

Granulomatous Disease with Hepatic and Splenic Infiltration: A Case Report

Molly Conroy and James Dolan[†]

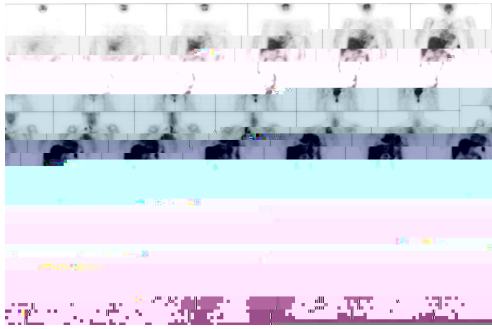


Figure 2 PET scan showing multiple foci of tracer uptake in the liver, spleen, mediastinum, supraclavicular and axillary areas.

An exploratory laparoscopy was performed to obtain tissue. Intraoperatively, multiple lesions were noted within the liver, spleen, and anterior aspect of the uterus (Figure 3). No other lesions were found within the peritoneum or omentum. Multiple core liver biopsies, and endometrial biopsies were obtained and a wedge biopsy, continuing lesions, was obtained from the left lateral segment of the liver. Final pathology of the liver lesions indicated noncaseating granulomatous inflammation suggestive of sarcoidosis. The endometrial biopsies were normal. Her serum angiotensin converting enzyme (ACE) level was normal.

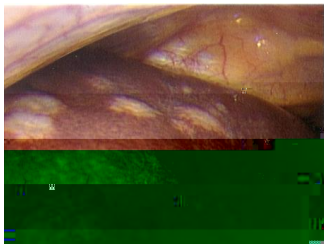


Figure 3 Multiple lesions within the left lobe of the liver as seen during laparoscopy

In this patient, the homogenous and circumferential appearance of the multiple lesions as well as the distribution and signal uptake on PET scan was suggestive of malignant or metastatic disease. We proceeded with laparoscopic biopsy as it would provide us both