

# Giant hepatocellular carcinoma

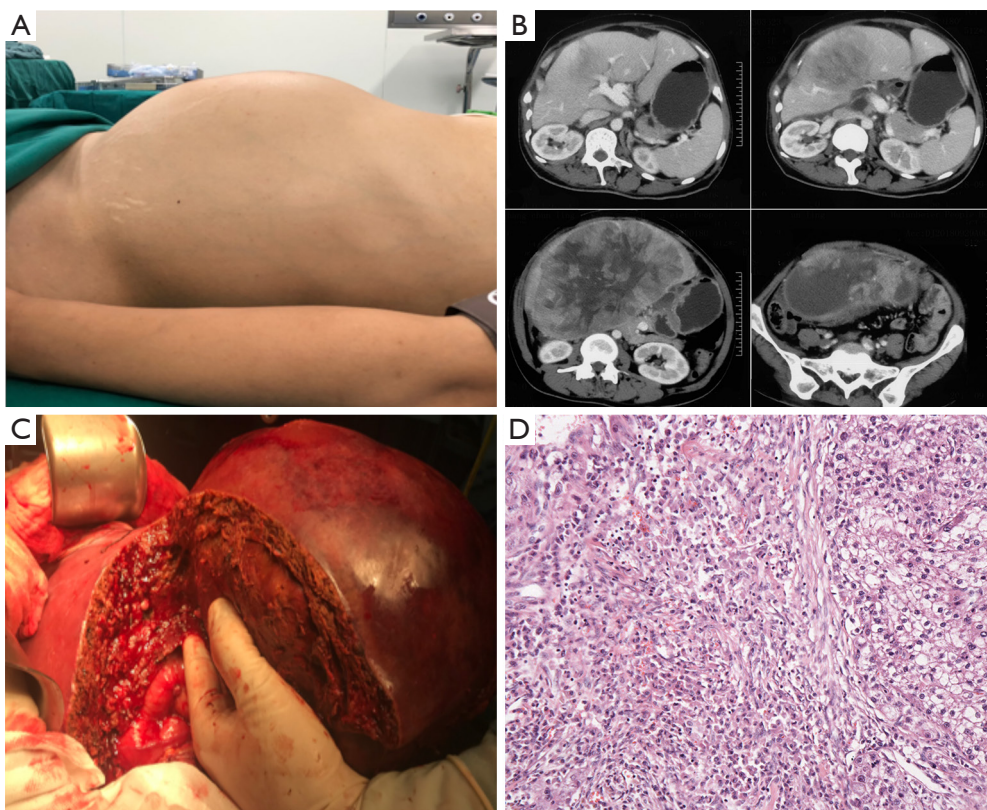
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A 40-year-old female presented with progressive abdominal enlargement for 6 months (Panel A), along with severe abdominal distension and amenorrhea. She had not gone to hospital because she assumed herself to be pregnant, until the belly grew out of control. A giant lesion in abdomen was detected by computed tomography (Panel B). The patient was infected with hepatitis B virus, but the liver function and  $\alpha$ -fetoprotein were normal. Additionally, no distant metastasis was found preoperatively. The pre-operative diagnosis of the tumor origin was unclear. Exploratory laparotomy was performed and an exophytic tumor originating from the liver

was exposed. The patient underwent major hepatectomy (Panel C). Postoperative pathology is moderately differentiated hepatocellular carcinoma (hematoxylin and eosin stain,  $\times 20$ ) (Panel D). Transarterial chemoembolization and sorafenib was administrated postoperatively. At a recent 3-month follow-up, no recurrence occurred.

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## Footnote

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declare.

**Ethical Statement:** The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Written informed consent was obtained from the patient for publication of this manuscript and any accompanying images.

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