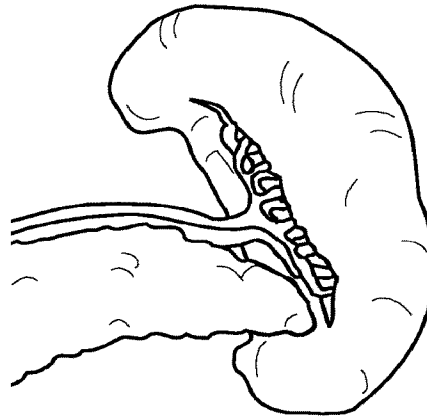




**CALIFORNIA
TUMOR TISSUE REGISTRY**

Pathology of Spleen & Lymph Nodes Study Cases, Subscription B

April, 2006



California Tumor Tissue Registry
c/o: Department of Pathology and Human Anatomy
Loma Linda University School of Medicine
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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 up to 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: Douglas G. Hoffmann, M.D.
Atlanta, GA

Case No. 1 - April, 2006

Tissue from: Spleen

Accession #29930

Clinical Abstract:

During workup, an enlarged spleen and lymph nodes were identified in a 33-year-old woman. A splenectomy was performed.

Gross Pathology:

The 364 gram, 12.0 x 9.0 x 5.5 cm intact spleen had multiple foci of well-circumscribed pink-white, slightly firm areas up to 0.5 cm. There was an additional soft, tan-yellow-red area up to 1.0 cm.

Contributor: Henry Slosser, M.D.
Pasadena, CA

Case No. 2 - April, 2006

Tissue from: Spleen

Accession #30006

Clinical Abstract:

Trauma resulted in a ruptured spleen and this 31-year-old man underwent splenectomy. Past medical history included a nephrectomy at age 6, possibly for a Wilms' tumor.

Gross Pathology:

The 500 gram, 19.5 x 10.5 x 3.5 cm spleen had an 8.0 cm long sutured laceration. Sectioning revealed a firm consistency and red cut surface. Follicular and trabecular markings were indistinct.

Special Studies:

PAS with and without diastase = faintly positive
Giemsa = rare sea blue (ceroid containing) histiocytes
Iron and AFB stains = negative
CD68 = positive

Contributor: Chester Spears, M.D.
Emporia, KS

Case No. 3 - April, 2006

Tissue from: Right cervical lymph nodes

Accession #29854

Clinical Abstract:

A 26-year-old woman with trisomy 21 presented with a neck mass.

Gross Pathology:

Multiple fragments of brown-tan to gray-tan fish-flesh looking tissue varied from 1 to 5 cm in greatest diameter.

Special Studies:

Positive: CD30, Fascin, CD15 (focally), CD20 (focally)
Negative: CD45, CD3

Contributor: Howard Otto, M.D.
Cheboygan, MI

Case No. 4 - April, 2006

Tissue from: Right inguinal lymph nodes

Accession #28826

Clinical Abstract:

On physical examination, a 47-year-old man was found to have two side-by-side masses in the right groin, each measuring 3-4 cm in diameter. The masses were non-moveable and fixed at the left of the inguinal canal. There was no accompanying skin change, induration or right lower extremity swelling. The patient reported that the masses had gradually enlarged over the past 2-3 years. He had no constitutional symptoms.

Gross Pathology:

The specimen consisted of two nodules of gray tissue covered by investing fibroareolar tissue. The 38 gram larger piece measured 4.0 x 3.5 x 3.2 cm. The second nodule was 4.5 x 2.8 x 3.0 cm. The cut surfaces were pale, tan-gray, uniform and bulging above the cut surface.

Special Studies:

Positive: CD45 (LCA), CD20 (L26), Bcl-2.
Negative: CD3, CD43 (Leu-22), CD23

Contributor: Phillip C. Gordon, M.D.
Winter Haven, FL

Case No. 5 - April, 2006

Tissue from: Spleen

Accession #29649

Clinical Abstract:

A splenectomy was performed on a 64-year-old woman with a history of hemolytic anemia. A previous bone marrow biopsy showed small lymphoid aggregates of uncertain significance.

Gross Pathology:

The smooth-surfaced spleen weighed six pounds, 14 ounces. Sectioning displayed a uniform burgundy parenchyma without nodules. Scattered subcapsular wedge-shaped infarcts were present.

Special Studies:

Positive: CD20, CD3 (in T-lymphocytes), CD5 (in T-lymphocytes), Lambda light chain, CD30 (focally), Bcl-2 (focally).
Negative: CD10, CD23, Cyclin D-1, Kappa light chain, CD43, CD34 (positive only in blood vessels)

Contributor: Peter L. Morris, M.D.
Santa Barbara, CA

Case No. 6 - April, 2006

Tissue from: Right Ovary

Accession #30079

Clinical Abstract:

Workup for abdominal pain and increasing abdominal girth in this 57-year-old woman revealed ascites and a complex large pelvic mass.

Gross Pathology:

The 800 gram specimen consisted of a pink and pink-tan bosselated, 16.0 x 13.0 x 8.5 cm tumor replacing the ovary. Sectioning showed lobules of tan glistening neoplasm with occasional areas of chalky yellow necrosis and mild focal hemorrhage.

Special Studies:

Positive: CD45RB (LCA), CD20 (L26), CD10 (weakly), Bcl-2
Negative: CDA, Wide spectrum keratin, Melanoma mix, CD3, CD43

**Contributor: Claude O. Burdick, M.D.
San Ramon, CA**

Case No. 7 - April, 2006

Tissue from: Spleen

Accession #29927

Clinical Abstract:

During surgery for ruptured diverticula, a grossly enlarged spleen was identified in a 77-year-old man. Past medical history was significant for idiopathic thrombocytopenia and a previous bone marrow biopsy had revealed myelodysplastic syndrome. Cytogenetic studies were negative for bcr/abl gene products (Philadelphia chromosome).

Gross Pathology:

The 606 gram, 17.5 x 12.8 x 6.0 cm spleen had multiple brown nodules, similar in color to the surrounding spleen, up to 2 cm in greatest diameter. Additionally, a 7 cm diameter, encapsulated, dirty tan-yellow nodule protruded from the superior aspect. Cut surface of this nodule showed blood-filled spaces.

**Contributor: LLUMC Pathology (ec)
Loma Linda, CA**

Case No. 8 - April, 2006

Tissue from: Spleen

Accession #30038

Clinical Abstract:

An 82-year-old, gravida 4, para 4 woman presented with complaints of abdominal discomfort and some abdominal distention. CT of the abdomen and pelvis demonstrated a very large splenic mass and a pelvic mass in back of the cervix. CA-125 was 270.

Gross Pathology:

The 373 gram, 13.0 x 9.0 x 3.0 cm spleen had a contiguous 11.0 x 6.0 cm yellow-tan cystic necrotic tumor. The remaining splenic parenchyma was homogeneously beefy red. Both ovaries were entirely submitted for microscopic examination and the endometrium was also extensively sampled. No evidence of tumor was identified at these sites.

Contributor: Dennis P. O'Malley, M.D.
Indianapolis, IN

Case No. 9 - April, 2006

Tissue from: Spleen

Accession #30074

Clinical Abstract:

Twenty to thirty years after being diagnosed with idiopathic thrombocytopenic purpura, this 79-year-old woman presented with hypersplenism. Physical examination showed a thin, undernourished woman with an enlarged spleen, visible through the thinned abdominal wall, that extended 14 cm below the left costal margin. The liver was not palpable.

Gross Pathology:

The 2.1 kg, 24 x 18 x 9.5 cm spleen had a cut surface showing multiple tan to red, irregular, ill-defined, soft parenchymal nodules ranging from 0.5 to 1.5 cm in greatest dimension.

Special Studies:

Positive: CD34
Negative: CD68, CD117

Contributor: J. C. Blaustein, M.D.
Santa Barbara, CA

Case No. 10 - April, 2006

Tissue from: Left inguinal lymph nodes

Accession #28155

Clinical Abstract:

Five years after radiation and chemotherapy for chronic lymphocytic leukemia, a 62-year-old man presented with an enlarged mildly painful inguinal lymph node of several months' duration.

Gross Pathology:

The 5.5 x 4.0 x 2.8 cm lymph node specimen had irregular geographic areas of pale tan to yellow necrosis with surrounding hemorrhage.

Special studies:

Positive: CD20, CD40RO (UCHL-1), CD43, HSV(1-2), CD19, CD2 (background lymphs), CD5, CD23 (majority of lymphocytes)
Negative: CD15 (Leu-M1), CD30, CMV, Kappa and Lambda light chains