

"Congenital wandering spleen is a very rare, randomly distributed birth defect characterized by the absence or weakness of one or more of the ligaments that hold the spleen in its normal position in the upper left abdomen. The disorder is not genetic in origin. Instead of ligaments, the spleen is attached by a stalk-like tissue supplied with blood vessels (vascular pedicle). If the pedicle is twisted in the course of the movement of the spleen, the blood supply may be interrupted or blocked (ischemia) to the point of severe damage to the blood vessels (infarction). Because there is little or nothing to hold it in place the spleen ""wanders"" in the lower abdomen or pelvis where it may be mistaken for an unidentified abdominal mass. The diagnosis of wandering spleen is suspected when the pain associated with an abdominal mass can be relieved by moving it toward the upper left quadrant of the abdomen, the normal position of the spleen. Wandering spleen may be confirmed by specialized examinations such as ultrasonography and CT scan that enable the physician to view the structure, size, and placement of the spleen within the abdomen or pelvis. Specialized ultrasound tests (i.e., Doppler studies) may show impaired blood flow in and out of the spleen. Radioisotopic scanning (technetium 99 sulfur colloid scan), another imaging test, allows the physician to determine how well the liver and spleen are functioning. Low spleen function (functional asplenia) may suggest that the organ is damaged as a result of arterial obstruction (infarct)."