A 67-year-old woman was admitted for treatment of Basedow’s disease and secondary diabetes mellitus. Screening abdominal roentgenogram on admission revealed a well-defined, giant pelvic calcification with a diameter of 6.0 cm (Picture 1). Computed tomography and magnetic resonance imaging of the pelvis revealed a dense, heavily calcified mass in the myometrium (Picture 2 and 3: T2-weighted image). Leiomyoma of the uterus was diagnosed by gynecological evaluation.

Leiomyomas of the uterus are benign tumors that arise from the overgrowth of smooth muscle and connective tissue in the uterus; many soft tissue leiomyomas are calcified and can be detected radiographically (1). On admission to the department of internal medicine, abdominal roentgenogram is often used for screening evaluation. Physicians must consider the differential diagnosis of calcified pelvic masses, such as bladder stones, calcifications of aneurysms, calcified tumors including ovarian fibromas and plexus tumors, and calcified tissues caused by hemorrhage or inflammation (2).

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References