

## Diagnostic value of computerized tomography in differential diagnosis of liver nodules

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We designed this study to determine diagnostic value of computerized tomography (CT) that was proven nodules in explant liver. We compared between CT images of liver nodules before liver transplantation(LT) and histological findings nodules of explant liver. 75 (%73.5) patients were male and 27 (%26.5) patients were female. Average age was 47.3±11.8. LT was performed to cause 33 (%32.3) patients viral hepatitis, 7(%6.8) patients fulminant hepatitis, 27(%26.5) patients hepatocellular carcinoma (HCC) and 35 (%34.4) patients other etiologies. Serum alpha-fetoprotein median level was 4,3 ng/ml (0,5-608).63 of 102 (%61.8) patients were not determined nodules in explant liver. Histological findings in 19 (%18.7) patients HCC, 11(%10,7) displastic nodules and HCC, 7 (%6.9) patients displastic nodules, 2(%1.9) patients regenerative nodules in explant liver. We have reached CT images 33 of 102 patients. It was compared between nodules that similar locations explant liver and total 55 nodules that determine by CT. 17(%31) are regenerative nodules, 30 (%54.5) nodules HCC and 8(%14.5) nodules displastic in CT. 6 (%10.9) nodules regenerative nodules, 37 (%67.3) nodules HCC, 8(%14.5) nodules displastic, 3(%5) nodules displastic nodules and HCC, 1(%1.8) nodule was regenerative nodule and HCC focus in explant liver. Histological findings of explant liver are gold standart to diagnostic value of HCC diagnosis. The diagnostic value of CT to determine HCC sensitivity %70.7 (29/41) and specificity %92.9 (13/14) (p<0,001). On the other hand accuracy rate of CT decrease differential diagnosis of nonHCC pathologies. CT is effective radiologic method to determine diagnosis HCC in chronic liver diseases.

**Keywords:** Computerized tomography, hepatocellular carcinoma, liver nodule