

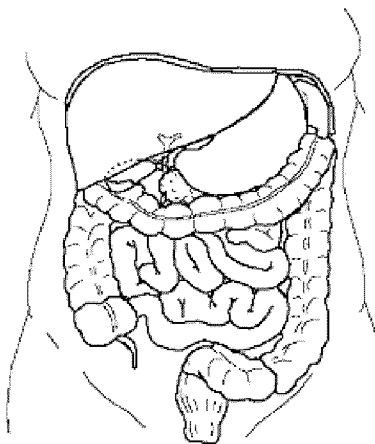


CALIFORNIA
TUMOR TISSUE REGISTRY

“DIGESTIVE SYSTEM PATHOLOGY”

Study Cases, Subscription A

May 2013



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:

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: R. M. Failing, M.D.
Santa Barbara, CA**

Case No. 1 - May 2013 A

Tissue from: Mesentery

Accession #12557

Clinical Abstract:

After a three month history of worsening abdominal pain and obstructive bowel symptoms, this 71 year-old man was found to have a large mass filling the left lower abdominal quadrant. The mass was extrinsic to the colon, involving the mesentery. Past history included an open cholecystectomy 20 years earlier.

Gross Pathology:

The composite resection of mesentery, omentum and portions of sigmoid and descending colon weighed 810 grams. A mesenteric-based, ill-defined mass produced adhesions between bowel segments and omentum.

**Contributor: Weldon Bullock, M.D.
Los Angeles, CA**

Case No. 2 - May 2013 A

Tissue from: Stomach

Accession #12560

Clinical Abstract:

A 72 year-old man had pain with upper GI bleeding.

Gross Pathology:

The distal gastric resection was 15 x 15 x 13 cm with 1 cm of attached duodenum. The attached mesentery was unremarkable. The gastric wall was grossly edematous and up to 1.5 cm thick. The mucosa was pink with prominent rugal folds. A V-shaped indentation at the proximal margin showed an apparent 1 cm ulcer.

**Contributor: Ralph Mitarai, M.D.
Sonoma, CA**

Case No. 3 - May 2013 A

Tissue from: Stomach

Accession #30780

Clinical Abstract:

An 83 year-old woman presented with an abdominal mass. Imaging studies showed a submucosal gastric mass with an exophytic component.

Gross Pathology:

The 9 x 6.3 cm submucosal tumor, with intact overlying mucosa, extended through the gastric wall to produce a 5 x 4.4 x 4.3 cm subserosal tumor.

Special Studies:

Positive: CD117, CD34

**Contributor: LLUMC Pathology Group (dr)
Loma Linda, CA**

Case No. 4 - May 2013 A

Tissue from: Abdominal peritoneum

Accession #31356

Clinical Abstract:

A 53 year-old woman had an abdominal mass.

Gross Pathology:

The 155 gram mass was 8 x 6 x 5 cm. Its cut surface was smooth tan with central necrosis.

Special Studies:

Positive: CD117, muscle specific actin

Negative: CK cocktail, CK5/6, S100, Desmin

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

Case No. 5 - May 2013 A

Tissue from: Pancreas

Accession #31528

Clinical Abstract:

This 27 year-old woman presented with complaints of early satiety, weight loss and nausea. Imaging studies showed a mass in the body of the pancreas. Past history included gallstone pancreatitis with subsequent laparoscopic cholecystectomy.

Gross Pathology:

The 259 gram resection specimen included a 10 x 8.5 x 6.5 cm tan-purple to brown mass. The cut surface showed hemorrhagic, soft, friable tissue with areas of white fleshy tumor.

Special Studies:

Positive: Alpha-1 antitrypsin, CD10, Chromogranin, PR, AE1/AE3, NSE (weak), vimentin, Synaptophysin (variable)

**Contributor: William e. Cowell, M.D.
Oceanside, CA**

Case No. 6 - May 2013 A

Tissue from: Liver

Accession #15800

Clinical Abstract:

This 65 year-old man presented with severe mid-epigastric pain. Gallbladder imaging showed cholelithiasis. At surgery a tumor confined to the right lobe of the liver, extending to the bed of the gallbladder was found.

Gross Pathology:

The 890 gram right lobe of liver contained a 3.5 cm diameter gristly tumor immediately adjacent to the attached gallbladder.

Contributor: Ellen C. Ko, M.D.
Colton, CA

Case No. 7 - May 2013 A

Tissue from: Pancreas

Accession #31469

Clinical Abstract:

An 82 year-old woman was found to have a distal pancreatic mass.

Gross Pathology:

The pancreatic resection specimen contained a 4 cm cystic mass and a separate 3 mm nodule.

Contributor: Lester D. R. Thompson, M.D.
Woodland Hills, CA

Case No. 8 - May 2013 A

Tissue from: Pancreas

Accession #31436

Clinical Abstract:

This 60 year-old man presented with abdominal pain and distension. He denied nausea or vomiting. A CT scan showed a solid mass in the distal pancreas.

Gross Pathology:

Within the distal pancreatectomy specimen was an 11 cm solid mass.

Contributor: Mingyi Chen, M.D.
Sacramento, CA

Case No. 9 - May 2013 A

Tissue from: Jejunum

Accession #31466

Clinical Abstract:

A 39 year-old man presented with abdominal pain and was found to have leukocytosis and peritonitis. He did not have any known history of celiac disease or other intestinal problems. He underwent exploratory laparotomy with segmental resection of the jejunum for ulceration without perforation.

Gross Pathology:

The 3.4 cm long bowel segment had roughened mucosa with a somewhat flattened folding pattern.

Special Studies:

CD3, CD56, BCL-2, CD8, TIA-1: Diffusely positive
CD4, CD5: Scattered positive in reactive T cells
CD10: Rare positive cells
CD30: Scattered positive immunoblasts
CD79a: Scattered positive in B cells and plasma cells
Ki-67: Positive in 70-80% of neoplastic cells

Contributor: Gary Wilcox, M.D.
Oceanside, CA

Case No. 10 - May 2013 A

Tissue from: Cecum

Accession #24172

Clinical Abstract:

This 83 year-old woman had abdominal discomfort for several weeks and reported tarry stools in the past. She had no history of weight loss. Work-up showed anemia. Imaging studies showed a cecal mass.

Gross Pathology:

The 44 cm long segment of bowel contained a 5.5 x 2 cm necrotic tumor arising from the cecal mucosa and perforating into pericecal soft tissues.