ملخص شامل لمعلومات المحاضرة السادسة | pathology Done by: Ola Alahdab

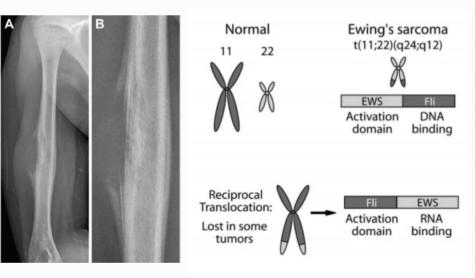
- * the location and the age are important to help you narrow your diagnosis.
- Tumors of Unknown Origin:

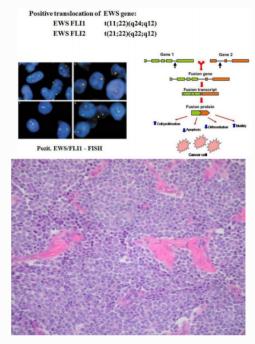
Ewing sarcoma: (ES) سرطان الدم والأنسجة الرخوة

- <20 years (between 10 and 20)
- in diaphysis.
- Malignant.

small blue cell tumor (when we stain those tumors by routine H & E stain, they appear blue because of the blue color of the nucleus which occupies 98% of the cell volume (small size tumor cell with large nucleus, little cytoplasm))

- called primitive neuro ectodermal tumor (PNE); have neuro ectodermal differentiation.
- Histologically: high grade primitive tumor
- second most common sarcoma of bone after osteosarcoma.
- -The most common translocation, which is present in about 90% of Ewing sarcoma cases, is **t(11;22) (q24;q12)**, which generates an aberrant transcription factor through fusion of **EWSR1** gene with **FLI1** gene.
- -Trx: neoadjuvant CT followed by surgery; long term survival now reaches 75%.
- this tumor infiltrating the soft tissue and elevating the periosteum causing Codman triangle.
- **fish analysis** is the most sensitive test for Ewing sarcoma using florescent insitu hybridization (FISH).
- **classic cytogenetic analysis method:** shows the <u>fusion protein</u> where the translocation is.
- The chromosome 11 is bigger than chromosome 22.

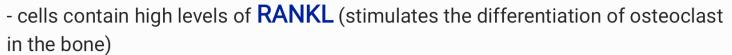




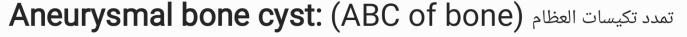
Giant cell tumor of bone: (osteoclastoma)

*the histology is composed of numerous <u>wall to wall osteoclast-like multi-nucleated giant</u> cells.

- in adults.
- in the epiphses.
- rarely malignant (95% is benign).
- locally aggressive neoplasm.
- Soup-bubble appearance expanding the cortex of bone. without infiltration to the extracortical space.
- Histologically:
- *sheets wall to wall.
- *multi-nucleated Giant cells (or osteoclast-like giant cell), -the tumor cells are the giant cells and the one in between are stromal cells (single mononuclear cells)-.

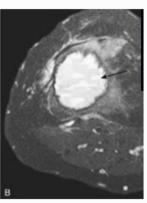


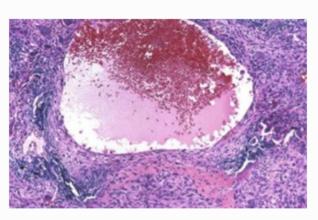
-Trx: curetting or resection.



- in adults.
- in the metaphysis.
- benign.
- blood-filled cyst with fibrous reaction around it. some argue that (ABC) is not a true neoplasm (probably reactive condition caused by previous trauma or infection).
- -**Trx**: curetting or resection.
- *If it is localized you can remove it without impact the function of the limb.



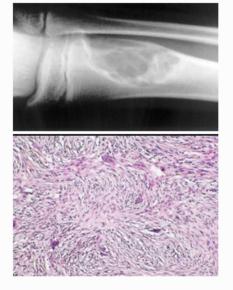






Non ossifying fibroma: (fibrous cortical defect (FCD) OR metaphyseal fibrous defect (MFD))

- Benign maybe a reactive, not true neoplasm
- in the metaphysis
- a fibroma in the bone.
- not destroying the surrounding structure & not elevating the periosteum
- well circumscribed.
- the biopsy looks like benign fibroma (mostly fibroblast some multinucleated giant cell).
- Histology: bland fibroblastic proliferation.
- May resolve spontaneously.



FIBROUS DYSPLASIA: (FD)

- a group of diseases or syndromes.
- <u>Not a real</u> tumor (a developmental abnormality of bone genesis due to mutations in **GNAS1** gene (**cAMP mediated osteoblast differentiation**).
- maxillary and mandibular bones in face are more affected, causing cherubism in children.
- Mazabraud syndrome: FD (monostotic or polystotic) + soft tissue myxoma (not a common tumor of soft tissue).
- McCune-Albright syndrome: polystotic FD + café-au-lait skin pigmentation (brownish pigmentation of the skin) + endocrine abnormalities (precocious puberty).
- somehow <u>similar to Paget disease</u>, differentiate between them histologically: McCune-Albright syndrome has a <u>Chinese letters appearance</u> while in Paget disease the bone appears in a <u>mosaic pattern</u> (pathgnomic).









METASTATIC TUMORS TO BONE:

- More common than primary bone tumors (tumors going to the bone from <u>carcinoma</u> or from <u>hematopoietic malignancies</u> is much more common than seeing osteosarcoma, Ewing sarcoma and chondrosarcoma).
- In <u>children</u>: Neuroblastoma, Wilms tumor (kidney) and rhabdomyosarcoma (Usually we don't see carcinoma)
- in <u>adults</u>, the most common is <u>carcinoma</u> (<u>adenocarcinoma</u>) in <u>lung</u> (mostly), prostate, breast, kidney, thyroid & liver.
- adenocarcinoma = (gland forming carcinoma)
- Usually <u>multiple and axial</u> (vertebral bodies, shoulders, pelvic): mostly **hematogenous** spread.
- **Types of metastasis:** <u>lytic</u>, <u>blastic</u> or <u>mixed</u> (via mediators secretion), (The radiographic appearance of metastasis may be <u>purely lytic (bone destroying)</u>, <u>purely blastic (bone forming)</u>, or mixed).
- The presence of **multiple lytic metastatic** is much more common than blastic and mixed metastatic.
- -the **prostate** is commonly associated with **blastic** metastatic.

(Prostatic carcinoma 🔁 osteoblastic lesions)

- after stage 4 (bad prognosis) most patients don't survive beyond 6-12 months.

