56 y/o male with left lower quadrant abdominal pain

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Epiploic Appendagitis
Axial CECT demonstrating an ovoid mass of fat density near the descending colon. Note the minimal fatty stranding (blue arrow).
Coronal CECT demonstrates ovoid mass with central fat density near the descending colon. Note the hyperdense enhancing rim (blue arrow).
Epiploic Appendagitis

Imaging Features

• Small, oval pericolonic fatty nodule/mass with hyperdense ring and surrounding inflammation
• May see a central high-attenuation dot, which represents the central thrombosed vessels.
• Infarcted tissue may calcify.
• Most commonly found at the rectosigmoid colon.
Epiploic Appendagitis

General Features

• Epiploic appendages are pouches of visceral peritoneum filled with fat and vessels off of the external colon adjacent to the taenia coli.
  – Greatest concentration in the cecum and sigmoid, sparing the rectum.
• Caused by ischemic infarction of these fatty appendages, usually as a result of torsion or venous thrombosis.
• Patients present with focal pain, tenderness, and mild fever
  – Abdominal pain that may mimic appendicitis, diverticulitis, and colitis
• Treatment: NSAIDs