Focal Nodular Hyperplasia

PLAY PICMONIC

Benign Tumor
Benign-bunny
FNH is the second most common benign tumor of the liver after hemangioma. It accounts for approximately 7-15% of all liver tumors. It is considered a benign tumor with minimal risk of transformation into malignancy. Most FNH cases remain stable in size and do not require treatment. However, periodic imaging follow-up is necessary to monitor any changes.

Unknown Etiology
Question Mark
The exact cause of FNH remains unclear. However, it is believed to result from an abnormal blood vessel architecture within the liver, leading to localized hyperplasia (overgrowth) of liver cells.

Asymptomatic
Thumbs-up
Most patients with FNH are asymptomatic and the tumor is often discovered incidentally during imaging tests performed for unrelated reasons. When symptoms do occur, they may include abdominal pain, a palpable mass, or non-specific symptoms like fatigue.

Central Stellate Scar on Imaging
Central Star-Satellite Scarface
FNH typically appears as a well-defined, solitary mass on imaging studies such as ultrasound, computed tomography (CT), or magnetic resonance imaging (MRI). The characteristic central scar, also known as a stellate scar, is a common finding.

Conservative Treatment
Conservative-Reagan
Conservative management is the mainstay for FNH unless symptoms are severe or complications arise. Surgical resection may be considered in selected cases, particularly when diagnostic uncertainty exists or if symptoms persist despite conservative measures.

Excellent Prognosis
Doctor with Excellent Prognosis
Because the lesion is usually stable or regresses over time, routine surveillance imaging to follow asymptomatic patients with FNH is not indicated.