Pelvic mass: Paraganglioma

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39-year-old male with hypertension, palpitation and pelvic mass.
mpMRI Findings:

- Small FOV T2 axial (A) and Coronal (B) images show a lobulated shape well defined mild heterogenous low signal intensity mass between the seminal vesicles involving the posterior bladder wall and abutting the base of the prostate.

- Mass demonstrates marked restricted diffusion on high B value DWI (C) and ADC (D) with diffuse avid enhancement (E).
MIBG (iodine-123 meta-iodobenzylguanidine) scan demonstrates marked uptake in the mass.
Pathology:

Paraganglioma involving the muscularis propria of urinary bladder.
**Discussion:**

- Paragangliomas are extra-adrenal pheochromocytomas and develop from extra-adrenal chromaffin cells.

- Patients with functional tumors often present with the classic triad of symptoms associated with catecholamine production: headache, tachycardia, and sweating.

- These symptoms may be exacerbated or instigated by micturition or the digital rectal examination.

- Paragangliomas often appear as mildly T2-hyperintense lobulated masses, with avid enhancement.

- Scintigraphy with iobenguane I 123 (MIBG) demonstrates localized uptake in the mass, which is caused by the presence of neuroendocrine receptors.