

A 48-year-old woman with abdominal pain and fever

B.J.T. Haarhuis*, A.M.M. Kotsopoulos, F.J. Vos

Department of Internal Medicine, University Hospital St Radboud, Nijmegen, the Netherlands, tel.: +31 (0)24-361 65 04, fax: +31 (0)24-361 65 19, e-mail: F.Vos@aig.umcn.nl, *corresponding author

CASE REPORT

A 48-year-old woman was admitted to our hospital because of abdominal pain and fever. She had had no complaints until three weeks previously, when she experienced progressive weakness and weight loss. Four days before admission she complained of continuous abdominal pain in the left upper and lower quadrant with radiation to the back, accompanied by nausea and fever. There was no history of irregular bowel functions, pyrosis, diarrhoea or dysuria. There were no previous hospital admissions and she was not taking any medication, except occasionally acetaminophen during the last few days. Physical examination revealed a temperature of 39°C, the pulse was 110 beats/min and blood pressure 130/80 mmHg. She also appeared pale. The abdomen was soft but tender especially in the left lower quadrant, without guarding. A rectal examination was unremarkable. Laboratory results were as followed: haemoglobin 6.7 mmol/l, leucocytes $25.8 \times 10^9/l$, C-reactive protein 451 mg/l, alkaline phosphatase 236 U/l, γ -glutamyltransferase 86 U/l, glutamic-pyruvic transaminase 44 U/l, glutamic-oxaloacetic transaminase 29 U/l, amylase 33 U/l and lactate dehydrogenase 377 U/l. Computed tomography of the abdomen is shown below.

WHAT IS YOUR DIFFERENTIAL DIAGNOSIS?

See page 404 for the answer to this photo quiz.

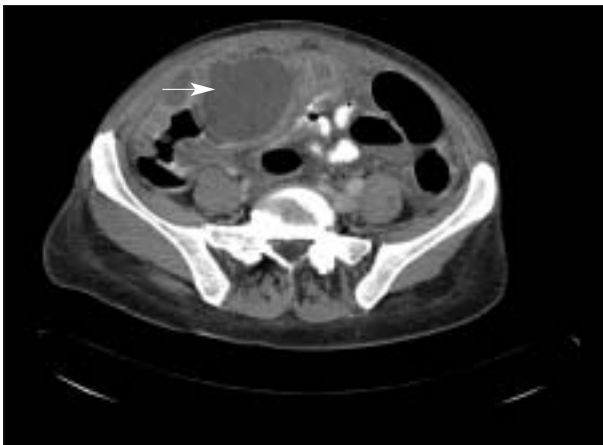


Figure 1
Computed tomography shows a large abdominal mass in the right lower abdomen (see arrow)

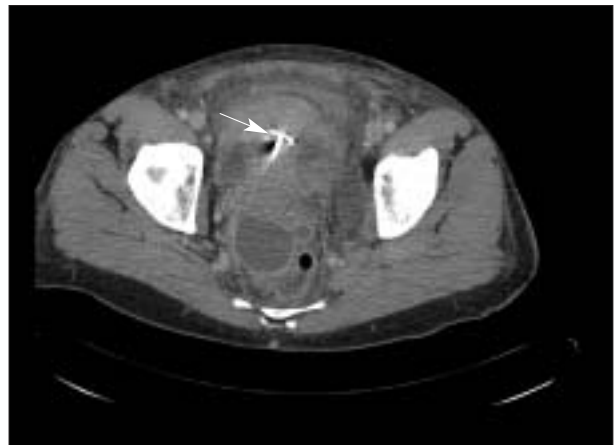


Figure 2
Computed tomography shows an intrauterine device in situ (see arrow)