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## CT和MRI诊断肝脏原发性透明细胞癌

### CT and MRI in diagnosis of hepatic primary clear cell carcinoma

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#### 中文摘要:

目的 探讨原发性肝脏透明细胞癌(PCCCL)的CT和MRI特征。方法 回顾性分析12例经手术病理证实的PCCCL的CT及MRI资料,其中10例接受CT、8例接受MR及DWI。结果 12例PCCCL共14个病灶,呈结节状或类圆形,瘤径1.6~9.8 cm,平均3.6 cm。10例CT平扫呈低密度;增强后动脉期8例肿瘤呈轻度强化,门静脉期持续强化,2例动脉期不均匀明显强化,门静脉期强化程度明显下降;延迟期所有病灶均为低密度,2例显示包膜延迟强化。平扫T2WI 6例呈混杂高信号,1例呈稍高信号,1例为稍低信号;4例T1WI正相位呈稍低信号,2例呈稍高信号,2例呈等信号,反相位8例病灶信号均减低,4例减低明显。DWI 6例呈不均匀高信号,2例呈等信号。增强扫描动脉期4例肿瘤不均匀明显强化,2例轻度强化,2例呈环形明显强化;门静脉期4例强化较动脉期减低,2例轻度持续强化,2例中心填充强化;延迟期7例病灶呈相对低信号,1例呈等信号,4例显示环形强化包膜。结论 PCCCL的CT及MRI表现具有一定特征;CT和MRI是诊断PCCCL的有效方法。

#### 英文摘要:

**Objective** To investigate CT and MRI features of primary clear cell carcinoma of liver (PCCCL). **Methods** CT and MRI findings of 12 patients with PCCCL proved by pathology were analyzed retrospectively. Ten patients underwent CT, and 8 patients underwent MRI. **Results** There were 14 nodular or oval lesions in 12 patients, with diameter ranging from 1.6 to 9.8 cm (mean 3.6 cm). All lesions showed low-density on plain CT. On enhanced CT, lesions in 8 patients showed slight enhancement at arterial phase and continued to strength at portal phase, while in 2 patients showed uneven significant enhancement at arterial phase but decreased at portal phase, and lesions in all 10 patients showed low density at delay period, and in 2 patients showed delayed enhanced envelope. On MR scan, lesions in 6 patients had mixed high signal on T2WI, in 1 patient showed slightly high signal, while in another patient showed slightly low signal. Lesions in 4 patients showed slightly lower signal, in 2 patients showed slightly higher signal, in the rest 2 patients showed equal signal on T1WI. The signals of all lesions reduced on anti-phase T1WI, in 4 patients reduced obviously. On DWI, lesions in 6 patients showed heterogeneous high signal, in 2 patients showed equal signal. On enhanced MRI, lesions in 4 patients showed relatively high signal with uneven significant enhancement, in 2 patients showed mild enhancement, and in the rest 2 patients showed ring-shaped significant enhancement at arterial phase. At portal venous phase, enhancement reduced in 4 patients, continued in 2 patients, while central filling enhancement was observed in the rest 2 patients. Lesions in 7 patients showed relatively low signal and in 1 patient showed equal signal at delayed phase. Ring-like capsule enhancement was found in 4 patients. **Conclusion** CT and MRI findings of PCCCL have certain characteristics, which are effective for diagnosis of PCCCL.

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