

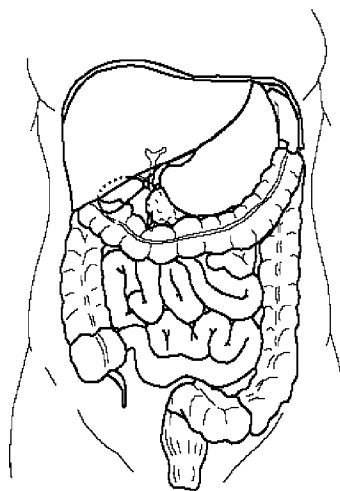


CALIFORNIA
TUMOR TISSUE REGISTRY

“PATHOLOGY OF THE DIGESTIVE SYSTEM”

Study Cases, Subscription A

November 2005



California Tumor Tissue Registry
c/o: Department of Pathology and Human Anatomy
Loma Linda University School of Medicine
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Web page: www.cttr.org
Web site & Case of the Month: www.cttr.org

Target audience:

Practicing pathologists and pathology residents.

Goal:

To acquaint the participant with the histologic features of a variety of benign and malignant neoplasms and tumor-like conditions.

Objectives:

The participant will be able to recognize morphologic features of a variety of benign and malignant neoplasms and tumor-like conditions and relate those processes to pertinent references in the medical literature.

Educational methods and media:

Review of representative glass slides with associated histories.
Feedback on consensus diagnoses from participating pathologists.
Listing of selected references from the medical literature.

Principal faculty:

Weldon K. Bullock, MD
Donald R. Chase, MD

CME Credit:

Loma Linda University School of Medicine designates this continuing medical education activity for a maximum of 2 hours of Category I of the Physician's Recognition Award of the American Medical Association.
CME credit is offered for the subscription year only.

Accreditation:

Loma Linda University School of Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians.

**Contributor: Donovan Hare, M.D.
Redlands, CA**

Case No. 1 - November 2005

Tissue from: Colon

Accession #30353

Clinical Abstract:

A large polyp was found on flexible sigmoidoscopy in this 39 year old woman.

Gross Pathology:

The 2.3 x 2 x 1.9 cm snared polyp was irregularly nodular, pink to red-tan and hemorrhagic, with an apparent stalk.

**Contributor: Pamela Boswell, D.O.
San Diego, CA**

Case No. 2 - November 2005

Tissue from: Jejunum

Accession #30056

Clinical Abstract:

Six years after resection and post-operative radiation therapy for a rectal neoplasm, this 58 year old woman complained of epigastric pain and nausea. An abdominal CT showed focal circumferential soft tissue thickening of the jejunal wall up to 1 cm thick, with proximal dilatation. No peripheral inflammatory changes were seen. Thickening of the rectal wall was noted, consistent with a prior history of radiation therapy to that region.

Gross Pathology:

Not available.

Contributor: LLUMC Pathology (wc)
Loma Linda, CA

Case No. 3 - November 2005

Tissue from: Liver

Accession #30037

Clinical Abstract:

This 12 month old baby boy was noticed by his parents to have an enlarged abdomen.

Gross Pathology:

The 106 gram, 13 x 8.7 x 3.5 cm left lobe of liver contained a 4.5 x 3.5 x 3.2 cm white tan tumor.

Contributor: Guillermo Acero, M.D.
Santa Paula, CA

Case No. 4 - November 2005

Tissue from: Liver

Accession #29647

Clinical Abstract:

Early in her third pregnancy, this 37 year old woman was noted to have a 15 x 8 cm hypoechogenic mass in her liver. Her pregnancy was complicated by rising blood pressure and a breech presentation. A partial hepatectomy was performed at the time of her Cesarian section.

Gross Pathology:

The 820 gram specimen included a 16 x 12 x 6 cm brown-tan mass with a lobulated cut surface.

Contributor: Beverly Myers, M.D.
Roseville, CA

Case No. 5 - November 2005

Tissue from: Right ovary

Accession #29824

Clinical Abstract:

On physical examination, this 30 year old woman was noted to have a right ovarian mass. She had a 2-year history of a hepatic mass. Alpha-fetoprotein and CEA were elevated. At laparotomy, liver biopsies were taken and a right salpingo-oophorectomy was performed.

Gross Pathology:

The smooth-surfaced ovary contained a 5 cm diameter cyst with hemorrhagic fluid. The lining of the cyst had a soft nodule, without papillary projections.

Special Studies:

HepPar1	strong diffuse positivity
CK7	negative
CK20	negative
ER/PR	negative

Contributor: John Blaustein, M.D.
Santa Barbara, CA

Case No. 6 - November 2005

Tissue from: Pancreas

Accession #29918

Clinical Abstract:

A 75 year old man was found to have a pancreatic mass.

Gross Pathology:

The 633 gram specimen included pancreas, spleen and omentum. Attached to the pancreas, surrounded by an areolar membrane, was a 13 x 12 x 8.5 cm mass. The cut surface showed a pink-tan fine meshwork of sponge-like cysts exuding clear serous fluid. There was a central 6.5 x 5.5 x 5 cm stellate scar.

**Contributor: David Shimizu, M.D.
Honolulu, HI**

Case No. 7 - November 2005

Tissue from: Pancreas

Accession #29174

Clinical Abstract:

After multiple craniotomies for brain tumors, and a left nephrectomy and a partial right nephrectomy for renal cell carcinoma, imaging studies on this 40 year old man with von Hippel-Lindau syndrome showed multiple cysts in the pancreas with an enlarging mass in the head of the pancreas.

Gross Pathology:

The 256 gram specimen included the head of the pancreas with portions of duodenum and jejunum. Within the pancreatic head was a 4.5 x 4.2 cm hemorrhagic tan mass.

Special Studies:

Chromogranin:	positive
Keratin	negative

**Contributor: Catherine Odell, M.D.
Riverside, CA**

Case No. 8 - November 2005

Tissue from: Stomach

Accession #30043

Clinical Abstract:

An 84 year old female was found to have diffuse thickening of her distal stomach.

Gross Pathology:

The distal gastrectomy specimen showed diffuse thickening of the gastric wall, most prominent over a 7 x 6 cm area in the more distal portion. The mucosa showed flattening of the rugae and focal ulceration.

Contributor: LLUMC Pathology (mp)
Loma Linda, CA

Case No. 9 - November 2005

Tissue from: Appendix and Colon

Accession #30060

Clinical Abstract:

After 2 days of nausea and vomiting, with episodes of bilious vomiting, this 42 year old man was found to have masses in both his cecum and his sigmoid colon.

Gross Pathology:

The 322 gram ileocecal resection specimen had an enlarged appendix with tumor diffusely infiltrating the wall and obliterating the lumen. Near the ileocecal valve was a 2 x 2 x 1 cm submucosal ileal tumor. The bowel wall of the 477 gram rectosigmoid resection specimen was markedly thickened, resulting in a pinpoint lumen.

Contributor: Anthony Migler, M.D.
Oxnard, CA

Case No. 10 - November 2005

Tissue from: Stomach

Accession #29841

Clinical Abstract:

This 76 year old man complained of abdominal pain and a palpable mass.

Gross Pathology:

Just beneath the gastric antral mucosa was a 20 x 15 cm focally cystic and necrotic mass.

Special Studies:

CD117	positive
CD34	positive
S100	negative
Desmin	negative