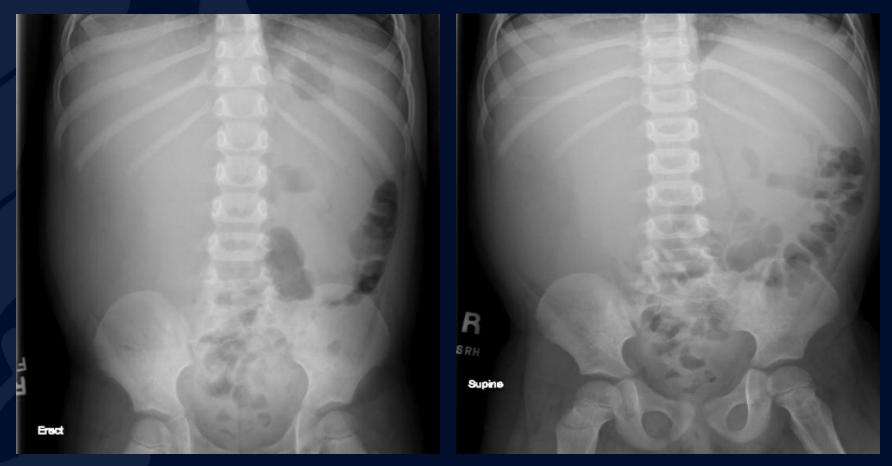
3-year-old girl with abdominal pain and vaginal bleeding

Charissa Joy Okang, MS3

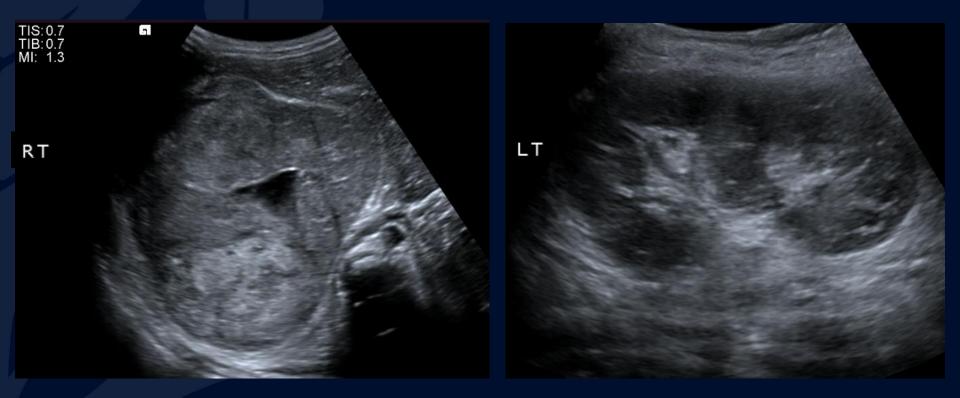


Radiograph





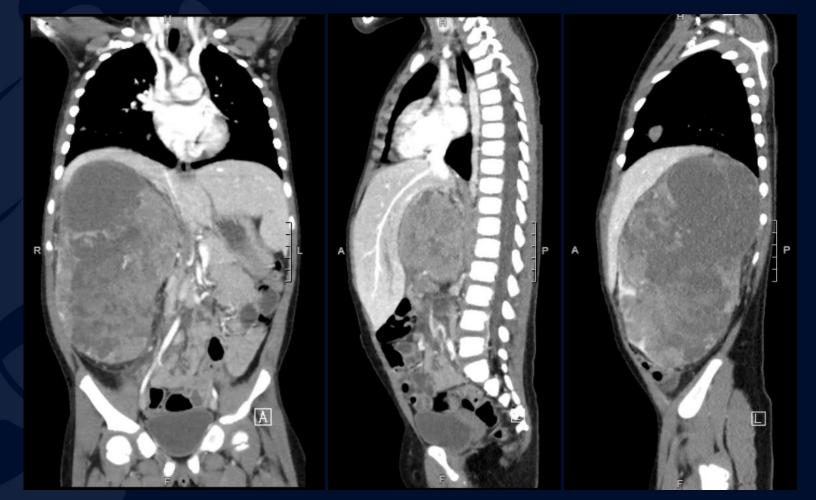
Ultrasound











HEALTH

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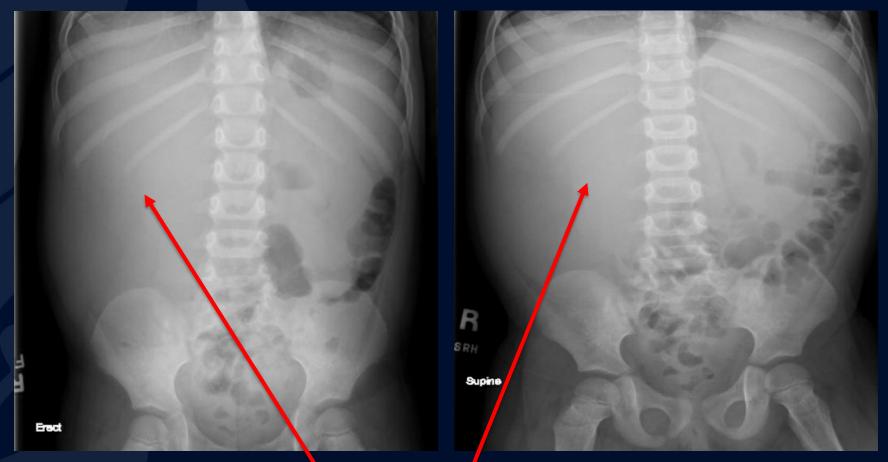




Nephroblastoma (Wilms Tumor)



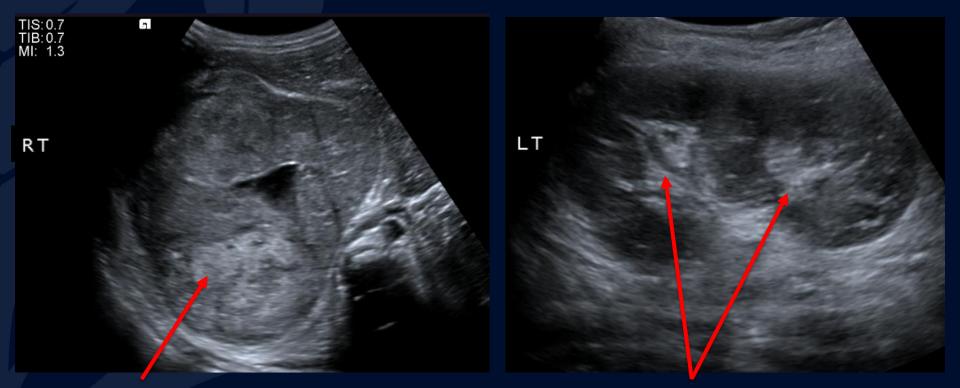
Radiograph



Right upper quadrant soft tissue mass



Ultrasound

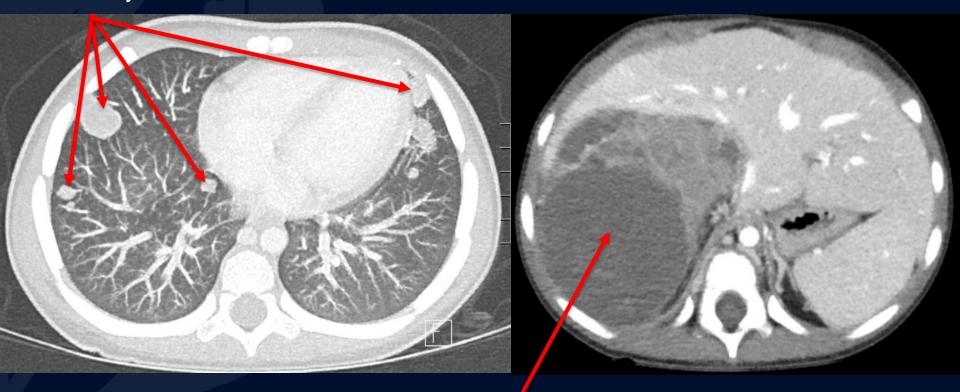


Heterogenous right renal mass

Duplex left kidney

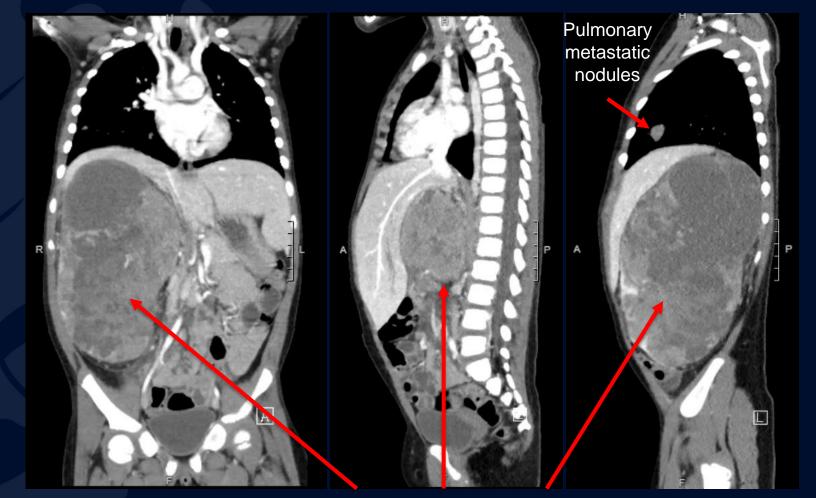


Pulmonary metastatic nodules



Heterogenous right kidney mass





Heterogenous right kidney mass



RADIOLOGY

Nephroblastoma (Wilms Tumor)

- Malignant tumor of primitive metanephric blastema
- Most common renal malignancy in children; ~ 500 new cases in the US per year
- 80% occur in children < 5 years old
- Most often incidentally discovered as a palpable mass
- May be part of multiple malformation syndromes (e.g., WAGR syndrome)
- Abdominal imaging used to determine extent of disease
 - CT or MRI preferred
 - Chest imaging for evaluation of lung metastasis
- Overall 5-year survival rate in patients with localized abdominal disease >90%
- Recurrence in ~15% of patients



Imaging Findings

Ultrasound

- Large heterogeneously hypoechoic maa
- "claw" of splayed residual kidney surrounding mass

СТ

- Large, poorly enhancing, heterogenous mass
- Often have well-defined margins or pseudocapsule
- Displaced adjacent organs
- +/- enlarged retroperitoneal lymph nodes
- +/- tumor thrombus in renal vein, IVC, right atrium
- May have local extension into perirenal fat or gross tumor rupture with ascites

MR

- T1: Heterogeneous, predominantly intermediate to low signal, may have foci of high signal due to blood products; heterogeneously hypoenhancing relative to normal renal parenchyma
- T2: heterogeneous, solid, predominantly high signal; purely cystic lesions are uncommon
- DWI: solid portions restrict diffusion

UCONN HEALTH

RADIOLOGY

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