

Myxoinflammatory fibroblastic sarcoma of the wrist

Franz A. Fellner^{*1,2}, Christine M. Fellner¹ and Mario Scala¹

¹Central Radiology Institute, Kepler University Hospital, Medical Faculty of the Johannes Kepler University, Linz, Austria

²Medical Faculty of the Friedrich-Alexander-University of Erlangen-Nürnberg, Germany

A male adult patient came to the trauma outpatient clinic due to increasing pain and paresthesias beginning at the dorsal side of the left wrist three months ago, in the further time course slowly extending to the elbow. If the patient bended his wrist, these symptoms exacerbated. The clinical examination revealed a 3 x 2 cm tumescence and induration at the dorsal aspect of the wrist. For further exploration of this finding an MR examination of the wrist was requested.

The MR examination showed a fairly demarcated, significantly gadolinium enhancing mass, potentially a benign tumor, encompassing extensor tendons (Figures 1 and 2).

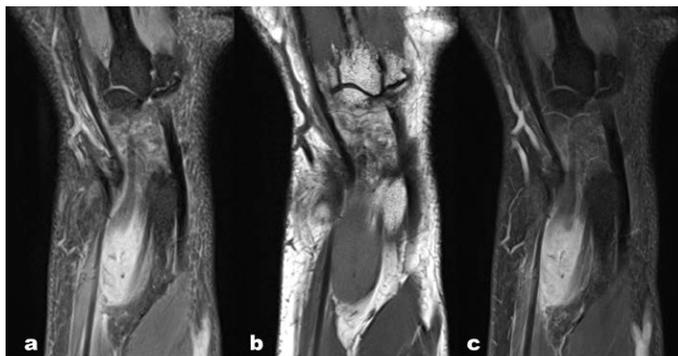


Figure 1. MR examination of the left wrist. a) PD-weighted fat suppressed, b) T1-weighted turbo spin-echo, and c) gadolinium-enhanced T1-weighted turbo spin-echo with fat suppression in coronal orientation show a fairly demarcated, significantly gadolinium enhancing soft tissue mass located at the dorsal side of the wrist.

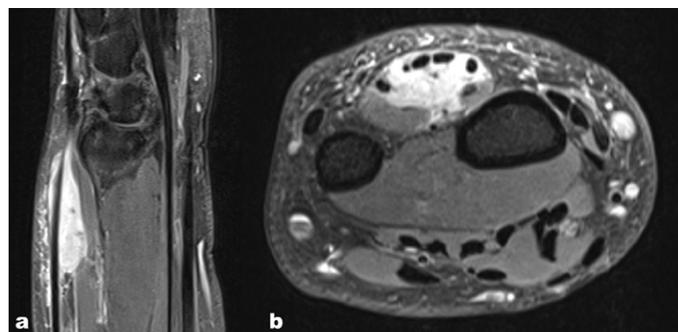


Figure 2. Sagittal PD-weighted fat suppressed (a) and transverse gadolinium-enhanced T1-weighted turbo spin-echo with fat suppression demonstrate that the mass surrounds extensor tendons.

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After the diagnostic procedures, the mass lesion was excised. Pathohistological workup delivered the final diagnosis of a myxoinflammatory fibroblastic sarcoma. Myxoinflammatory fibroblastic sarcomas are rare, malignant soft tissue neoplasms with about 200 cases reported in the literature [1], first described by Montgomery in 1998 [2]. They are low-grade malignancies, the incidence of metastases is very low, less than 2% [3].

References

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Correspondence to: Franz A. Fellner, Central Radiology Institute, Kepler University Hospital, Medical Faculty of the Johannes Kepler University, Linz, Austria, Medical Faculty of the Friedrich-Alexander-University of Erlangen Nürnberg, Germany, E-mail: franz.fellner@kepleruniklinikum.at

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