60 y/o female with bladder lesion

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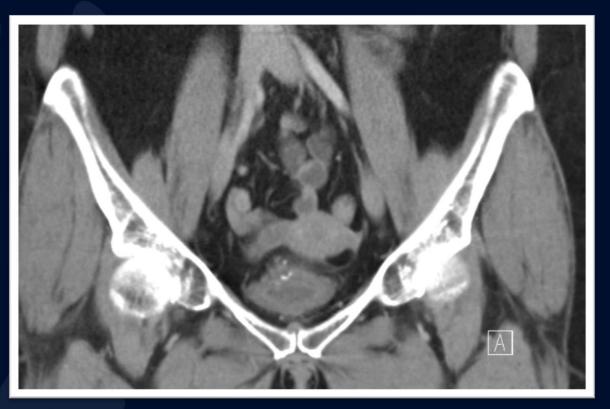
Axial CECT





Axial Non Contrast CT





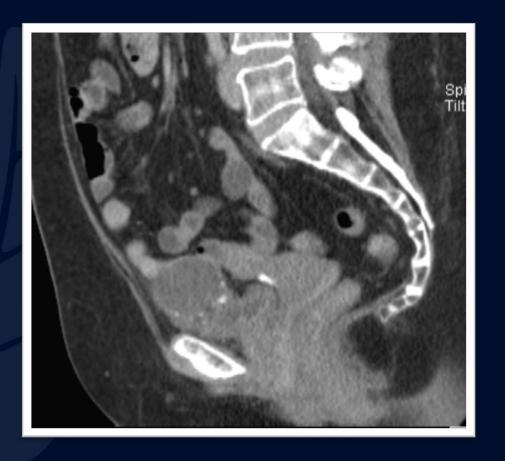
Coronal CECT





Coronal CECT





Sagittal CECT







Urachal Carcinoma





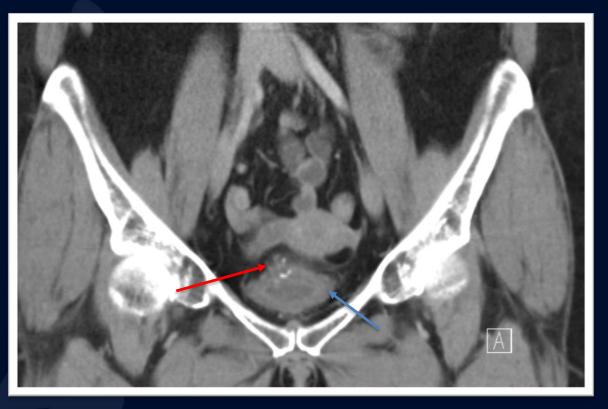
Axial CECT shows a mass of the dome of the bladder with peripheral calcifications. Mass extends to the anterior abdominal wall.





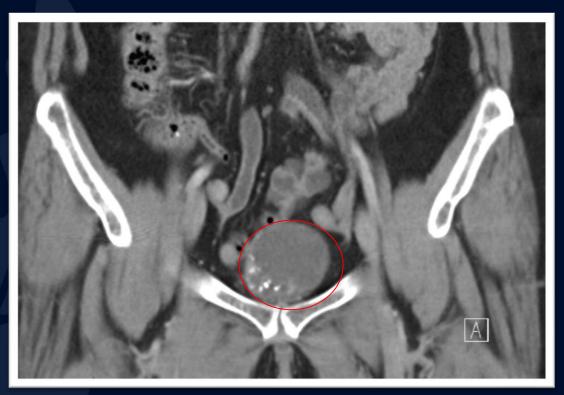
Axial Non contrast CT showing fluid attenuation within the mass





Coronal CECT showing bladder wall thickening (blue arrow) and the mass originating off the dome of the bladder (red arrow)





Coronal CECT showing the same mass with peripheral calcifications





Sagittal CECT demonstrating the mass (red arrow) and its association with the dome of the bladder (blue arrow)



Urachal Adenocarcinoma

Imaging Features

- Mass extending from the midline dome of the bladder to the anterior abdominal wall
- Dystrophic calcifications
- Bulk of tumor is extravesical
- Usually large at the time of presentation (~6cm)
- Irregular focal or diffuse bladder wall thickening



Urachal Adenocarcinoma

General Features

- Large at the time of presentation because they are generally asymptomatic until local invasion or metastatic disease
- 80% of urachal carcinomas are adenocarcinomas
- ~4th decade of life
- Urachus
 - Remnant of urogenital sinus and allantois, extending from the dome of the bladder to the umbilicus
 - Median umbilical ligament is its obliterated remnant
- DDx
 - Urothelial carcinoma
 - Generally demonstrates papillary intravesical growth, which is uncommon with adenocarcinoma
 - Propensity to develop at the base of the bladder



References

- Brant, W. E., & Helms, C. A. (2012). Fundamentals of diagnostic radiology. Philadelphia: Wolters Kluwer Health/Lippincott Williams & Wilkins
- Diagnostic Imaging for Radiology. (n.d.). Retrieved November, 4, 2017, from http://www.statdx.com/

