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**Literature search results**

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**Search details**

Incidence of patients with both hepatic and splenic haemangiomas.

**Resources searched**

NHS Evidence; TRIP Database; Cochrane Library; CINAHL; EMBASE; MEDLINE; Google Scholar; Google Advanced Search

**Database search terms:** "hepatic h*emangioma*", "liver h*emangioma*", "splenic h*emangioma*", "spleen h*emangioma*", "h*emangioma* of the spleen", "h*emangioma* of the liver", (haemangioma* OR hemangioma*), (splenic OR spleen), (hepatic OR liver)

**Evidence search string(s):** (splenic OR spleen) AND (liver OR hepatic) AND (haemangioma OR hemangioma)

**Google search string(s):** (splenic OR spleen) AND (liver OR hepatic) AND (haemangioma OR hemangioma)

**Guidelines and Policy**

Nothing found

**Evidence-based reviews**

Nothing found

**Published research – Databases**

Emergent Orthotopic Liver Transplantation for Hemorrhage from a Giant Cavernous Hepatic Hemangioma: Case Report and Review

Citation: Journal of Gastrointestinal Surgery, 2011, vol./is. 15/1(209-214), 1091-255X (2011)

Publication Date: 2011

Abstract: Introduction: Cavernous hemangiomas represent the most common benign primary hepatic neoplasm, often being incidentally detected. Although the majority of hepatic hemangiomas remain asymptomatic, symptomatic hepatic hemangiomas can present with abdominal pain, hemorrhage, biliary compression, or a consumptive coagulopathy. The optimal surgical management of symptomatic hepatic hemangiomas remains controversial, with resection, enucleation, and both deceased donor and living donor liver transplantation having been reported. Case Report: We report the case of a patient found to have a unique syndrome of multiorgan cavernous hemangiomatosis involving the liver, lung, omentum, and spleen without cutaneous involvement. Sixteen years following her initial diagnosis, the patient suffered from intra-abdominal hemorrhage due to her giant cavernous hepatic hemangioma. Evidence of continued bleeding, in the setting of Kasabach-Merritt Syndrome and worsening abdominal compartment syndrome, prompted MELD exemption listing. The patient subsequently underwent emergent liver transplantation without complication. Conclusion: Although cavernous hemangiomas represent the most common benign primary hepatic neoplasm, hepatic hemangioma rupture remains a rare presentation in these patients. Management at a center with expertise in liver transplantation is warranted for those patients presenting with worsening DIC or hemorrhage, given the potential for rapid clinical decompensation. 2010 The Author(s).

Source: EMBASE
Available in fulltext from Journal of Gastrointestinal Surgery at EBSCOhost
Available in fulltext at Journal of Gastrointestinal Surgery; Collection notes: On first login to a ProQuest journal you will need to select 'Athens (OpenAthens Federation)' from Select Region, and then 'NHS England' from Choose your Library.

What's blood got to do with it? the radiographic spectrum of hemangiomas and their relatives within the abdomen and pelvis

Author(s) McGuire M., Ozsvath J., Yhu S., Friedman B., Hines J., Katz D., Siegel D.

Citation: American Journal of Roentgenology, May 2011, vol./is. 196/5 SUPPL.(A149), 0361-803X (May 2011)

Publication Date: May 2011

Abstract: Background Information: To review the epidemiology and pathology of hemangiomas and their related blood vessel tumors in the abdomen and pelvis, and to review and demonstrate their characteristics on imaging, including ultrasound, CT, and MRI. Educational Goals/Teaching Points: Hemangiomas are common and usually have diagnostic/typical findings in the abdomen and pelvis. They commonly affect the liver and spleen, but less commonly may affect other structures within the abdomen and pelvis, including the bowel, other solid organs, and peritoneal and retroperitoneal spaces. Hemangiomas need to be distinguished from the rarer but more aggressive variants and tumors, including hemangoendotheliomas, hemangiopericytomas, arteriovenous malformations, and angiosarcomas. Key Anatomic/Physiologic Issues and Imaging Findings/Techniques: The epidemiology and pathology of the various blood vessel tumors within the abdomen and pelvis will be reviewed and demonstrated, using multimodality imaging of case material from two institutions. The importance of
diagnosing such lesions, and understanding their prognosis, will be reviewed. Sample cases of various types of hemangiomas on ultrasound, CT, and MRI will be shown, and the pertinent imaging findings will be pointed out. Sample cases of "relatives" of hemangiomas on different modalities within the abdomen and pelvis will be shown. The differential diagnosis will be reviewed, as will the relevant literature. Conclusion: Hemangiomas are a common blood vessel tumor in which characteristic imaging findings lend to a diagnosis, as biopsy should be avoided in most cases. Additionally, it is important to have an understanding of their "relatives," which are occasionally more aggressive or malignant, and need to be resected.

**Source:** EMBASE

Available in fulltext from *American Journal of Roentgenology* at [Free Access Content](http://library)

Available in fulltext at *American Journal of Roentgenology*; Notes: Username: ulthlibrary/Password: library

**Erratum:** Coexistence of a giant splenic hemangioma and multiple hepatic hemangiomas mimicking a left adrenal neuroblastoma accompanied with multifocal hepatic metastases: Pyrite answer (Journal of Pediatric Hematology/Oncology (2009) (983))

**Author(s)** Wang J., Pei G., Yan J.

**Citation:** Journal of Pediatric Hematology/Oncology, March 2010, vol./is. 32/2(170), 1077-4114;1536-3678 (March 2010)

**Publication Date:** March 2010

**Source:** EMBASE

**Coexistence of a giant splenic hemangioma and multiple hepatic hemangiomas mimicking a left adrenal neuroblastoma accompanied with multifocal hepatic metastases: pyrite answer.**

**Author(s)** Wang J, Pei G, Yan J, Zhang G

**Citation:** Journal of Pediatric Hematology/Oncology, December 2009, vol./is. 31/12(983-4), 1077-4114;1536-3678 (2009 Dec)

**Publication Date:** December 2009

**Abstract:** A 4-month girl presenting with a giant mass in left adrenal region and multiple hepatic nodules was hospitalized. On the basis of computed tomography, ultrasound and epidemiology we preferred the diagnosis of a left adrenal neuroblastoma accompanied with multiple hepatic metastases preoperatively. But postoperative diagnosis was hemangiomatosis characterized by synchronous presence of a giant splenic hemangioma and multiple hepatic hemangiomas. We think that it is deservedly reported because of not only its rarity but also pitfalls of preoperative differential diagnosis and management principle.

**Source:** Medline

**Co-existence of a giant splenic hemangioma and multiple hepatic hemangiomas and the potential association with the use of oral contraceptives: a case report.**

**Author(s)** Chatzoulis G, Kaltzas A, Daliakopoulos S, Sallam O, Maria K, Chatzoulis K, Pachiadakis I

**Citation:** Journal of Medical Case Reports [Electronic Resource], 2008, vol./is. 2/(147), 1752-1947;1752-1947 (2008)

**Publication Date:** 2008

**Abstract:** INTRODUCTION: Hepatic and splenic hemangiomas are common benign tumors that mainly affect female patients. Giant splenic hemangiomas are extremely rare, especially when correlated with multiple hepatic hemangiomas.
Pathogenetic mechanisms between hemangiomas and oral contraceptives, as well as therapeutic approaches, are analyzed in this case report, in particular for the management of synchronous splenic and hepatic hemangiomas.

**CASE PRESENTATION:** We report here a 42-year-old woman with a giant splenic hemangioma, multiple hepatic hemangiomas and a history of oral estrogen intake for many years. At first it was difficult to determine the organ from which the giant hemangioma originated. Angiography proved extremely helpful in tracing its origin in the spleen. Hematomas in the giant hemangioma posed a significant threat of rupture and catastrophic hemorrhage. We left the small hepatic hemangiomas in place, and removed the spleen along with the giant splenic hemangioma.

**CONCLUSION:** Diagnostic pitfalls in the determination of the origin of this giant hemangioma, attribution of its origin to the spleen angiographically, the unusual co-existence of the giant splenic hemangioma with multiple hepatic ones, and the potential threat of rupture of the giant hemangioma are some of the highlights of this case report. Estrogen administration represents a pathogenic factor that has been associated with hemangiomas in solid organs of the abdominal cavity. The therapeutic dilemma between resection and embolization of giant hemangiomas is another point of discussion in this case report. Splenectomy for the giant splenic hemangioma eliminates the risk of rupture and malignant degeneration, whereas observation for the small hepatic ones (<4 cm) was the preferable therapeutic strategy in our patient.

**Source:** Medline
Available in fulltext from *Journal of Medical Case Reports* at [Free Access Content](#)
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Available in fulltext from *Journal of Medical Case Reports* at [BioMedCentral](#)
Available in fulltext from *Journal of Medical Case Reports* at [National Library of Medicine](#)

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**A case of cerebellar capillary hemangioma with multiple cysts.**

**Author(s)** Uyama A, Kawamura A, Akiyama H, Nakamizo S, Yamamoto K, Nagashima T, Uetani T, Takeda H, Yoshida M

**Citation:** Pediatric Neurosurgery, 2008, vol./is. 44/4(344-9), 1016-2291;1423-0305 (2008)

**Publication Date:** 2008

**Abstract:** Intracranial capillary hemangiomas are very rare, though several spinal capillary hemangiomas have recently been reported. We report here a case of intracranial capillary hemangioma with multiple cysts and review the current literature of similar cases. A 4-month-old girl was referred to our hospital for treatment of hydrocephalus and a cerebellar mass lesion. She presented with hemangiomas distributed widely over the body, as well as disseminated hemangiomas in the pleura, liver, spleen, pancreas, kidneys and vagina. Pathological examination of the specimen from the vagina confirmed the diagnosis of a capillary hemangioma made at another hospital. Radiological examination of the brain revealed a cystic mass lesion in the left cerebellar hemisphere with subsequent obstructive hydrocephalus. The cysts extended upward into the bilateral ventricle. Following neuroendoscopic fenestration of the cysts, resection of the left cerebellar mass was performed. Histological examination of the lesion demonstrated similarly sized capillaries, and the pathological diagnosis was confirmed as capillary hemangioma. There was no recurrence postoperatively. Our patient was treated successfully by surgical resection and neuroendoscopic procedures. Surgical intervention may therefore be indicated in intracranial capillary hemangiomas. 2008 S. Karger AG, Basel
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<th><strong>Tc-99m red blood cell imaging in a patient with blue rubber bleb nevus syndrome.</strong></th>
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<th><strong>Infantile hemangioendothelioma of the liver, spleen, and anterior abdominal wall</strong></th>
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spleen, and the anterior abdominal wall suggestive of multiple hemangiomas. Tc-99m phytate and Tc-99m RBC blood-pool imaging confirmed the diagnosis of multiple hemangiomas involving the liver, spleen, and the anterior abdominal wall.

**Source:** EMBASE
Available in fulltext from *Clinical Nuclear Medicine* at *East Midlands Ovid Archive Collection*

**An autopsy case of systemic hemangiomatosis with honeycomb-like liver and focal splenic sarcomatoid changes.**

*Author(s)*: Tsukagoshi H, Iwasaki Y, Toyoda M, Sato T, Takagi H, Mori M, Sasaki A, Kumakura H, Ishijima H, Aoki J

*Citation:* Internal Medicine, October 1998, vol./is. 37/10(847-52), 0918-2918;0918-2918 (1998 Oct)

**Publication Date:** October 1998

**Abstract:** An unusual autopsy case of systemic hemangiomatosis associated with honeycomb-like liver and splenic sarcomatoid changes is presented. The patient suffered from high-output ventricular heart failure secondary to hepatic arteriovenous shunting with hepatic failure, ending fatally due to disseminated intravascular coagulation and pulmonary bleeding. Postmortem examination revealed the characteristic distribution of vasoformative tumors presenting in the hematopoietic system including the liver, bone marrow, and spleen, with the liver appearing characteristically honeycomb-like. While these vasoformative tumors were mostly benign-appearing, partial shifts toward sarcomatoid change were observed in the splenic lesions.

**Source:** Medline
Available in fulltext from *Internal Medicine* at *J-STAGE*

**Our experience in the diagnostics of liver and spleen hemangiomas.**

*Author(s)*: Velkova K, Nedeva A

*Citation:* Folia Medica (Plovdiv), 1997, vol./is. 39/1(85-91), 0204-8043;0204-8043 (1997)

**Publication Date:** 1997

**Abstract:** We studied the potentials of conventional imaging methods (sonography, computed tomography) and invasive imaging methods (digital subtraction angiography, fine needle biopsy under sonographic guidance) in diagnosing liver and spleen hemangiomas. 384 patients underwent ultrasound investigation for suspected focal lesions of liver and spleen. Hemangioma was diagnosed in 83 patients. Computed tomography with contrast enhancement was performed on 62 of these 83 patients. The diagnosis of hemangioma was confirmed in 38 (61.3%) patients. In 22 patients the combination of sonography and computed tomography failed to provide indubitable diagnosis. Digital subtraction angiography was performed in 11 of them; the remaining 11 patients underwent fine needle biopsy under sonographic guidance. The authors achieve precision in the diagnosis of liver and spleen hemangiomas by employing combinations of above mentioned imaging methods.

**Source:** Medline

**Diffuse neonatal hemangiomatosis: CT findings in an adult.**

*Author(s)*: Latifi HR, Siegel MJ

*Citation:* Journal of Computer Assisted Tomography, November 1992, vol./is. 16/6(971-3), 0363-8715;0363-8715 (1992 Nov-Dec)

**Publication Date:** November 1992

**Abstract:** Diffuse neonatal hemangiomatosis (DNH) is a rare disorder that usually
presents in infancy and has a high mortality rate. We report a long-term adult survivor of DNH who presented with multiple calcifications in the bowel wall, liver, spleen, and adrenal glands on CT. Diffuse neonatal hemangiomatisis needs to be added to the causes of visceral calcifications.

Source: Medline

Hemangiomatosis of the liver and spleen: successful treatment with embolization and splenectomy.

Author(s) Tarazov PG, Polysalov VN, Ryzhkov VK
Citation: AJR. American Journal of Roentgenology, December 1990, vol./is. 155/6(1235-6), 0361-803X;0361-803X (1990 Dec)
Publication Date: December 1990
Source: Medline
Available in fulltext from American Journal of Roentgenology at Free Access Content
Available in fulltext at American Journal of Roentgenology; Notes: Username: ulhtlibrary/Password: library

Systemic cystic angiomatosis in pregnancy: a case presentation and review of the literature.

Author(s) Bardeguez A, Chatterjee M, Tepedino M, Sicuranza B
Citation: American Journal of Obstetrics & Gynecology, July 1990, vol./is. 163/1 Pt 1(42-5), 0002-9378;0002-9378 (1990 Jul)
Publication Date: July 1990
Abstract: Systemic cystic angiomatosis is the involvement of multiple organ systems with a congenital vascular malformation. A combination of vascular anomalies, namely lymphangioma and hemangioma, can coexist. The liver, spleen, kidney, and colon are the most commonly affected organs. The clinical presentation varies and generally reflects the involved organ system. A case of systemic cystic angiomatosis involving the spleen, liver, and kidney is presented. The diagnosis and management during pregnancy is discussed.
Source: Medline

Hereditary hemorrhagic telangiectasia with malignant lymphoma. An autopsy case.

Author(s) Kato S, Ichihara K
Citation: Acta Pathologica Japonica, March 1988, vol./is. 38/3(383-91), 0001-6632;0001-6632 (1988 Mar)
Publication Date: March 1988
Abstract: A 60-year-old Japanese woman was diagnosed at autopsy as having had hereditary hemorrhagic telangiectasia (HHT) associated with systemic hemangiomas. In her reproduction period, premenstrual epistaxis frequently occurred. At the age of 60, the patient died of malignant lymphoma. At autopsy, multiple telangiectatic spots were noted on the face, limbs and trunk. The paraaortic lymph nodes, which were enlarged and irregularly conglomerated, were histologically diagnosed as malignant lymphoma of the diffuse large cell type. Submucosal telangiectatic lesions were found in the gastrointestinal system from the oral cavity to the rectum. Cavernous hemangiomas were present in various visceral organs including the liver, spleen, small and large intestines, rectum, appendix, uterus, and jejunal and colonic mesenteries. There was an arteriovenous fistula in the left lung. Examination of her family pedigree showed that the patient had an autosomal dominant trait of inheritance. The pathogenesis of the systemic visceral hemangiomas observed in this patient was considered to be similar to that of harmartoma.
Cavernous hemangiomas of the liver and spleen.

Author(s) Kagalwala TY, Vaidya VU, Bharucha BA, Pandya AL, Kumta NB

Citation: Indian Pediatrics, May 1987, vol./is. 24/5(427-30), 0019-6061;0019-6061 (1987 May)

Publication Date: May 1987

Source: Medline

Available in fulltext from Indian Pediatrics at Free Access Content

Systemic hemangiomatosis.

Author(s) Sugimura H, Tange T, Yamaguchi K, Mori W

Citation: Acta Pathologica Japonica, July 1986, vol./is. 36/7(1089-98), 0001-6632;0001-6632 (1986 Jul)

Publication Date: July 1986

Abstract: An autopsy case of unusual vasoformative tumor is presented. The distribution of this tumor was restricted to the organ of the hematopoietic system such as the spleen, liver, and whole bone marrow. Although it may be considered as a variant of certain splenic hemangiosarcoma because of widespread dissemination, both the benign-looking histological features and specific distribution of this tumor suggest its hamartomatous nature. Several additional similar cases in the literatures are briefly reviewed from the viewpoint of systemic hemangiomatosis.

Source: Medline

Liver-spleen scintigraphy in patients with acquired immunodeficiency syndrome.

Author(s) Smith R

Citation: AJR. American Journal of Roentgenology, December 1985, vol./is. 145/6(1201-4), 0361-803X;0361-803X (1985 Dec)

Publication Date: December 1985

Abstract: The liver-spleen scintigrams of eight patients with the acquired immunodeficiency syndrome (AIDS) were reviewed to characterize the abnormal findings and to assess the diagnostic utility of scintigraphy in evaluating these patients for hepatic and splenic disease. Hepatosplenomegaly was present on the scintigrams of six patients. Additional findings included a solitary hepatic defect in a patient with Kaposi sarcoma and liver metastasis, multiple hepatic defects in a patient with multiple hemangiomas, decreased splenic activity in a patient with lymphoma, and markedly diminished splenic activity in a patient with thrombocytopenic purpura. Hepatosplenomegaly is the most common abnormal scintigraphic finding in AIDS patients. However, the presence of other hepatic or splenic parenchymal scintigraphic abnormalities suggests an underlying secondary pathologic process. Liver-spleen scintigraphy can be a reliable and valid adjunct to the diagnosis of occult hepatic or splenic disease in AIDS patients.

Source: Medline

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Hemangiosarcoma of the spleen and liver metastases: angiographic manifestations.

Author(s) Kishikawa T, Numaguchi Y, Tokunaga M, Matsuura K

Citation: Radiology, April 1977, vol./is. 123/1(31-5), 0033-8419;0033-8419 (1977 Apr)

Publication Date: April 1977
Abstract: The arteriographic findings in two cases of hemangiosarcoma of the spleen with liver metastases are described. These are the second and third reported cases of angiographically demonstrated malignant splenic tumors of vascular origin. Despite the absence of tumor vessels, there were multiple vascular takes in the arterial through the venous phase, mimicking benign cavernous hemangioma. Multiple metastases in the liver were the only clue to malignancy. Arteriography combined with liver-spleen scintigraphy not only provides information which is valuable in the preoperative diagnosis but also aids in management of the patient.

Source: Medline
Available in fulltext from Radiology at The Radiological Society of North America
Available in fulltext from Radiology at Free Access Content

Multifocal haemangiomatous malformation: a case report.
Author(s) Kings GL
Citation: Thorax, August 1975, vol./is. 30/4(485-8), 0040-6376;0040-6376 (1975 Aug)
Publication Date: August 1975
Abstract: A rare case of haemangiomatous malformation affecting the mediastinum, spleen, kidney, and liver is described. The literature concerning mediastinal haemangiomas is discussed.
Source: Medline
Available in fulltext from Thorax at National Library of Medicine
Available in fulltext from Thorax at EBSCOhost
Available in fulltext from Thorax at Highwire Press
Available in fulltext from Thorax at Free Access Content

Primary Multiple Hemangioma of the Spleen with Multiple Liver Metastases.
Author(s) Wright AW
Citation: American Journal of Pathology, November 1928, vol./is. 4/6(507-524.7), 0002-9440;0002-9440 (1928 Nov)
Publication Date: November 1928
Source: Medline
Available in fulltext from American Journal of Pathology at Free Access Content

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