

: 1 1

2

35

1

가  
, T1

, T2

(inflammatory myofibroblastic tumor) (myofibroblast)

가  
가 2.5 x 3 cm

(1. 2).

(Fig. 1). T1  
2A), T2

(Fig.

(spots)

(Fig. 2B),  
(Fig. 2C),

35

1

가 (ischium)

3 x 2.5 x 2 cm

35

가 6

가

가  
vimentin - smooth muscle actin  
(inflammatory myofibroblastic tumor) (Fig. 3).

1

2

2001 5 25

2001 8 6

tory pseudotumor), (xanthoma), (inflamma-  
(fibrox-

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

(epithelial histiocyte)가 가

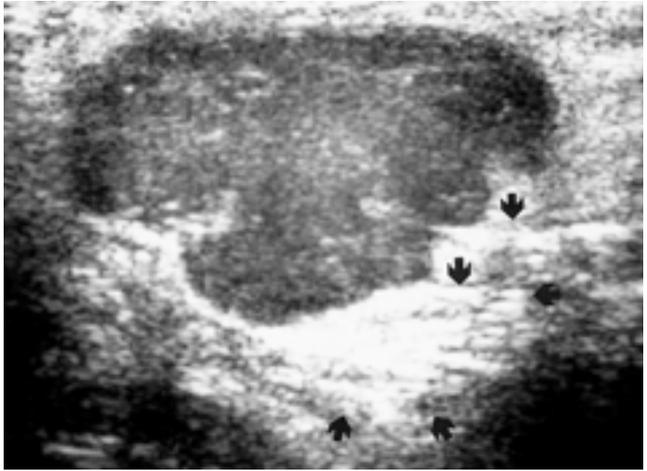
-smooth muscle actin (1-3).

, Epstein-Barr virus

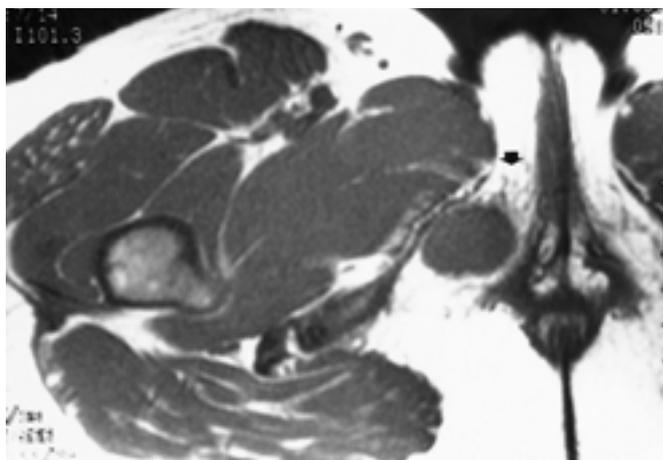
(5).

T1 , T2

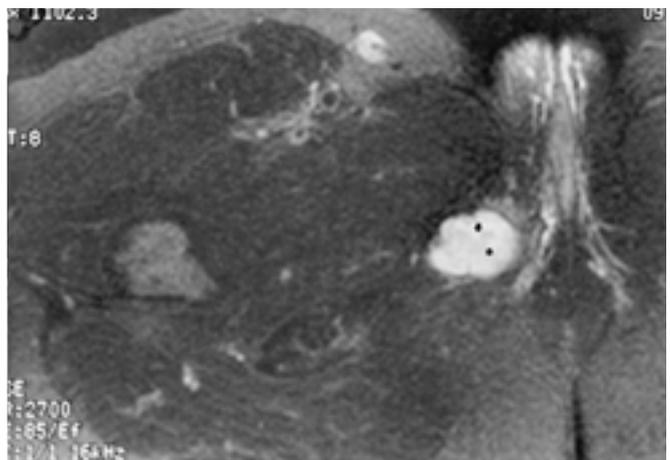
(6) 가 T2 가 , Makino (7)



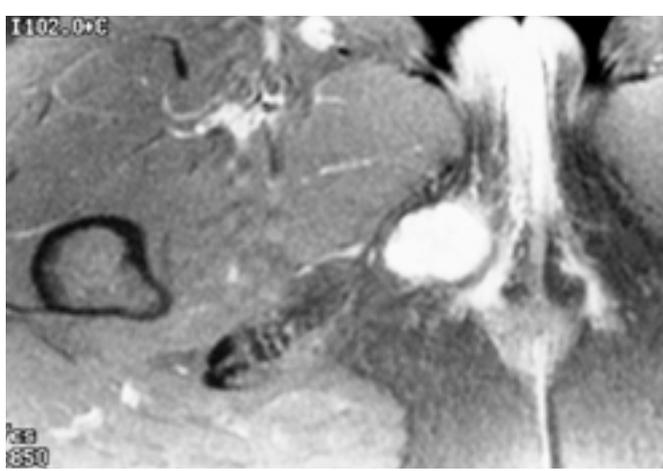
**Fig. 1.** Longitudinal ultrasonogram of right perineum shows a well-margined, lobulated hypoechoic mass with poorly-defined hyperechoic lesion in adjacent soft tissue (arrows).



**A**

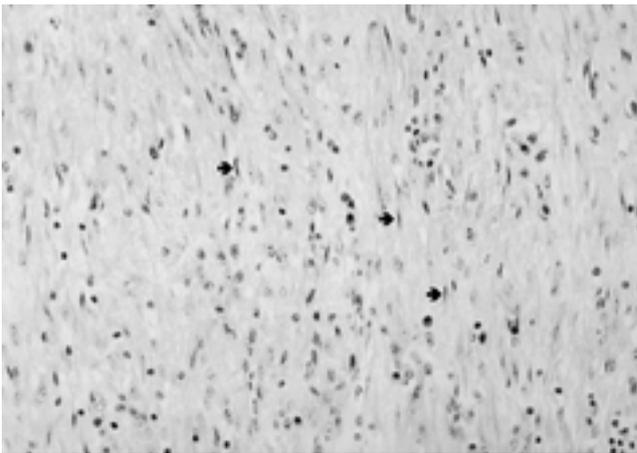


**B**



**C**

**Fig. 2. A.** Axial T1-weighted image shows intermediated 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  
T1  
(8, 9),

T1  
, T2  
(10).  
가  
가  
가  
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## Inflammatory Myofibroblastic Tumor of Perineal Soft Tissue: A Case Report<sup>1</sup>

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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.

**Index words :** Soft tissues, neoplasms  
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