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## [ PICTURES IN CLINICAL MEDICINE ]

## **Incidentally Discovered Paget's Disease of Bone**

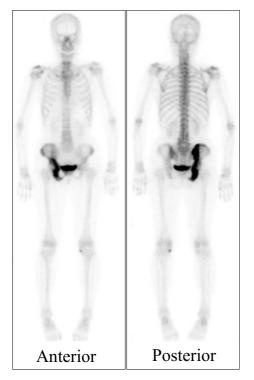
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Key words: Paget's disease of bone, computed tomography, bone scintigraphy, alkaline phosphatase

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Picture 1.



Picture 3.



Picture 2.

A 78-year-old woman visited our hospital for a preventive medical checkup. Computed tomography was performed to rule out renal cell carcinoma, as suggested by abdominal ultrasound. The result was negative, but it revealed heterogeneous sclerotic lesions with cortical thickening in the right ileum, suggesting Paget's disease of bone (PDB, Picture 1). Although she was asymptomatic, plain radiography showed sclerotic lesions (Picture 2), and whole-body <sup>99m</sup>Tcmethylene diphosphonate (MDP) bone scintigraphy demonstrated an increased uptake only in the right pelvis, reflecting localized activity (Picture 3). Laboratory tests showed mild elevations of serum alkaline phosphatase (ALP: 368 U/ L, reference range: 104-338 U/L) and bone-specific ALP (28.1 mg/L, 3.8-22.6 mg/L) with normal serum calcium, phosphorus and gamma-glutamyl transpeptidase levels. After excluding metastatic bone diseases, we diagnosed the patient with PDB. PDB is a disorder of accelerated bone remodeling that occurs in the aging skeleton, leading to profound changes in bone architecture and appearance. Our patient is being followed for the further elevation of serum ALP levels and bone pain, for which bisphosphonates are indicated (1, 2).

The authors state that they have no Conflict of Interest (COI).

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