



Splenic Mass



Fig. 1



Fig. 2



Fig. 3

This 56 year old man with a history of a reversed gastric bypass had an abdominal CT scan for evaluation of chronic nausea. The scan showed a 6 x 7 cm solid anterior **splenic mass**. A follow-up MRI confirmed the mass, which did not have clear-cut benign features. A PET-CT scan was performed for further evaluation of the mass and to assess for other lesions. The PET-CT showed that FDG uptake in the mass was identical to that in the remainder of the spleen, and no other lesions were identified. Based on this result, it was decided that the mass was likely benign and could be followed. A subsequent CT scan seven months later showed no change in the appearance of the mass.

How did the PET-CT help?

Isolated splenic masses are uncommon, but have a high (~80%) incidence of malignancy (mostly lymphomas but also metastases and sarcomas). Benign lesions include hemangiomas, hamartomas, and granulomas. PET-CT scans have been shown to have a high negative predictive value for evaluating splenic masses. Positive predictive value is lower due to false positive scans that may occur in cases of granulomatous disease¹⁻³.

1. Surg Endosc. 2008;22:2009-2012
2. Surg Endosc. 2008;22:2062-2066
3. J Nucl Med 2005;46:52-59