

## Images in medicine

### Rare tumor in rare localization: humeral pallet intraosseous lipoma



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A 54-years-old man referred to our medical center for intermittent pain of his left elbow. On arrival, during the medical history taking, he reported neither old trauma of the left elbow nor weight loss. Physical examination of the elbow showed neither limitation of movements nor evidence of a palpable mass nor soft tissue swelling. X-rays of the elbow showed a cystic lesion in the distal humeral metaphysis. We performed a computed tomographic scan of the arm, which demonstrated a well-defined fat density intramedullary lesion within the distal metaphysis of the right humerus without signs of cortical destruction or periosteal reaction. Completed T1-weighted Magnetic Resonance images revealed an

intramedullary lesion with an equal signal intensity to subcutaneous fat. T2-weighted images also showed a high signal intramedullary lesion similar to subcutaneous fat. According to the typical imaging findings, a symptomatic intraosseous lipoma was suspected prompting the patient to undergo surgery for curettage and bone grafting. The patient's initial postoperative course was uncomplicated and so he was discharged with an oral analgesic to be reviewed in two weeks with x-ray control of the left elbow. The histopathological findings confirmed the intraosseous lipoma of the humerus. At the last follow-up of three years, the patient showed no pain and no recurrence of the bone lesion.



**Figure 1:** (A, B) radiographs of the left elbow revealed a cystic lesion in the distal humeral metaphysis (Arrows); (C) magnetic Resonance images showed an equal signal intensity to subcutaneous fat; (D) computed tomographic scan of the arm demonstrated a well-defined fat density intramedullary lesion within the distal metaphysis of the left humerus without signs of cortical destruction or periosteal reaction; (E) histological section at low magnification showed mature intraosseous adipose tissue (HE x100)