

가
, T1
35
, T2
(inflammatory myofibroblastic tumor)
(myofibroblast)
가 2.5×3 cm
(Fig. 1). T1
2A), T2
(spots)
(Fig. 2B),
(Fig. 2C),
35
1
가 (ischium)
3×2.5×2 cm
35
가 6
가
vimentin - smooth muscle actin
(inflammatory myofibroblastic tumor)
(Fig. 3).

anthoma), (histiocytoma), (plasma cell granuloma), 가 (pseudosarcomatous myofibroblastic proliferation) 가 (3). (4)

(epithelial histiocyte)가 가

-smooth muscle actin (1-3).

, Epstein-Barr virus 가 (5).

T1

, T2

(6) 가 T2

, Makino (7)

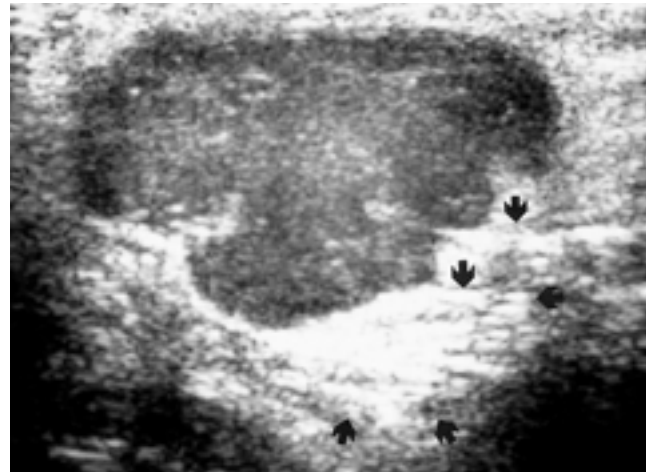
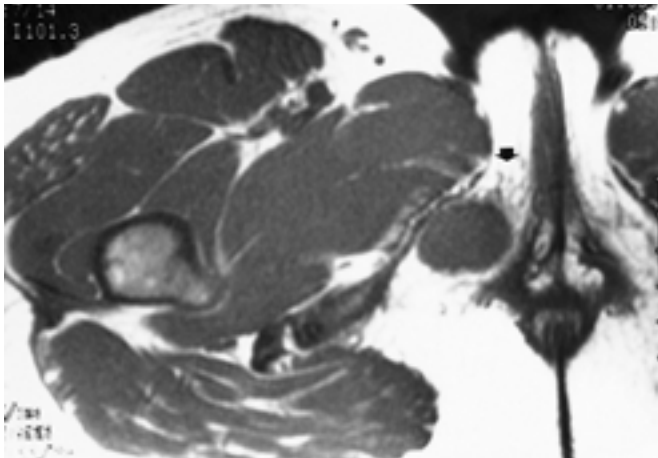
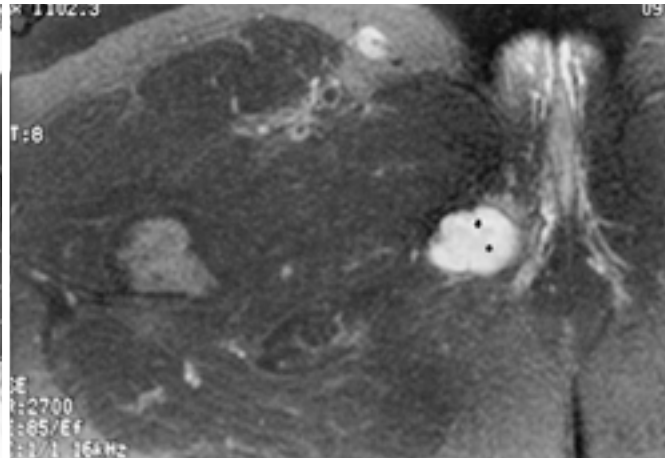


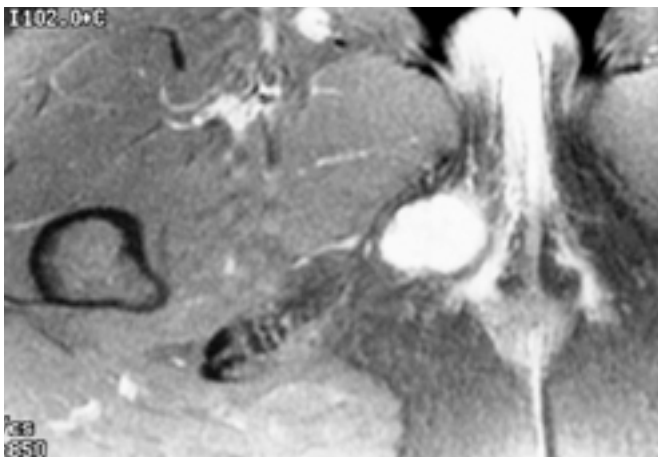
Fig. 1. Longitudinal ultrasonogram of right perineum shows a well-margined, lobulated hypoechoic mass with poorly-defined hyperechoic lesion in adjacent soft tissue (arrows).



A



B



C

Fig. 2. A. Axial T1-weighted image shows intermediate signal intensity mass with adjacent poorly-defined low signal intensity strands (arrow). B. Axial T2 weighted image shows inhomogeneous high signal intensity mass with internal bright signal intensity spots (arrows). C. Gadolinium-enhanced with fat suppression T1 weighted axial image shows strong enhancement.

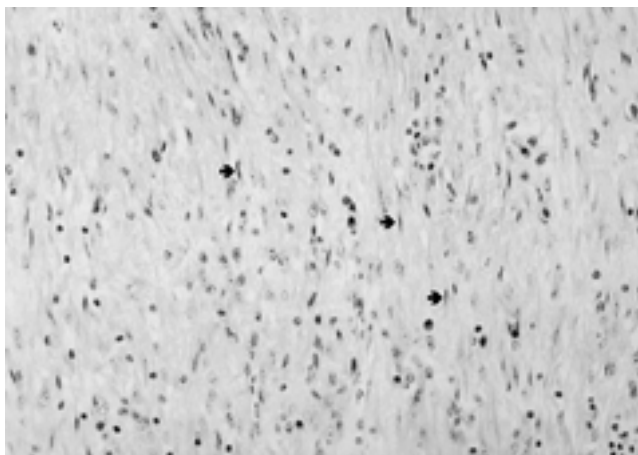


Fig. 3. Microphotograph shows spindle or ovoid shaped myofibroblasts (arrows) intermixed with lymphocytes, plasma cells and a few eosinophils (Hematoxylin-eosin stain, $\times 200$).

T2

T1

T2

가

(1 - 3).

(shwannoma),

(benign fibrohistiocytoma)

가

가

, T1

(8, 9),

1. Coffin CM, Humphrey PA, Dehner LP. Extrapulmonary inflammatory myofibroblastic tumor: A clinical and pathologic survey. *Semin Diagn Pathol* 1998;15:85-101
2. 2000;34:601-604
3. Bahadori M, Liebow AA. Plasma cell granulomas of the lung. *Cancer* 1973;31:191-208
4. Agrons GA, Rosado-de-Christenson ML, Kirejczyk WM, Conran RM, Stocker JT. Pulmonary inflammatory pseudotumor: Radiologic features. *Radiology* 1998;206:511-518
5. Freud E, Bilik R, Yaniv I, et al. Inflammatory pseudotumor in childhood: A diagnostic and therapeutic dilemma. *Arch Surg* 1991;126:653-655
6. Han MH, Chi JG, Kim MS, et al. Fibrosing inflammatory pseudotumors involving the skull base: MR and CT manifestations with histopathologic comparison. *AJNR Am J Neuroradiology* 1996;17:515-521
7. Makino K, Murakami M, Kitano I, Ushio Y. Primary intracranial plasma cell granuloma: A case report and review of the literature. *Surg Neurol* 1995;43:374-378
8. Doms GC, Haricak H, Solitto RA, Higgins CB. Lipomatous tumors and tumors with fatty component: MR imaging potential and comparison of MR and CT results. *Radiology* 1985;157:479-483
9. De Shepper AM, Parizel PM, Ramon F. Imaging of soft tissue tumors, *Springer* 1997:177-178
10. Murphey MD, Smith WS, Smith SE, Kransdorf MJ, Temple HT. Imaging of musculoskeletal neurogenic tumors: Radiologic-pathologic correlation. *Radiographics* 1999;19:1253-1280

Inflammatory Myofibroblastic Tumor of Perineal Soft Tissue: A Case Report¹

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Inflammatory myofibroblastic tumor is a rare benign condition of unknown etiology, and it may simulate malignancy. It is composed of myofibroblast, plasma cells and histiocytes and is found in lung, the liver, orbit, skin, mesentery, retroperitoneum and maxillary sinus. We report a case of inflammatory myofibroblastic tumor of perineal subcutaneous fat in a 35-year-old woman who complained of a palpable mass. Ultrasonography revealed a well-marginated lobulated hypoechoic lesion with peripheral poorly-defined hyperechoic strands in the subcutaneous fat of the right perineum. The lesion demonstrated low signal intensity on T1-weighted images and of heterogenous high signal intensity on T2-weighted images, compared with surrounding muscle. After intravenous injection of gadolinium, it showed clear homogeneous enhancement but poorly-defined adjacent strands. The final histologic diagnosis was inflammatory myofibroblastic tumor.

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