Desmoid Tumor
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History
Teenage female with palpable abdominal mass.

Diagnosis
Desmoid Tumor

Discussion
Desmoid is a fibroblastic tumor. Histologically these tumors are benign but locally infiltrative and aggressive. Abdominal wall desmoids arise from the aponeurosis of the abdominal wall musculature; 87% occur in women and are associated with estrogenic hormones (pregnancy or birth control pills). Trauma may be a contributory cause. Abdominal wall desmoids can also be seen in patients with familial adenomatous polyposis. Abdominal wall desmoids most often arise from the aponeurosis of the rectus abdominus and internal oblique muscles. Lesions can occasionally cross the midline or have intra-abdominal extension. Wide margin resection is the treatment of choice. Recurrence rate is between 20 and 30% which is lower than extra-abdominal desmoids. Antiestrogen, progesterone, lutein-releasing hormone and testosterone have been used in the management.

Findings
CT-Well-circumscribed abdominal wall mass with variable enhancement. The abdominal wall origin can be determined because the inferior epigastric vessel are inwardly displaced the mass.

Reference
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