

Open quiz

Answers must be received by Dr. Jacobson no later than **September 24, 1987**. The solution will be published in Volume 16, Number 8, November 1987. Individuals from the department or practice from which the case originated will not participate in the quiz. Thus, cases chosen for the quiz will not come from any of the cases presented at the closed meetings of the Society.

Case report 440

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Radiological studies

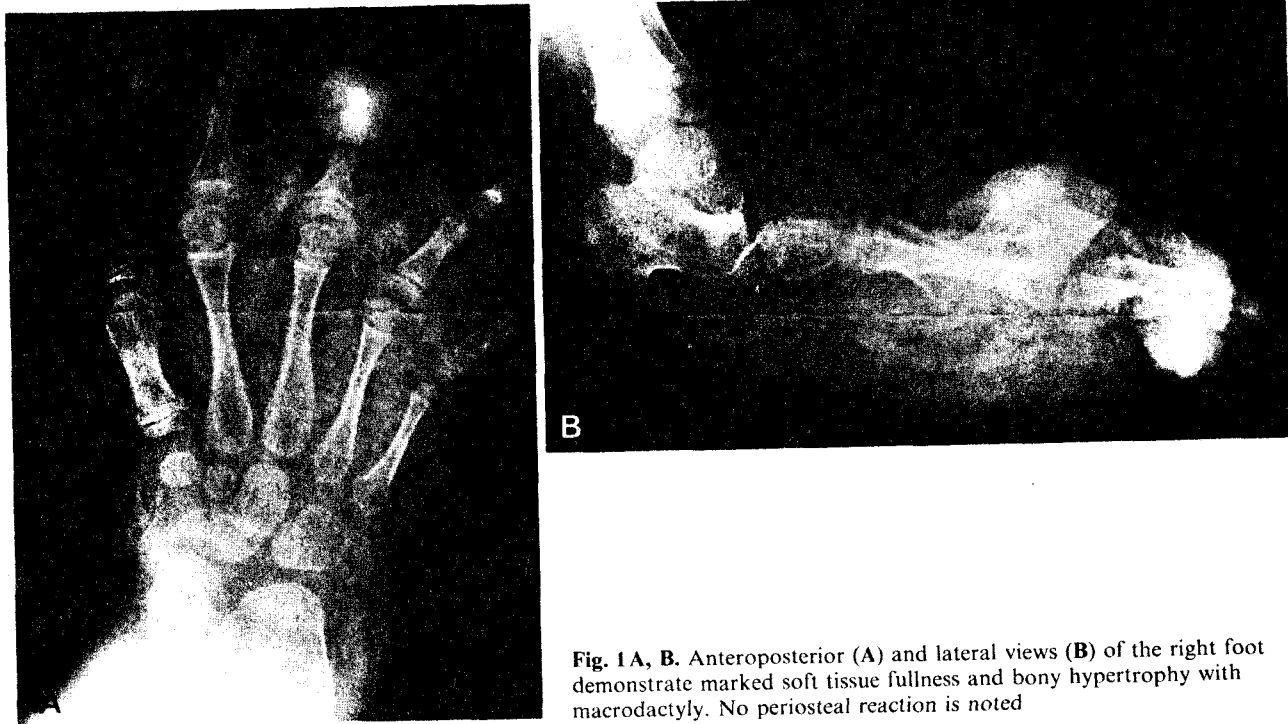


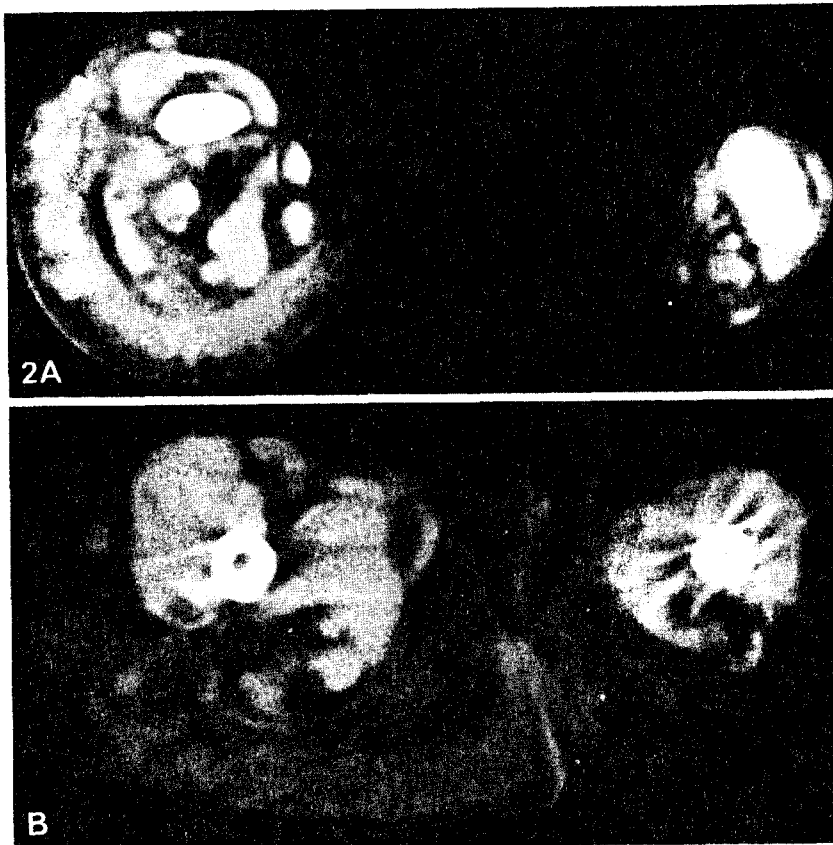
Fig. 1 A, B. Anteroposterior (A) and lateral views (B) of the right foot demonstrate marked soft tissue fullness and bony hypertrophy with macrodactyly. No periosteal reaction is noted

Clinical information

This 2 1/2-year-old girl presented with gross hypertrophy of the soft tissue of the right lower extremity (Fig. 1 A and B). At birth the infant was found to have a port-wine nevus of the right thigh and the region of the calf, as well as slight enlargement of the right lower extremity. As the infant grew, the nevus also appeared to grow, extending into

the perineal region and to the back of the child. The hypertrophy of the right leg became more exaggerated and the child was unable to learn to walk. By the age of 2 years the child had developed problems with the right lower extremity consisting of breakdown of soft tissue bleeding and cellulitis at the site of the skin lesions. A difference of 10 cm in the width of each calf existed. Venous varicosities of the right leg required stripping of the vein, when support hose failed to reduce the swelling. A CT scan performed to evaluate the extent of

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Further radiological studies

Fig. 2A, B. An axial computed tomogram (CT) scan through the right lower extremity at the levels of the mid-thigh (**A**) and buttock (**B**) demonstrates an extensive, vascular, soft-tissue mass extending posteriorly from the ankle to the perineal region. The diameter of the right thigh is greater than the left by a ratio of 2 to 1. Note the edema extending into the soft tissue on the right side and also extension of the tumor mass into the gluteal region. The left lower extremity was included for comparison

the disease prior to the surgical procedure that was planned (Fig. 2A and B) showed the extent of the vascular tumor mass extending from the ankle to

the perineal region. A biopsy was performed at the age of 15 months and a surgical excision was carried out at the age of 2 $\frac{1}{2}$ years.