A 59 year old man, without history of pancreatitis or abdominal surgery, presented with a three-month evolving abdominal, persistent, diffuse, colicky, lasting pain, associated with significant weight loss and anorexia. Abdominal ultrasound, computed tomography scan and magnetic resonance imaging (Fig.s 1A, 1B, 1C) showed the presence of nodular formation with 3.8 centimeters, between the bladder and rectum, solid, with an adipose center and regular contour, apparently moving in successive imaging, leading our thought to a possible foreign body or liposarcoma.¹ During exploratory laparoscopy, a 26 g nodule was extracted, with 4 cm x 3.6 cm x 3.2 cm and a smooth, pale outer surface (Fig. 2A). In the middle we saw a yellowish central area of one cm (Fig. 2B). Histology revealed it had a central adipose tissue with fat necrosis, surrounded by dense fibrous tissue of collagen. During one year of follow-up, the patient remained asymptomatic.

REFERENCES