

14 가 , 가 .

78 가 6 8 Kg 3

가 , 가

, CEA CA125

(trabeculation)

3 cm 가

5 x 4 cm 가

가

가 (Fig. 1).

: 1 1

2

1

3 x 4 cm

가

가

(Fig. 2).

4 cm 가

3 cm



Fig. 1. Abdomen ultrasonography shows ill-defined mixed echopattern mass in the anterior wall of urinary bladder. There is strong echogenic portion suggestive of calcification within the mass (arrow).

1

2

2000 2 22 2000 6 15

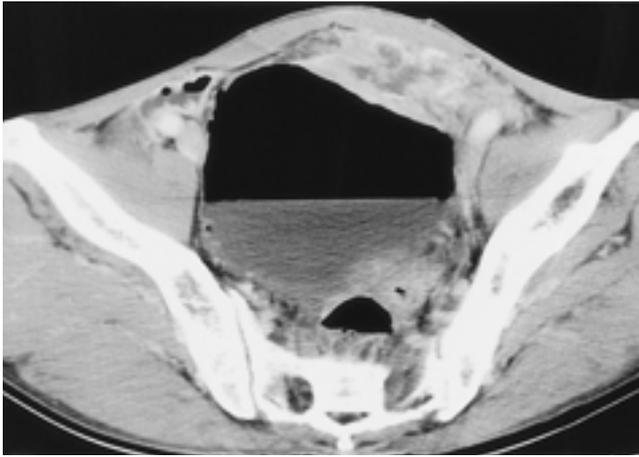


Fig. 2. Abdominal CT reveals peripherally enhanced mass like lesion below the anterior wall of urinary bladder.

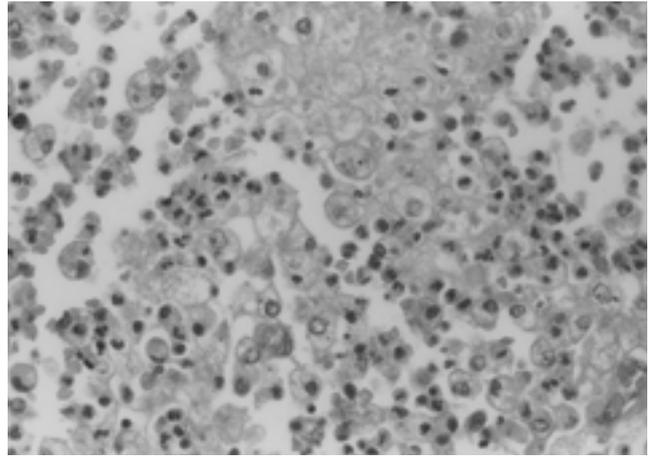


Fig. 3. Typical numerous lipid-laden macrophages(xanthoma cells) intermingle with chronic inflammatory cells suggesting xanthogranulomatous reaction. Haematoxyllin and eosin, reduced from $\times 400$.

(Fig. 3).

(1, 2, 3, 6, 7).

X-

(8).

가

14 가 (1, 2).

(1 - 4).

가

(1, 2, 5).

가

가 가

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Xanthogranulomatous Cystitis: A Case Report¹

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Xanthogranulomatous cystitis is a rare benign inflammatory disease that develops from a urachal remnant or occurs in association with pelvic surgery. Because it manifests as an infiltrative tumor-like lesion arising from the mid-line along the bladder dome and anterior abdominal wall, it is not easy to differentiate from urachal tumors.

The authors encountered one case of xanthogranulomatous cystitis, diagnosed by means of surgery and pathologic examination, and we report the related ultrasonographic and CT findings.

Index words : Bladder, inflammation

Bladder, US

Bladder, CT

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