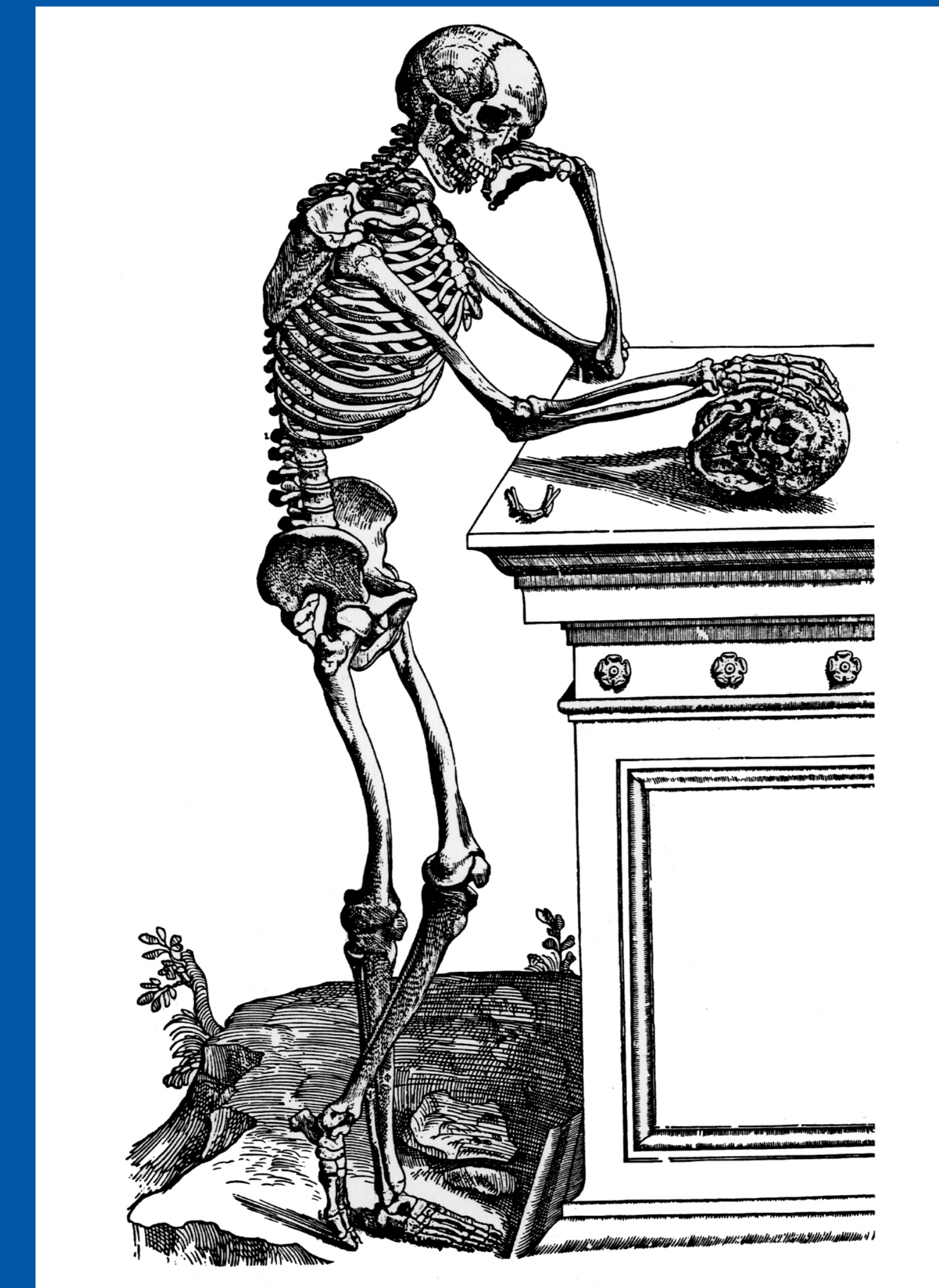


# 44th Annual Meeting Society of Skeletal Radiology

March 13 - 17, 2021

## CASE OF THE DAY: TUESDAY

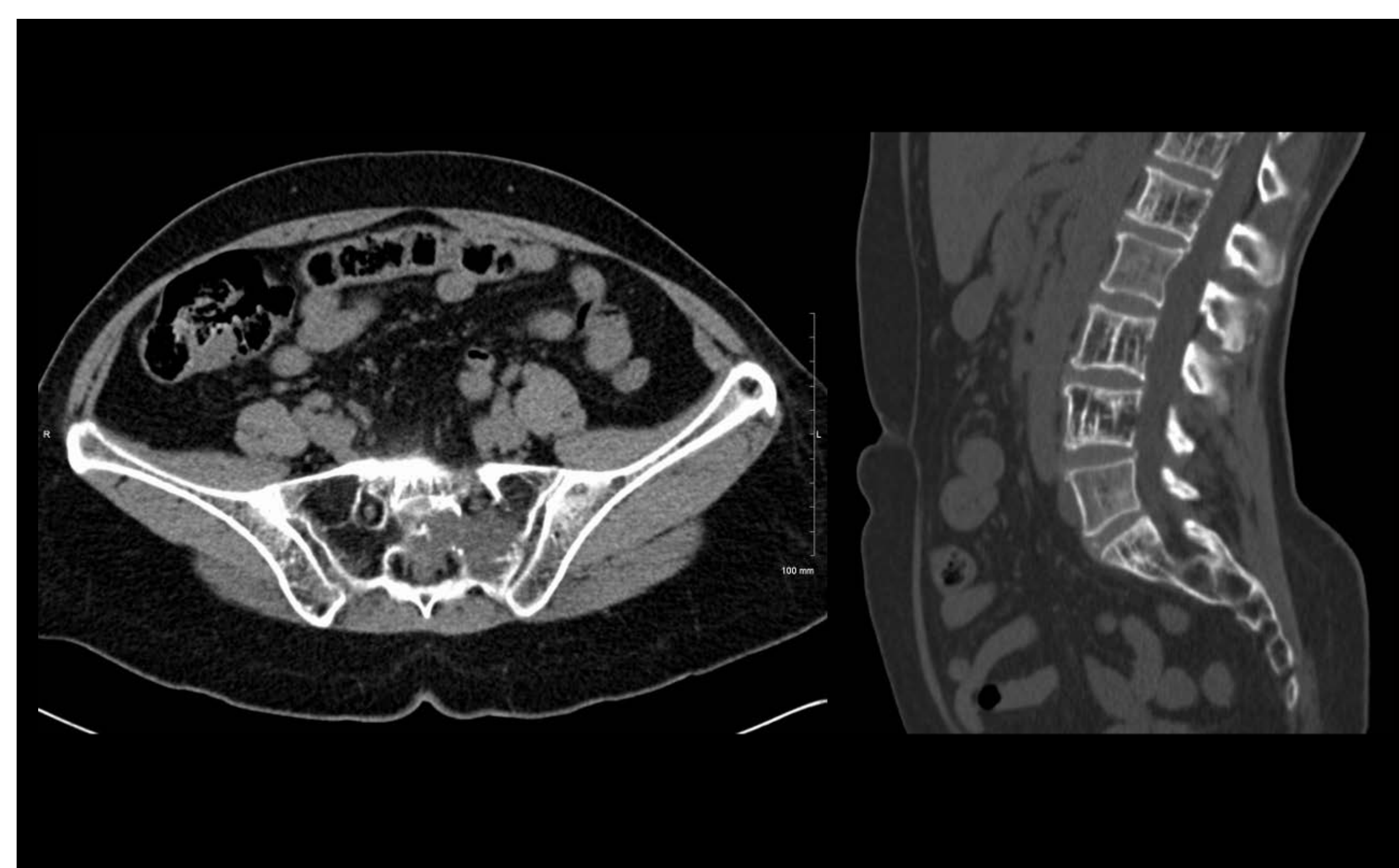
 #SSRBONE21COD5



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HCA Memorial Health University Medical Center, Savannah, GA

### HISTORY

- 61-year-old male presents to ED with
  - flank pain
  - nauseas and vomiting
  - fever
- h/o melanoma - removed without recurrence
- renal stone protocol CT obtained in ED



### DIAGNOSIS

#### Cystic Angiomatosis

- Diffuse involvement of bone by hemangiomas or lymphangiomatous lesions
- Cortex largely preserved with no periosteal reaction or soft tissue involvement
- Intraosseous hemangiomas
  - Most commonly involve the spine with classic "corduroy trabeculations"
  - Flat bone lesions often lytic, expansile, geographic foci - similar to metastatic disease or multiple myeloma
- Angiomatosis affects femur, ribs, and spine more often than pelvis, humerus, scapula, or other long bones
  - Can also mimic polyostotic fibrous dysplasia; Gorham-Stout Syndrome
  - Up to 65% of cases demonstrate visceral involvement

