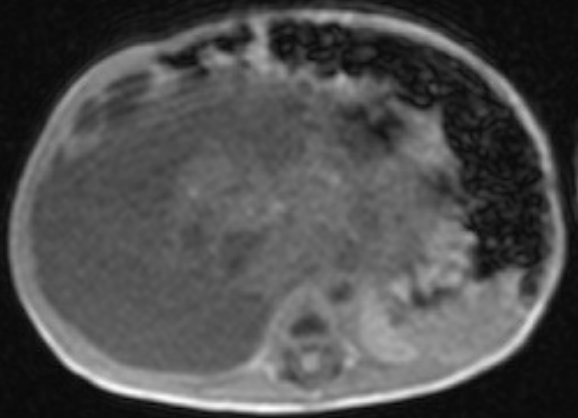


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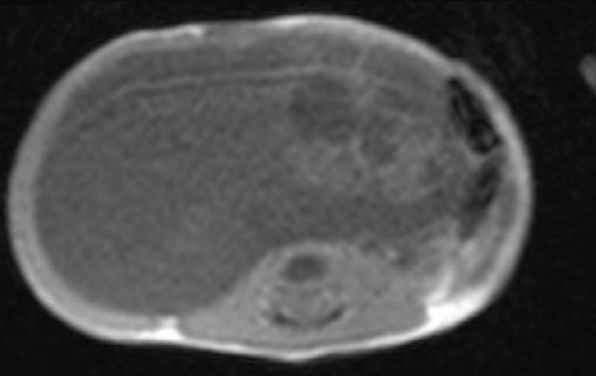
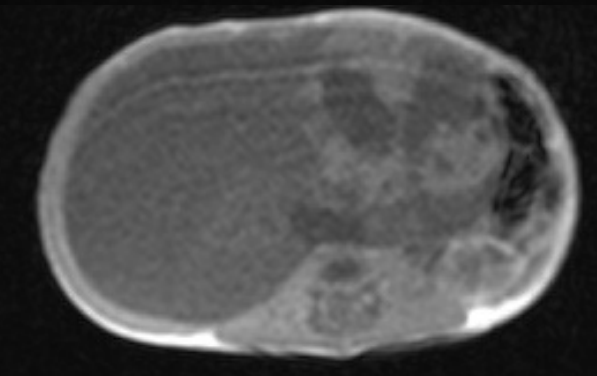
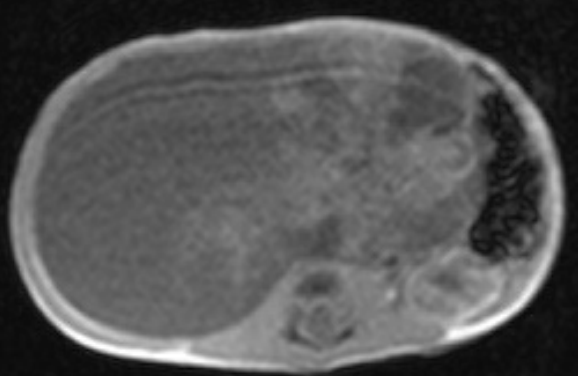


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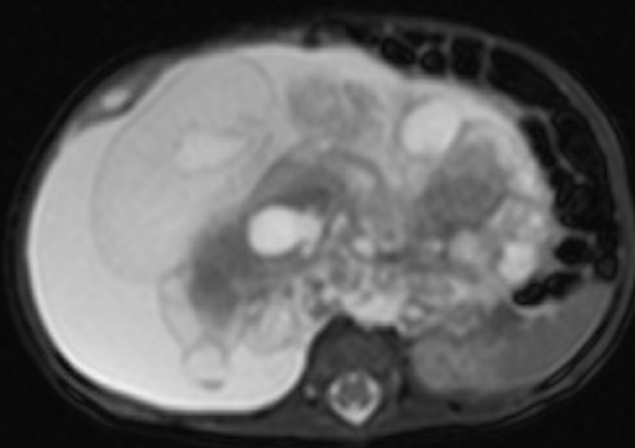
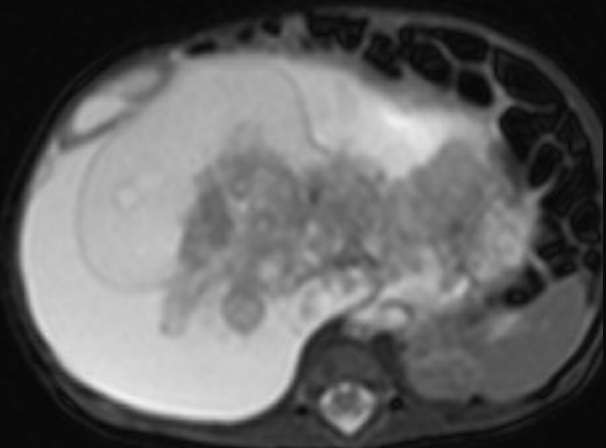


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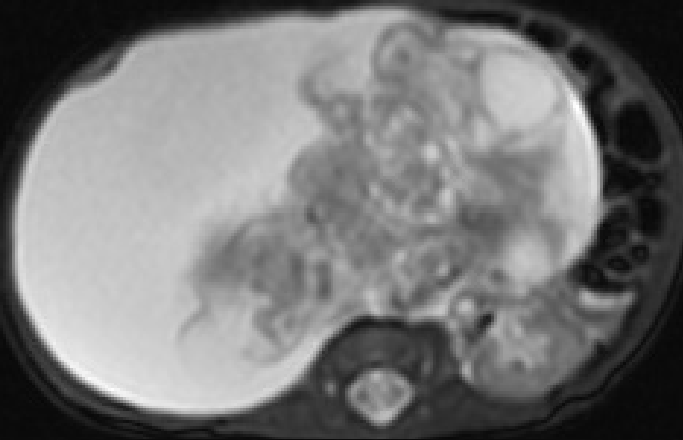
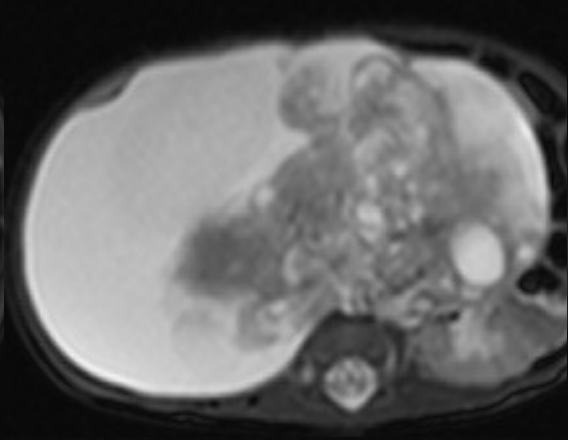
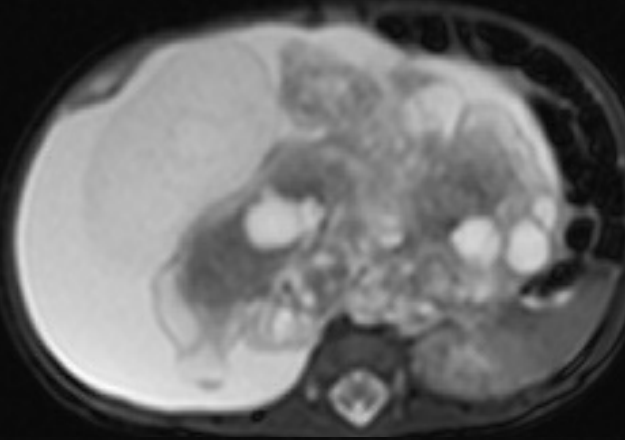
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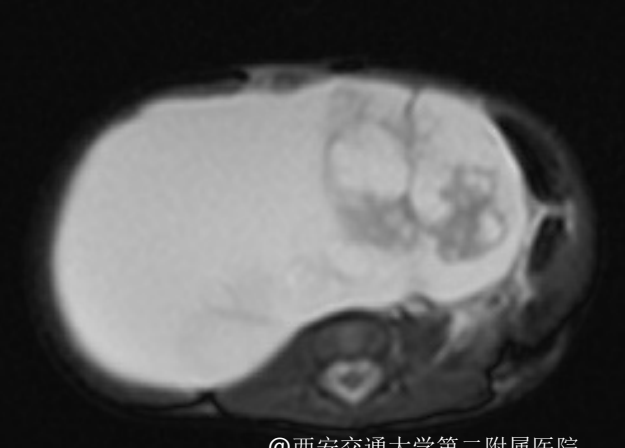
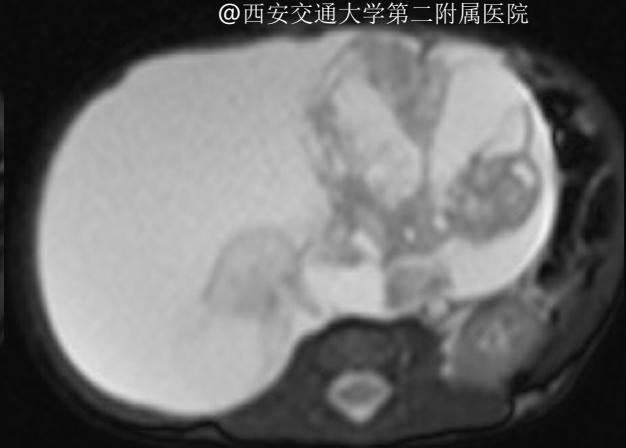
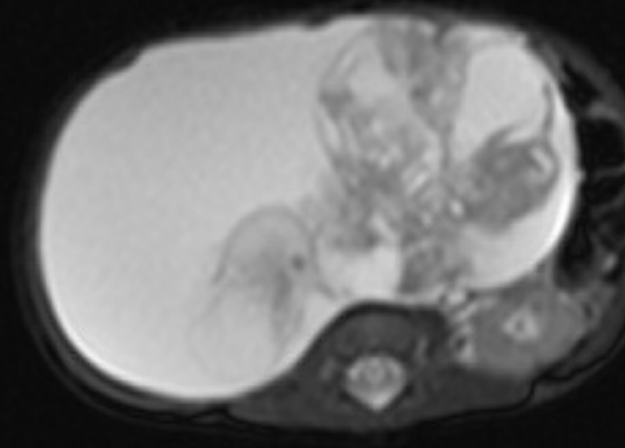
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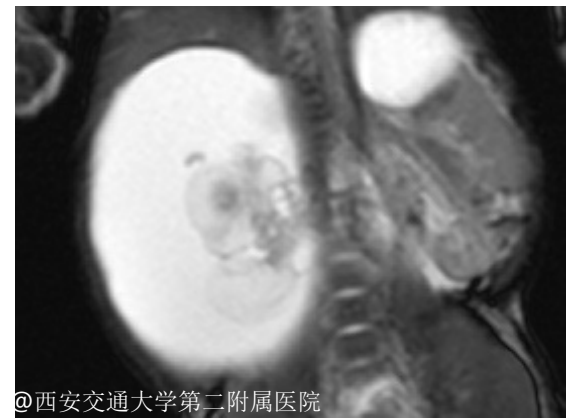
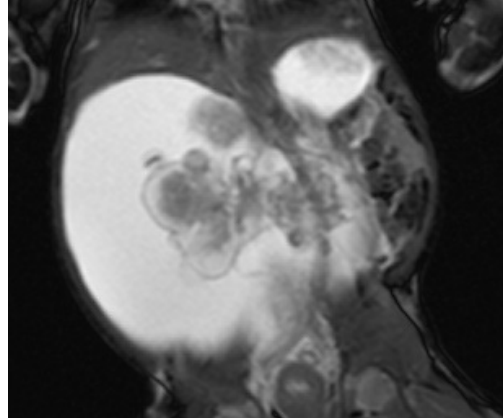
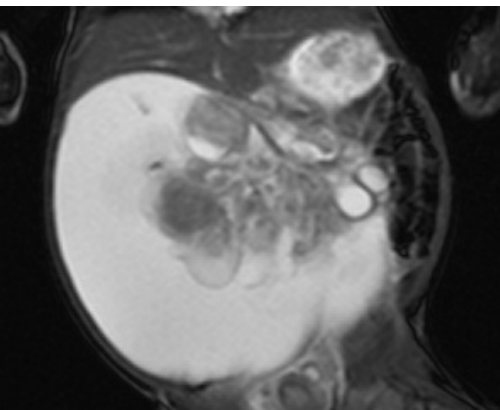
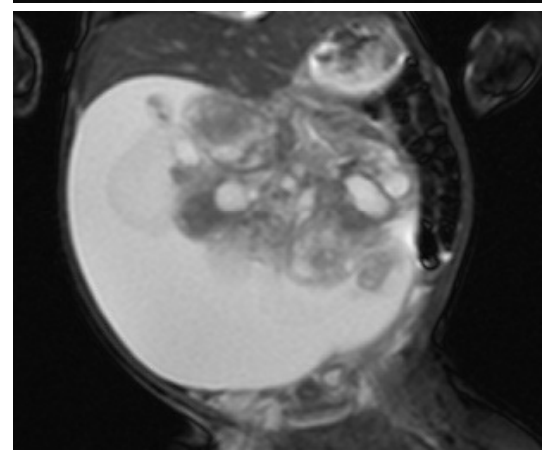
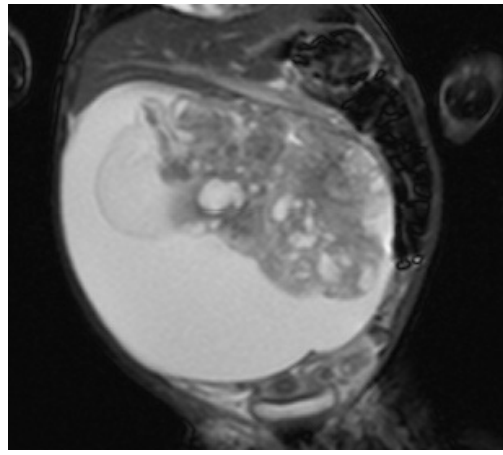
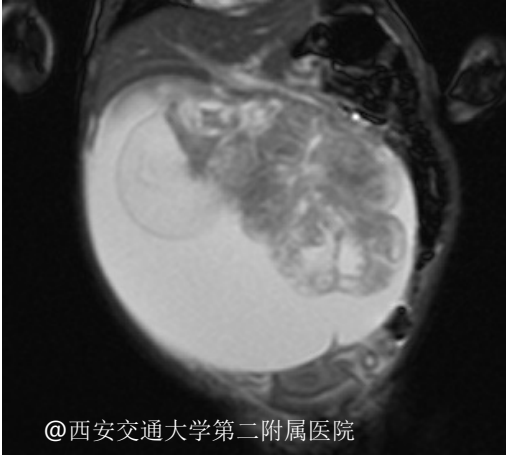
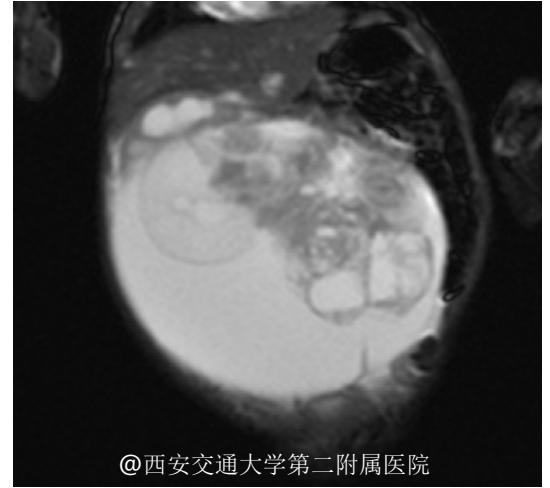
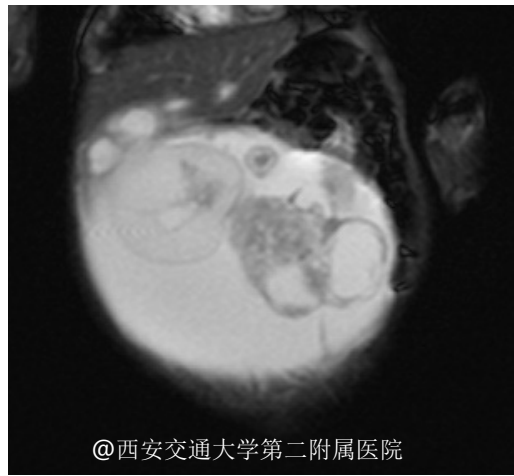
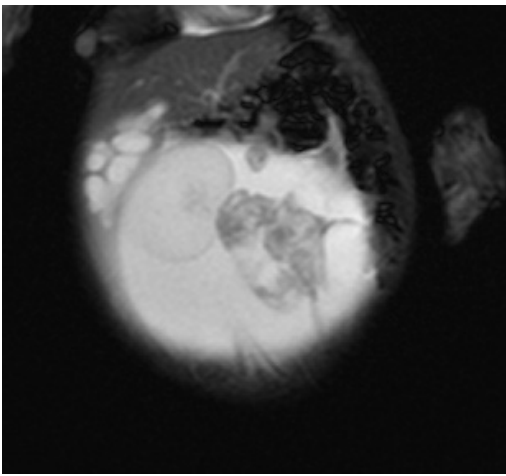
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诊断？

诊断思路

- 年龄： 婴儿， 出生3天
- 病史： 胎儿时期产检时发现腹部包块， 后包块逐渐增大
- 实验室检查： 甲胎蛋白（AFP） :177673.00ng/ml
- 影像检查： 腹膜后包块； 囊实性； 成分多样， 并包含钙化。

影像诊断： 畸胎瘤

病理诊断结果

病理证实：腹膜后寄生胎，内见未成熟神经组织。

寄生胎

➤ 临床特点:

- I. 发病率极低，以婴幼儿多见
- II. 寄生部位呈向心性
- III. 好发部位为腹腔及腹膜后
- IV. 男女发病无性别差异

寄生胎

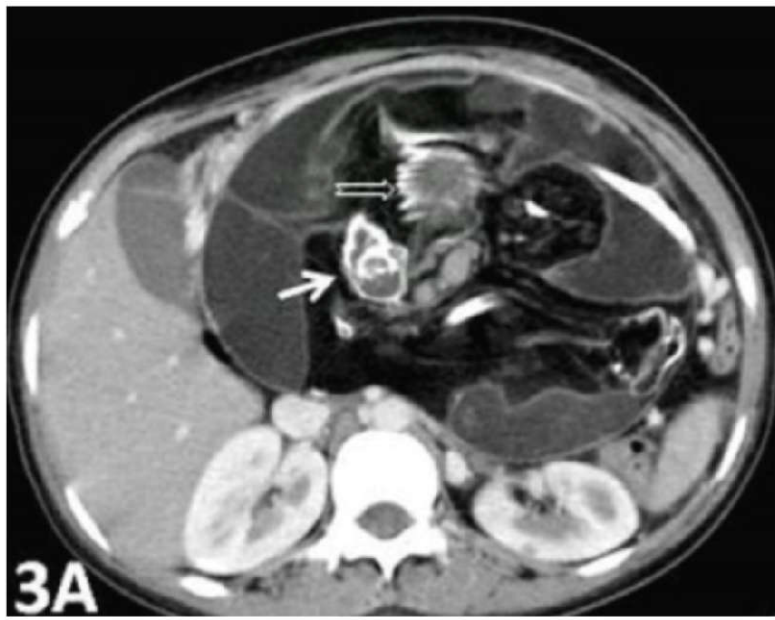
➤ 影像特点：

- I. 囊实性包块
- II. 相对实性部分形态不规则（头、体、肢体胚芽和胎盘结构）
- III. 肿块成分混杂，密度/信号不均匀
- IV. 肿块内看到轴骨系统是本病诊断的关键（约9%的寄生胎不具有发育完全的脊椎结构）

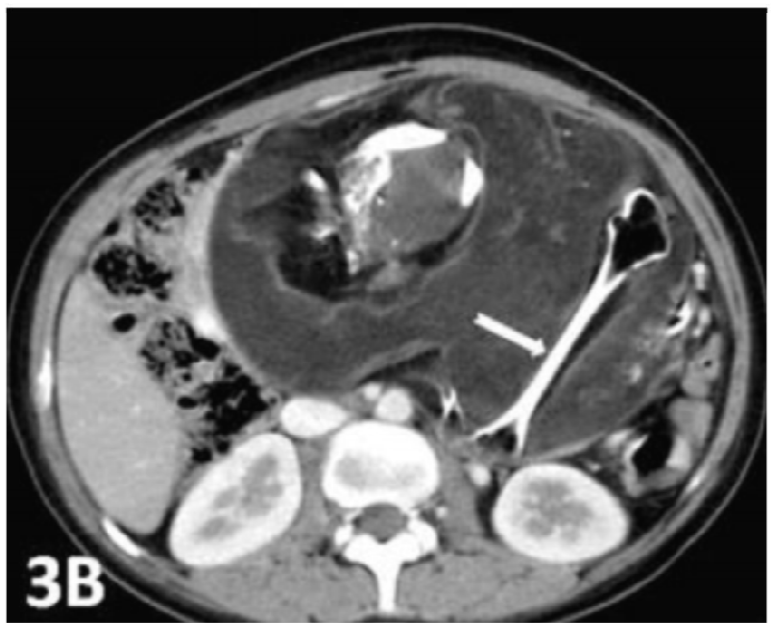


足月产新生儿，胎儿时期孕24周时产检发现腹部囊实性包块。

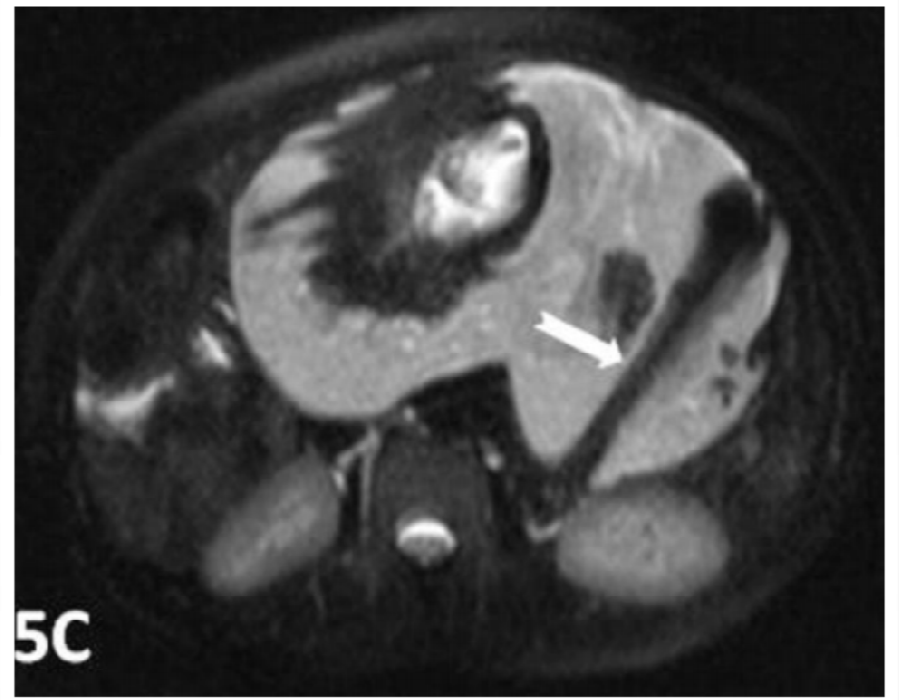
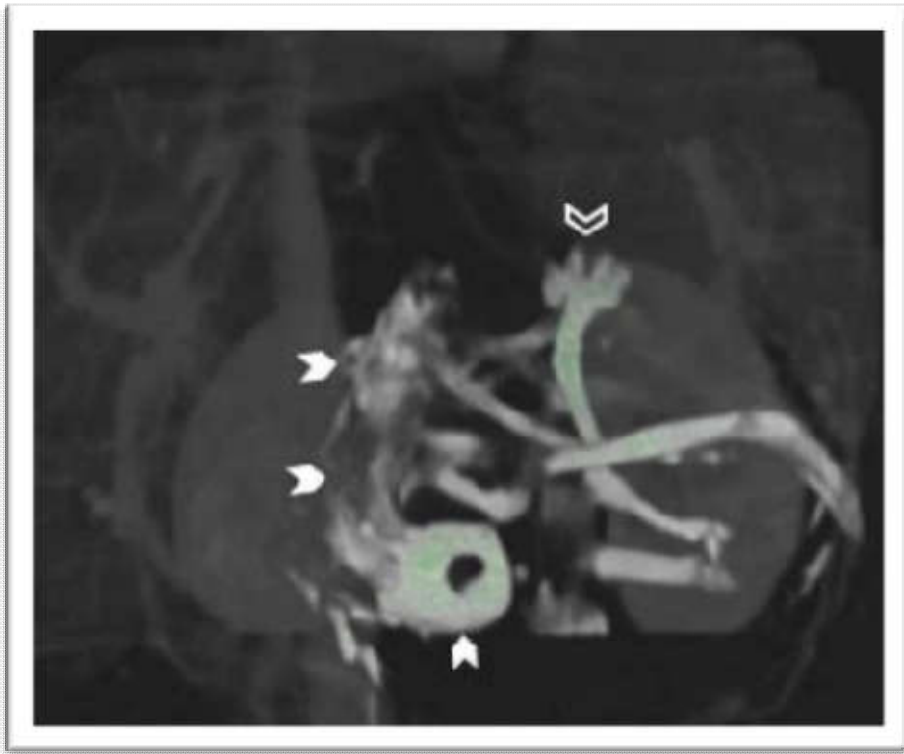
图片来源： Ji, Y., et al., Fetus in fetu: two case reports and literature review. BMC Pediatr, 2014. 14: p. 88.



患者：女，14岁；上腹部逐渐膨隆伴腹痛及频繁呕吐数年。



图片来源：Parashari, U.C., et al., Diagnostic dilemma in a neglected case of fetus-in-fetu solved with Magnetic Resonance Imaging and MDCT--a case report and review of literature. J Radiol Case Rep, 2011. 5(10): p. 29-37.



图片来源: Parashari, U.C., et al., Diagnostic dilemma in a neglected case of fetus-in-fetu solved with Magnetic Resonance Imaging and MDCT--a case report and review of literature. *J Radiol Case Rep*, 2011. 5(10): p. 29-37.

鉴别诊断

➤ 畸胎瘤：

✓ 婴幼儿

✓ 腹膜后

✓ 成分多样的囊实性包块

✓ 钙化：只有零星的骨质或钙化，有时可出现牙齿的高密度影，鉴别点缺乏轴骨系统。

小结

误诊原因：

- 1.对新生儿AFP认识不足；
- 2.忽略了约9%的寄生胎不具有发育完全的脊椎结构。

如果在**CT**上没有发现类似椎体、长骨的骨结构时，仍然不能完全排除寄生胎的诊断。

参考文献

- [1]. Parashari, U.C., et al., Diagnostic dilemma in a neglected case of fetus-in-fetu solved with Magnetic Resonance Imaging and MDCT--a case report and review of literature. J Radiol Case Rep, 2011. 5(10): p. 29-37.
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谢 谢！