

ARP Case Report n° 34: What is your diagnosis?

Caso Clínico ARP n° 34: Qual o seu diagnóstico?

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Case Presentation

A 62-year-old male presented to the emergency department with a two-week history of right testicular pain. His medical history included hypertension and prior left inguinal herniorrhaphy. On examination, both testes were within the scrotal sac, with no signs of inflammation or palpable nodules. The only notable finding was a small right hydrocele, confirmed by ultrasound (Figure 1). The patient was discharged with analgesic medication.

One month later, he returned to the emergency department with complaints of right testicular pain and marked bilateral scrotal enlargement, extending to the penile base, which had developed over the past two days. Initial investigations included a scrotal ultrasound and a pelvic computed tomography (CT) scan (Figure 2). He was referred to general surgery for further evaluation. One month later, a thoracoabdominal-pelvic CT scan and an endoscopic study were performed (Figure 3). What is your diagnosis?

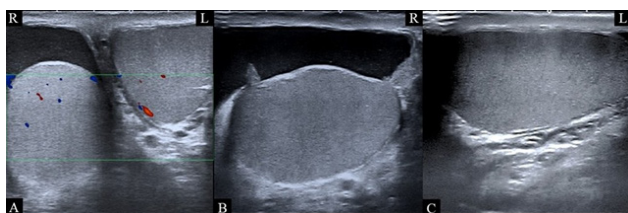


Figure 1 – Testicular and scrotal ultrasound (linear probe). (R - right; L - left).

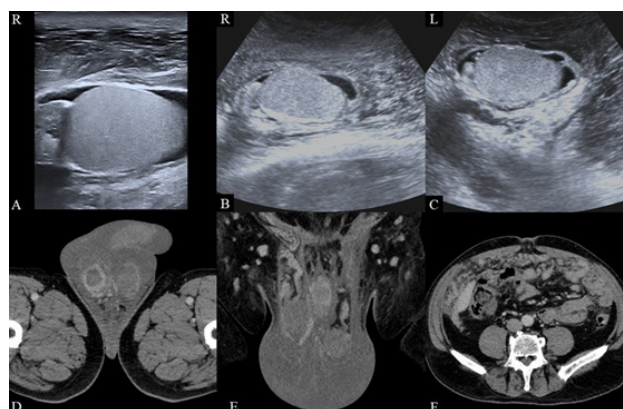


Figure 2 – A, B, C) Testicular and scrotal ultrasound performed using a linear probe (A) and a curvilinear probe (B, C). D, E, F) Pelvic contrast-enhanced CT images: axial slices (D, F) and a coronal slice (E) in the soft-tissue window. (R - right; L - left).

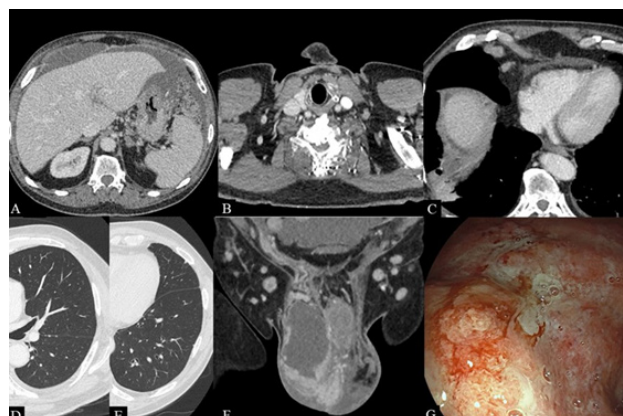


Figure 3 – A–F) Contrast-enhanced thoracoabdominal-pelvic CT images, featuring axial slices (A–E) and a coronal slice (F), displayed in the soft-tissue window (A, B, C, F) and pulmonary window (D, E). G) Upper gastrointestinal endoscopy.

Send your answer containing the diagnosis(s) to the email address actarp.on@gmail.com.

The names of the authors of the correct answers will be published in the next issue of the ARP in the case solution.

