

Abdominal pain with a remarkable origin

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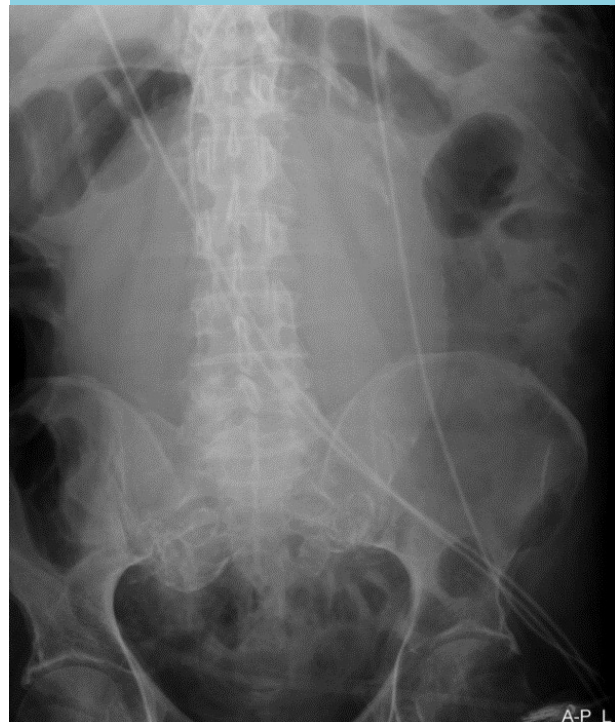
CASE REPORT

A 72-year-old man presented to the Emergency Department with generalised abdominal pain, anorexia and vomiting for the last two days. His medical history revealed diabetes mellitus type 2, hypertension and a haemorrhagic cerebrovascular accident.

For a few years, he had been complaining about pain in the right upper abdomen and episodes of diarrhoea once every six months which lasted for several days. His stools and urination were normal. He had no fever, but in the last few weeks he complained about dyspnoea and a non-productive cough.

At physical examination an adipose, hemiplegic man was seen. On auscultation, peristalsis was normal, but at palpation a painless, pulsating tumour was found. In the groin strong pulsations were palpable on both sides (left < right). Other physical examination did not reveal any abnormalities. Laboratory examination was normal apart from a C-reactive protein of 28 mg/l and leukocyte count $11.6 \times 10^9/l$. An X-ray of the abdomen showed a large mass in the centre of the abdomen (*figure 1*).

Figure 1. X-ray of the abdomen



WHAT IS YOUR DIAGNOSIS?

See page 271 for the answer to this photo quiz.