

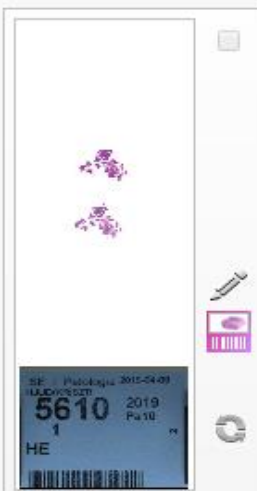


NEUROPATHOLOGY HISTOLOGY

HAJNALKA RAJNAI



Description ...



5610
HE

Examined
Glioblastoma
n/a
n/a
n/a
2019-04-12 10:44:25
1.42 GB
CCSU



601089±
20

Examined
Medulloblastoma
n/a
n/a
n/a
2019-04-12 10:47:06
1.58 GB
CCSU



6016919
20

Examined
Meningeoma
n/a
n/a
n/a
2019-04-16 09:24:21
4.78 GB
CCSU



SB
A/25/AS
2/151

Examined
Parkinson kór
n/a
n/a
n/a
2019-04-16 12:37:57
1.47 GB
CCSU

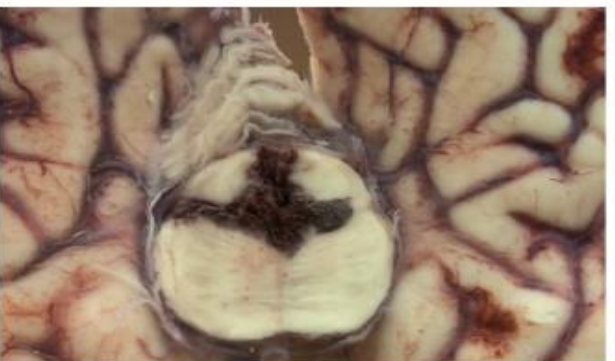


?

Examined
Schwannoma
n/a
n/a
n/a
2011-09-21 11:43:56
404.03 MB
CCSU



New
Anecephalia-1
n/a
n/a
n/a
2019-04-23 10:24:43
1.32 MB
CCSU





PRIMARY TUMORS OF THE CNS



Gliomas



Neuronal or mixed glioneuronal tumors



Choroid plexus neoplasms



Embryonal tumors

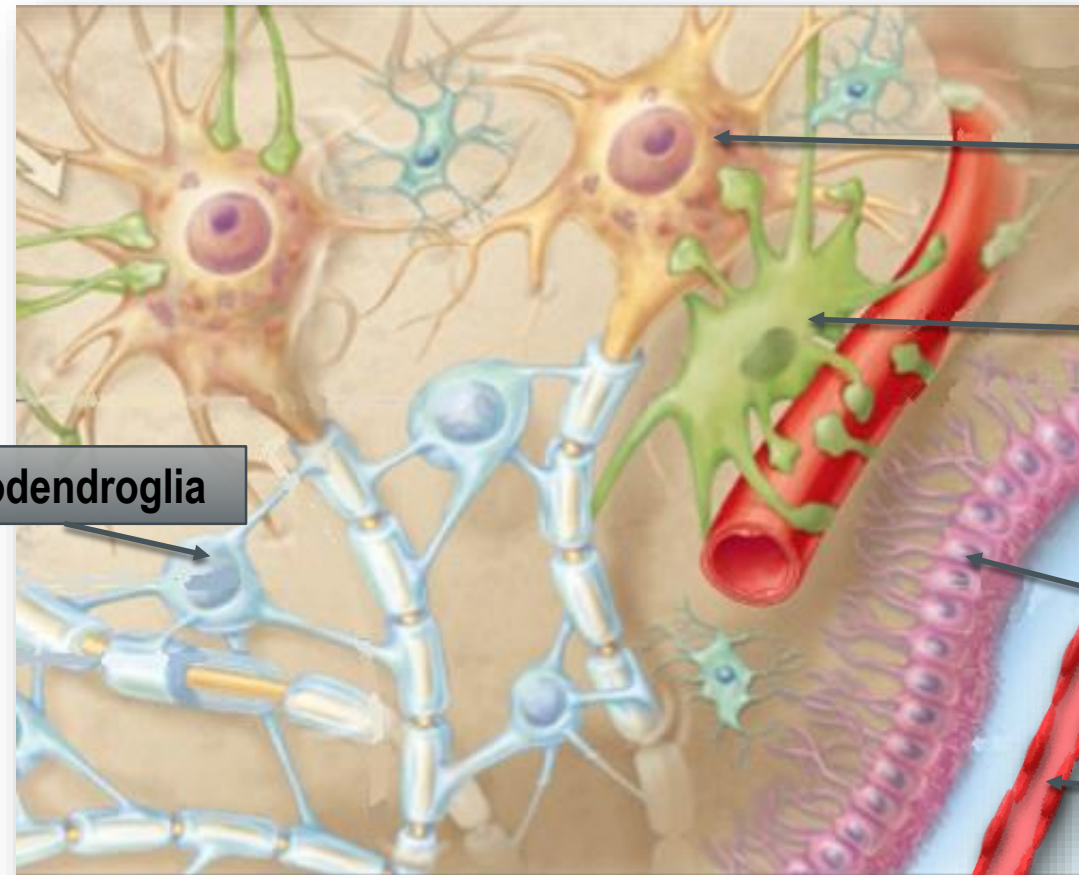


Meningial tumors



Other parenchymal tumors

- Haematologic malignancies
- Germ cell tumors



Neuron

Astrocyte

Oligodendroglia

Ependyma

Choroid plexus

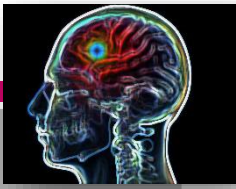


CHARACTERISTICS

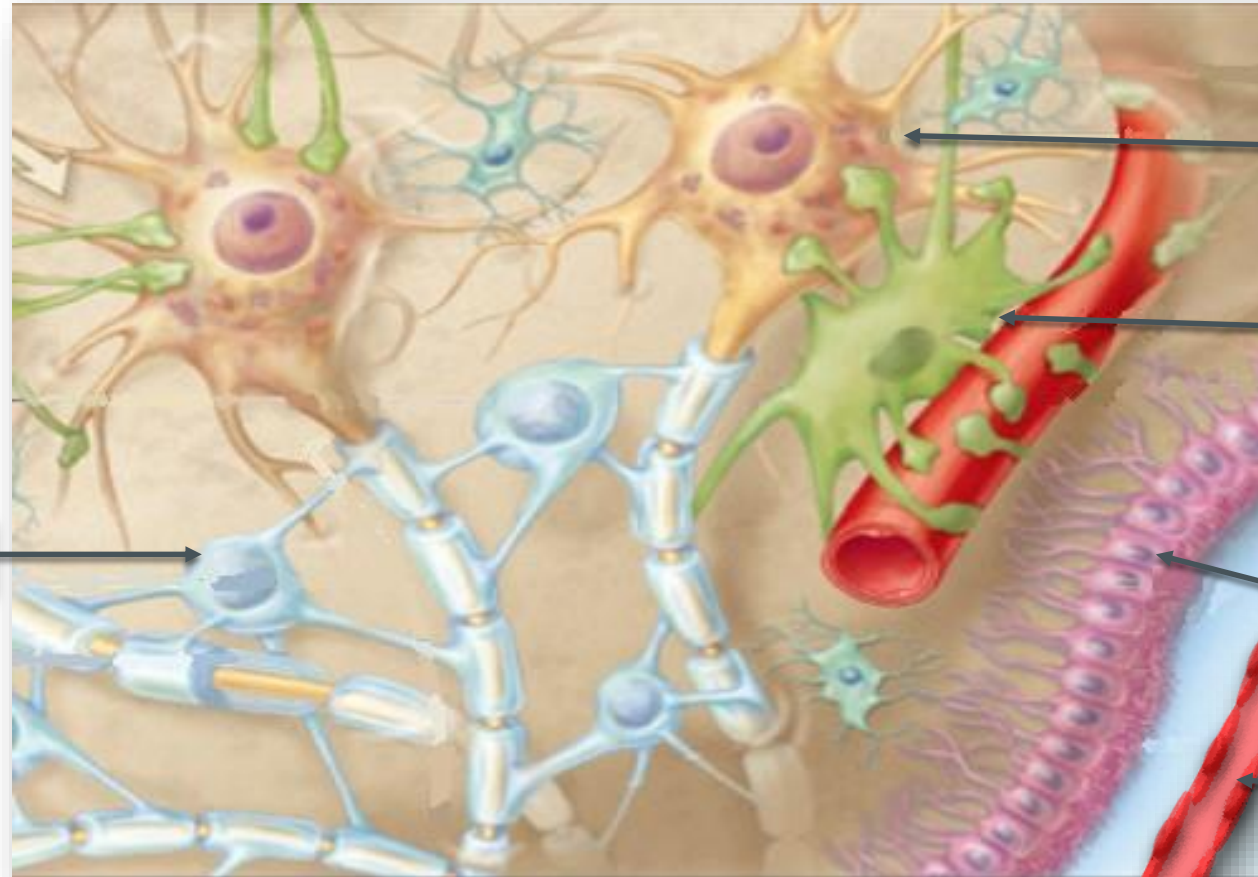
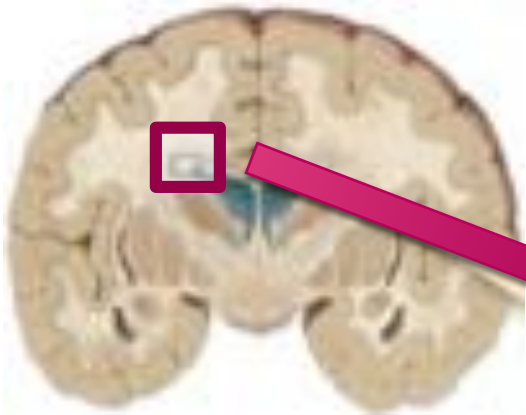
- Diagnosis
 - Age
 - Sex
 - Site of neoplasm
 - Family history
- Do not have premalignant or in situ stages
- Rarely spread outside of the CNS

Grade

- Predicting the biological behaviour
- Grade I
 - Low proliferative potential
 - Possibility of curative resection
- Grade II
 - Infiltrative
 - Often recur
 - Progression
- Grade III
 - Histological evidence of malignancy
 - High mitotic activity, atypia
- Grade IV
 - Cytologically malignant
 - Rapid disease evolution



GLIOMAS



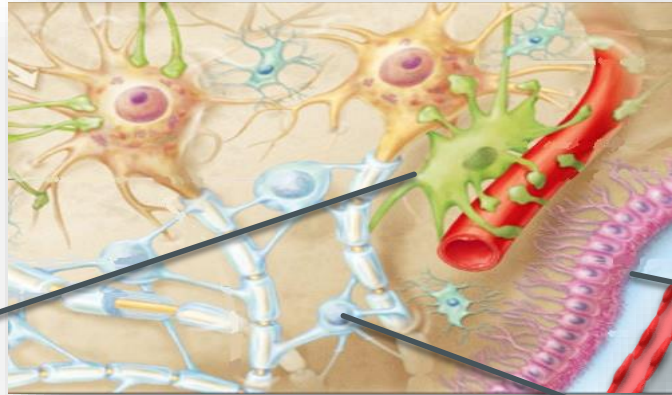
Neuron

Astrocyte

Oligodendroglia

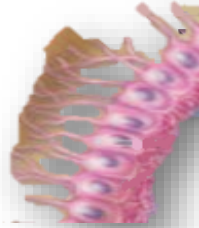
Ependyma

Choroid
Plexus



Astrocytomas

Oligodendrogliomas



Ependymomas

GRADE I
GRADE II
GRADE III
GRADE IV

Pilocytic astocytoma

Diffuse astocytoma

Anaplastic astocytoma

Glioblastoma

Oligodendrogloma

Anaplastic Oligodendrogloma

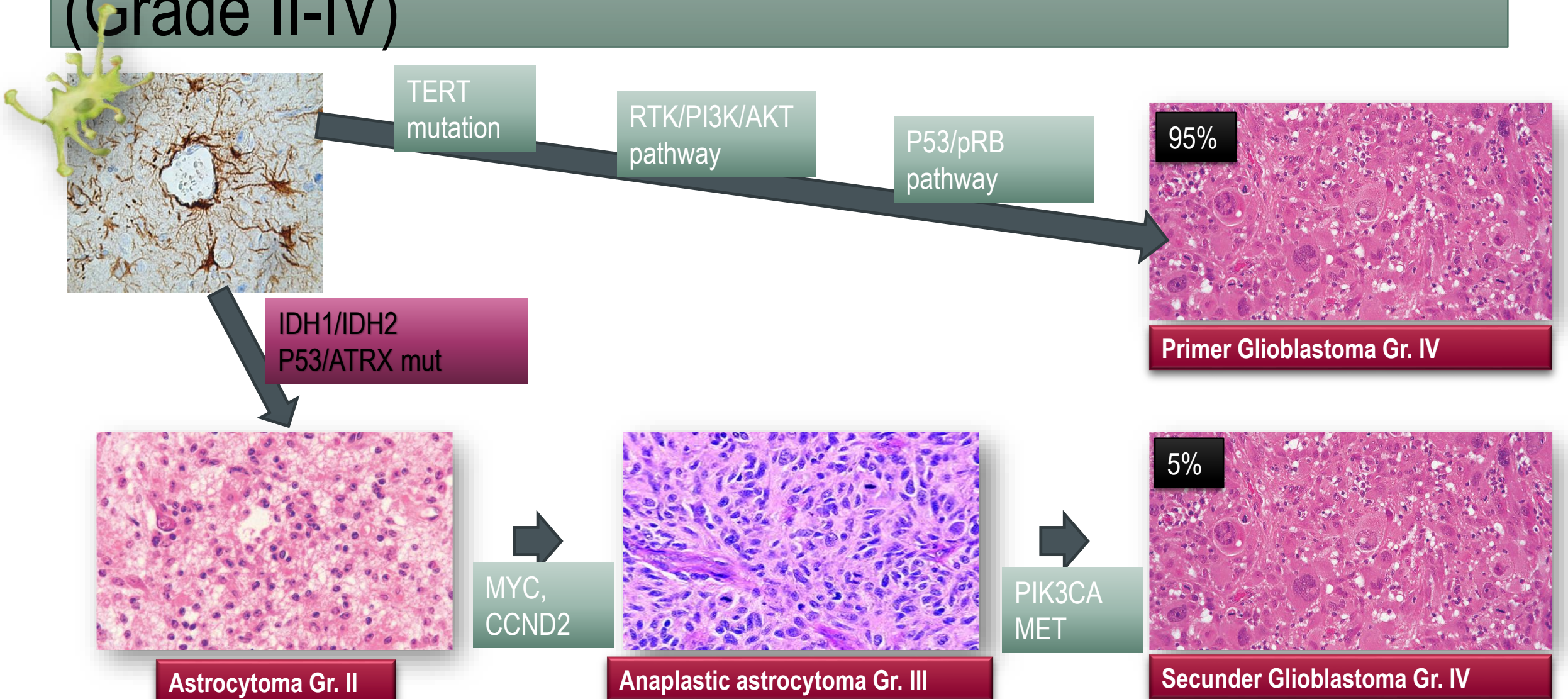
Ependymoma

Anaplastic Ependymoma



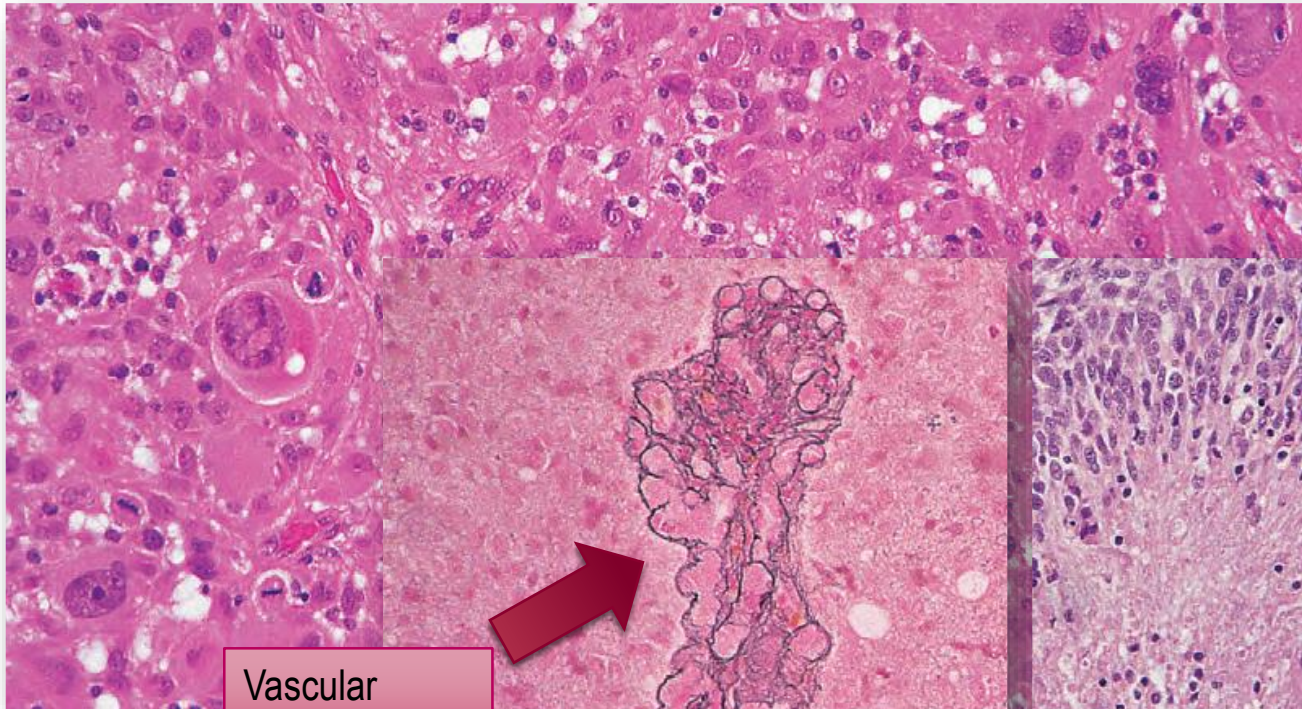
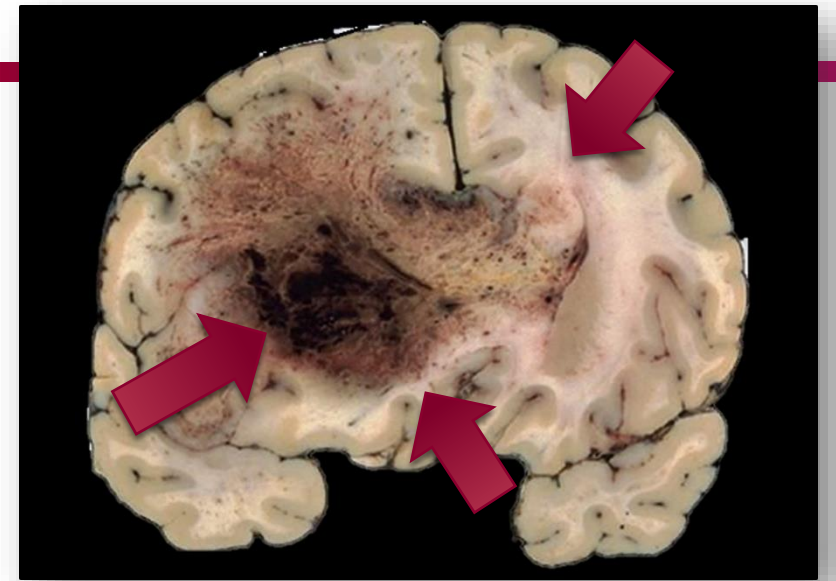


Diffuse gliomas with astrocytic differentiation (Grade II-IV)

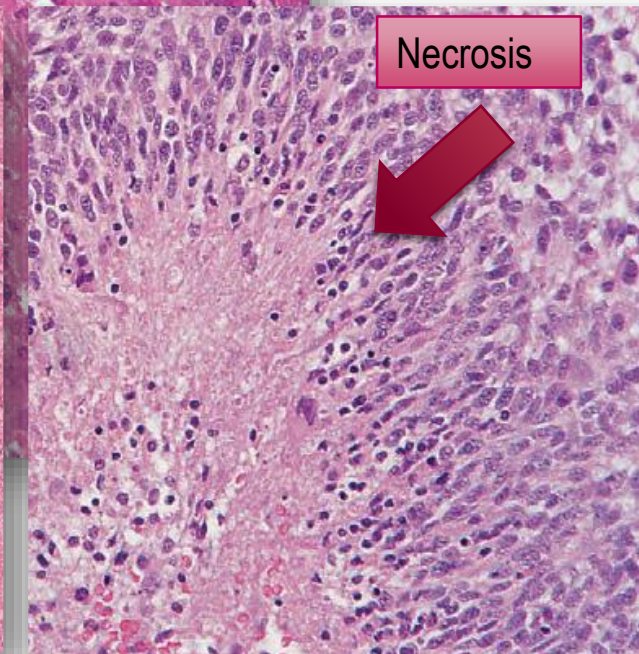


Glioblastoma Grade IV

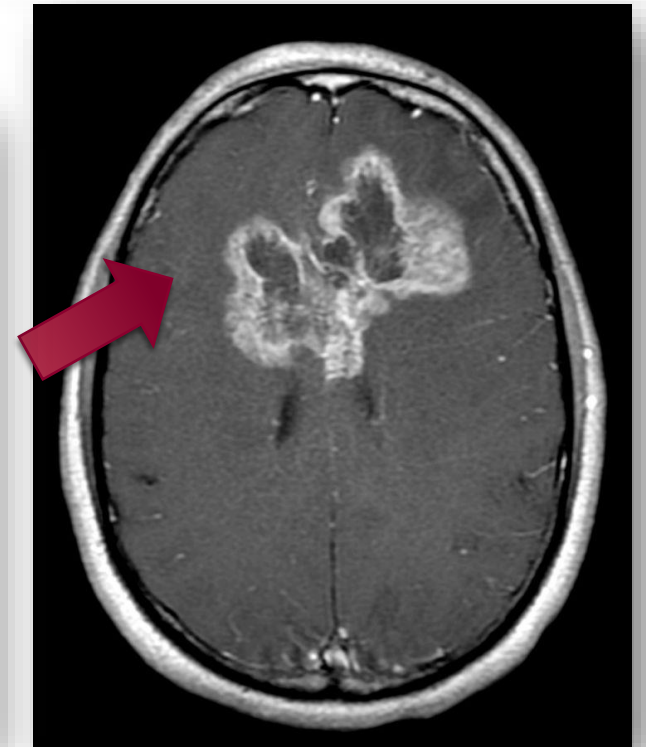
- Atypia + High cellularity + High mitotic activity + Necrosis/Endothel proliferation



Vascular proliferation

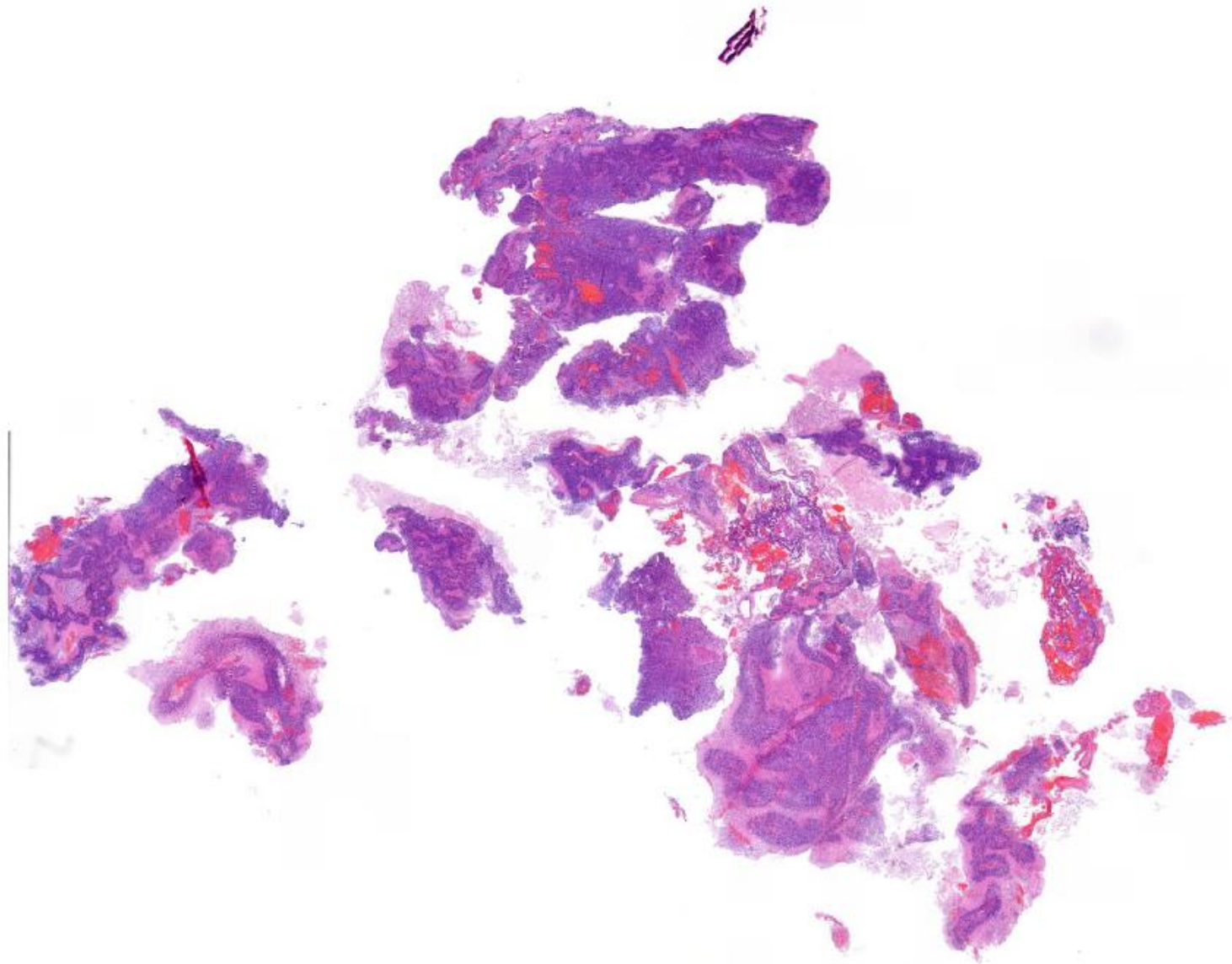


Necrosis

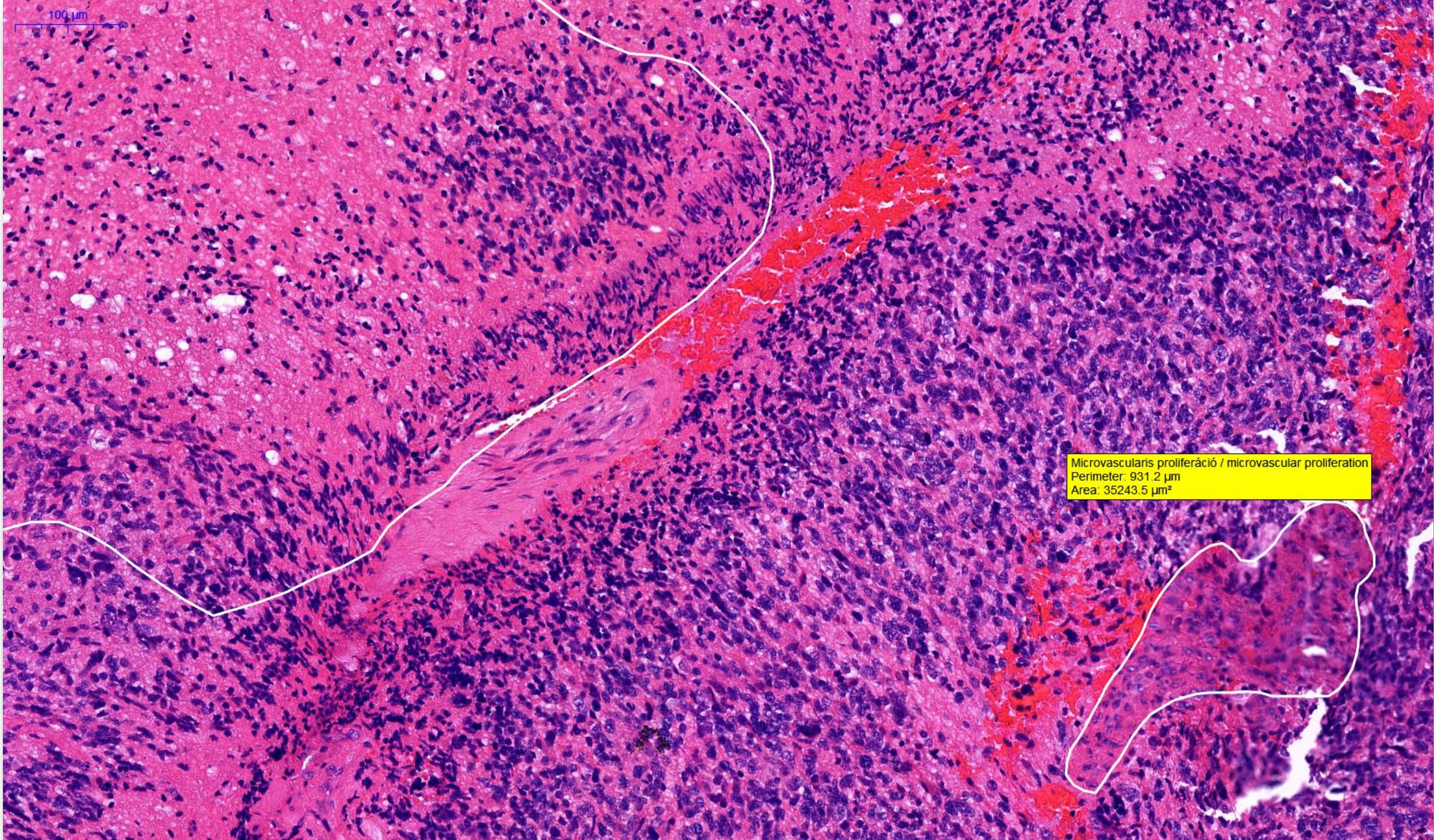


2000 μm

Glioblastoma



100 µm



Microvascularis proliferació / microvascular proliferation
Perimeter: 931.2 µm
Area: 35243.5 µm²

50 µm

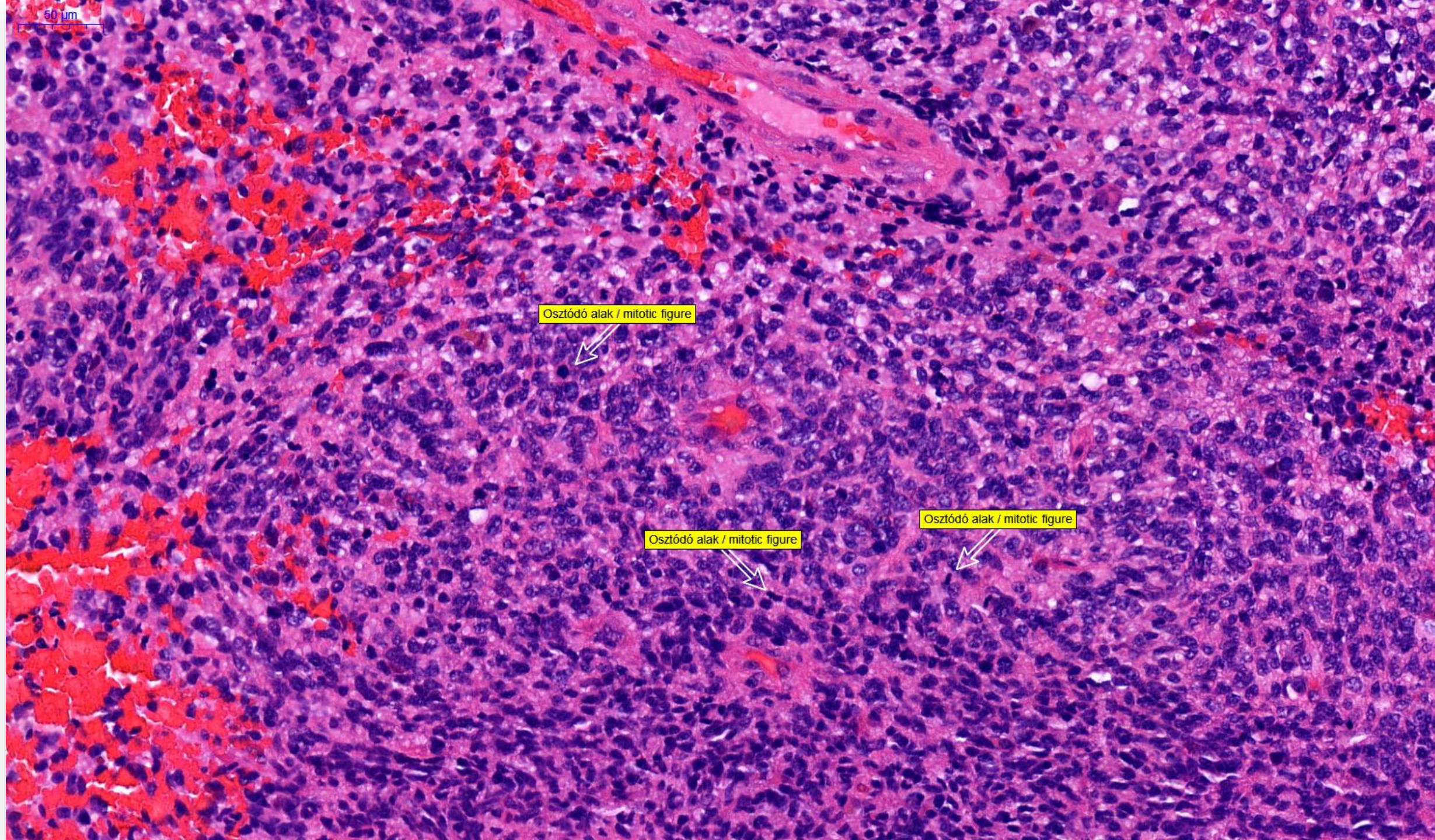
Osztódó alak / mitotic figure

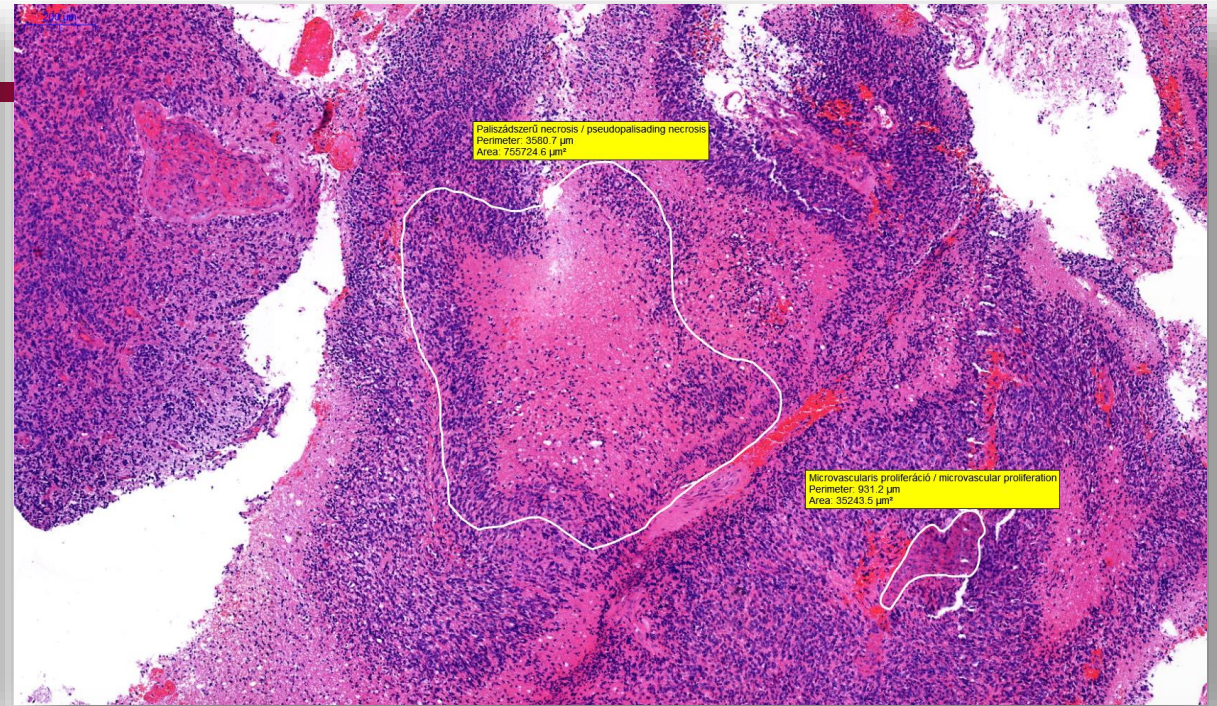
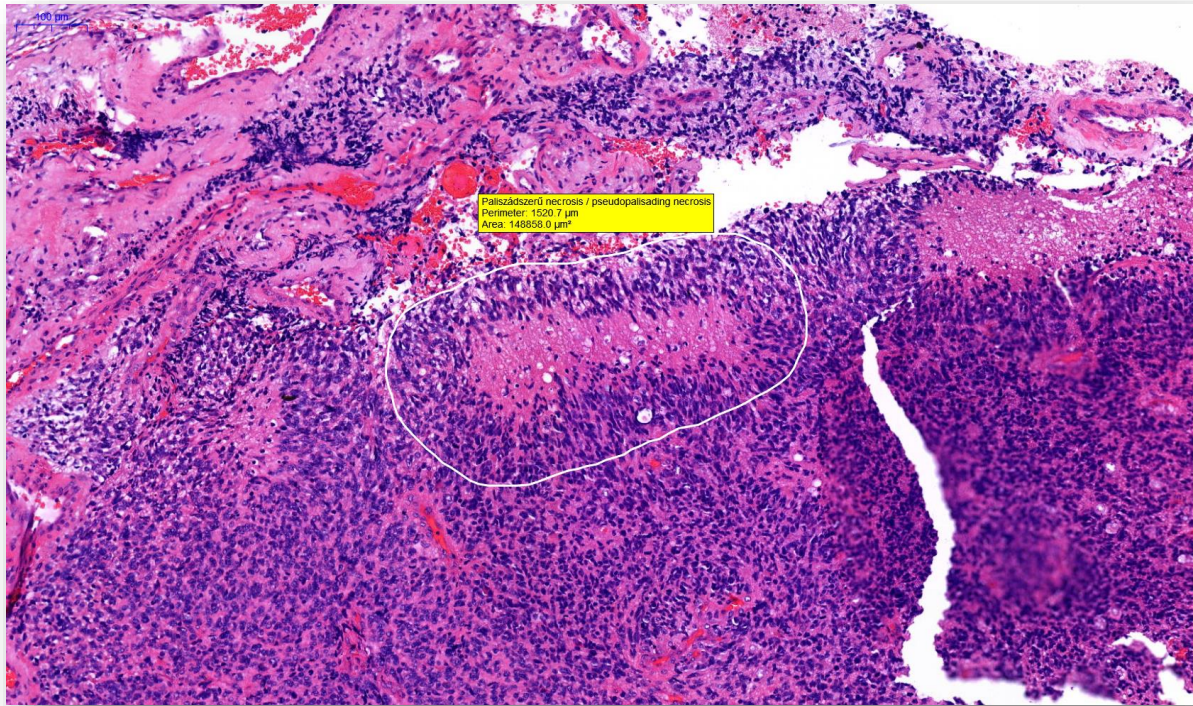


Osztódó alak / mitotic figure

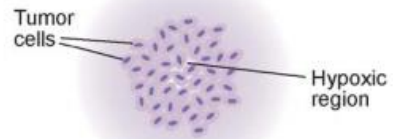


Osztódó alak / mitotic figure

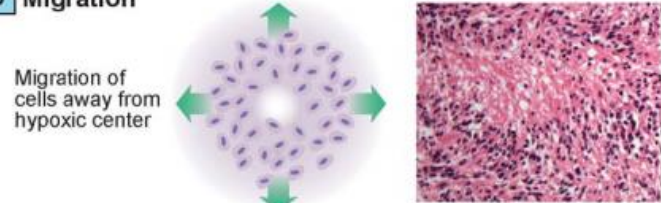




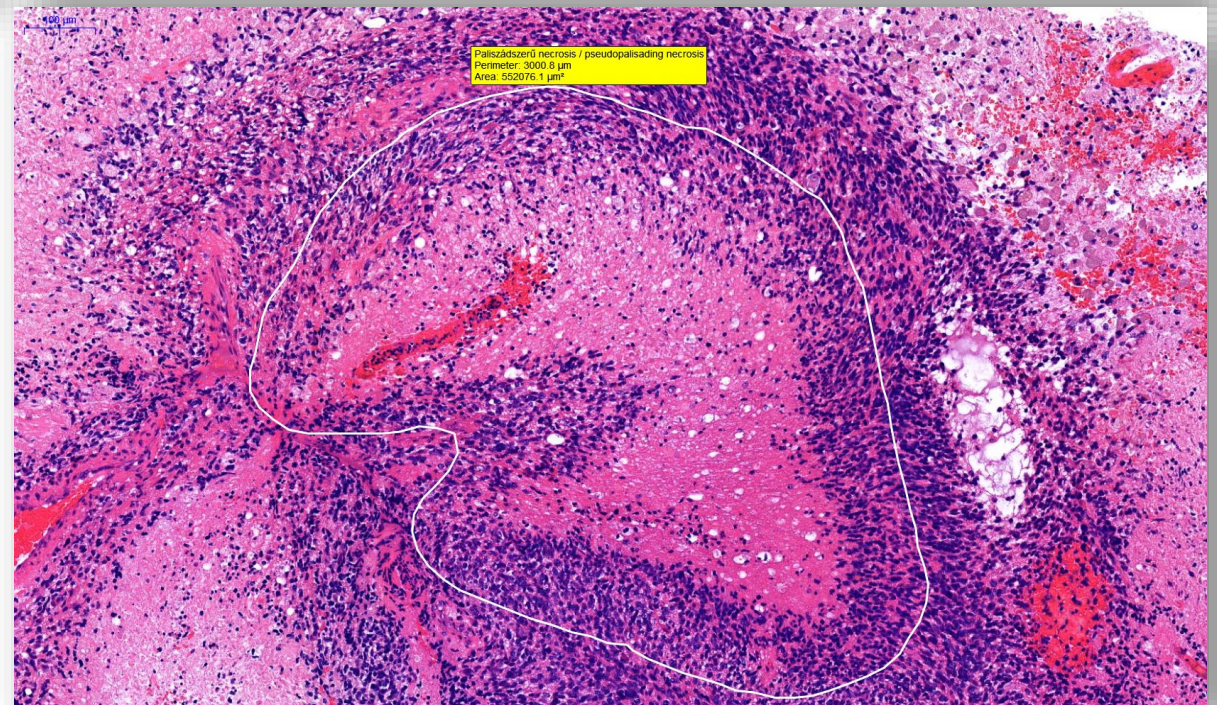
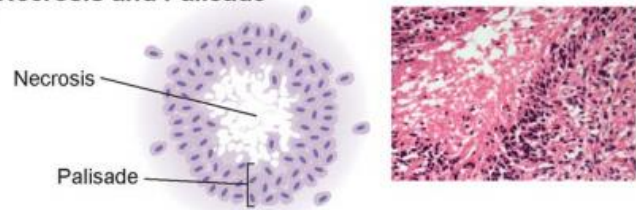
a Hypoxia

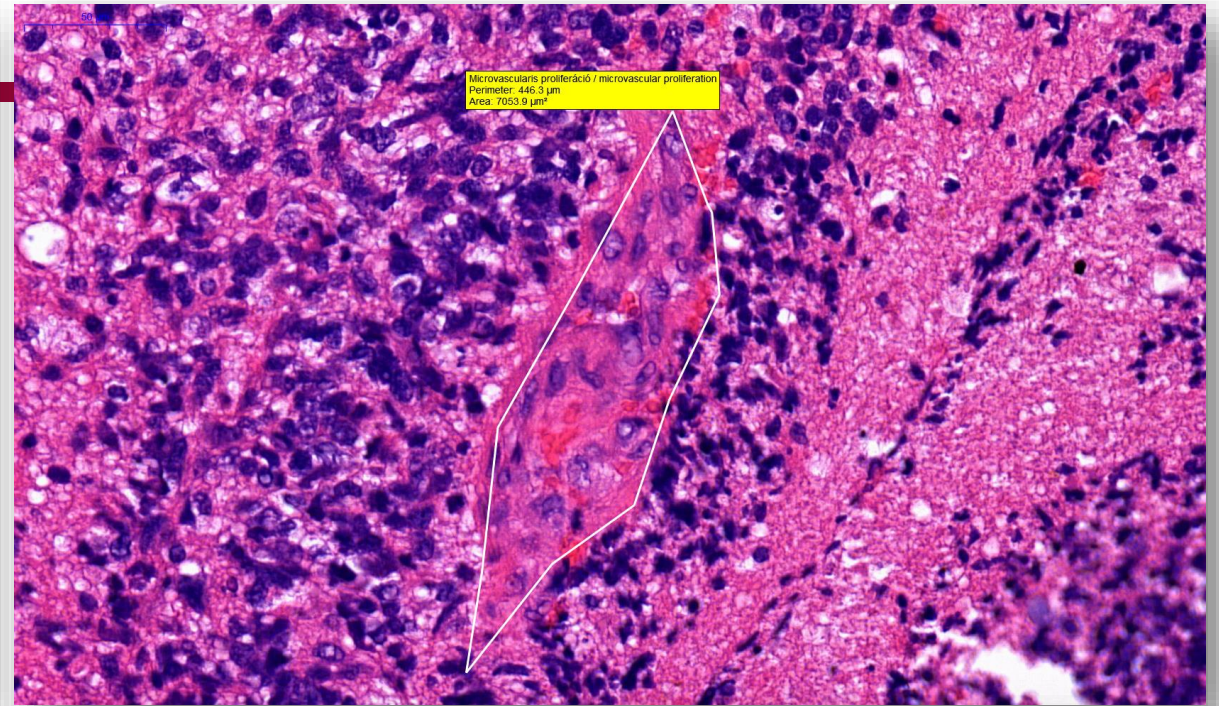
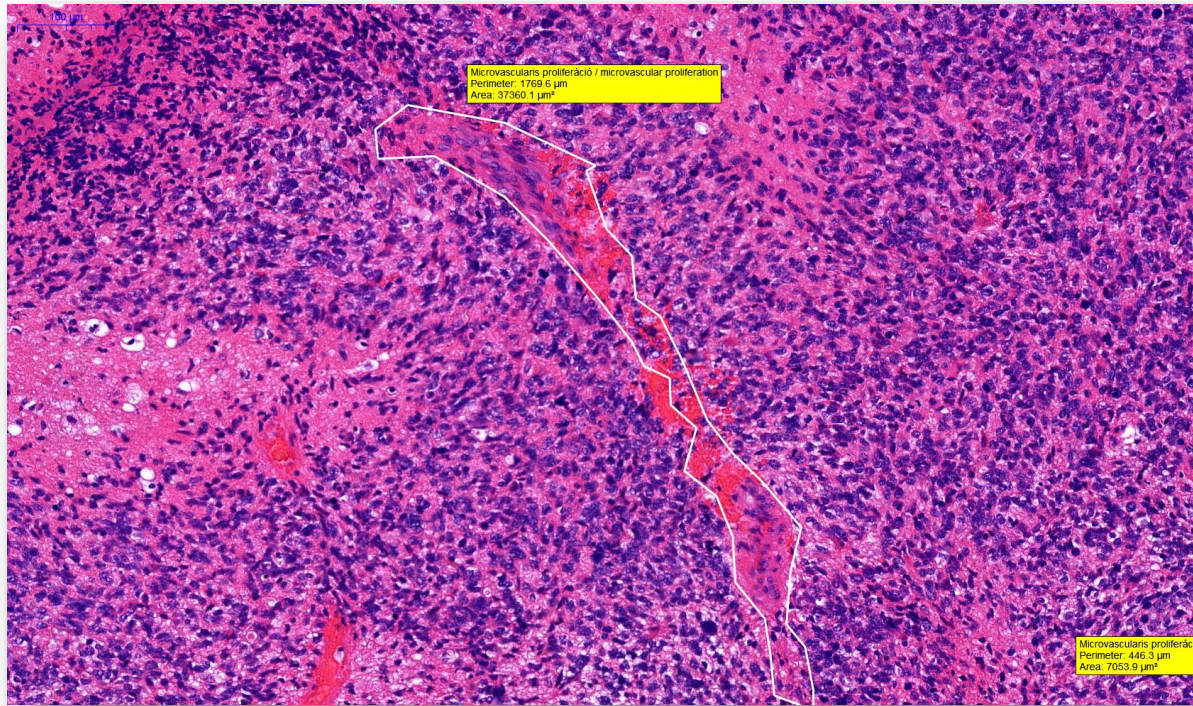


b Migration

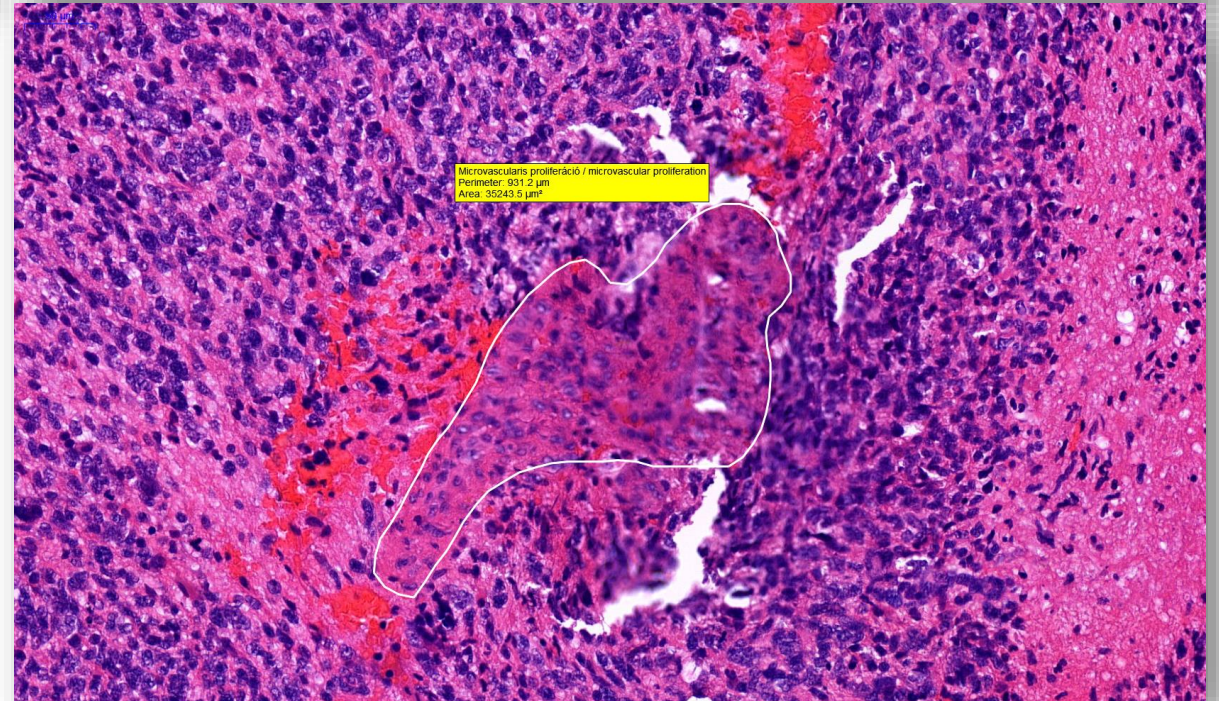
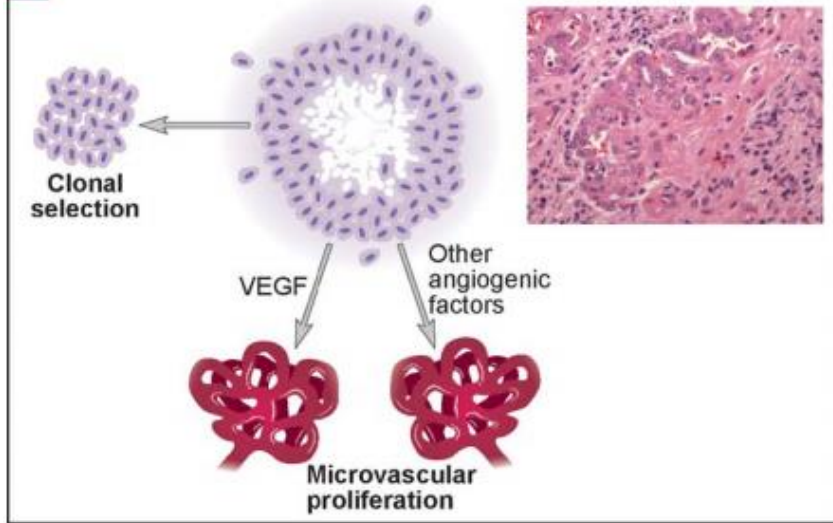


c Necrosis and Palisade



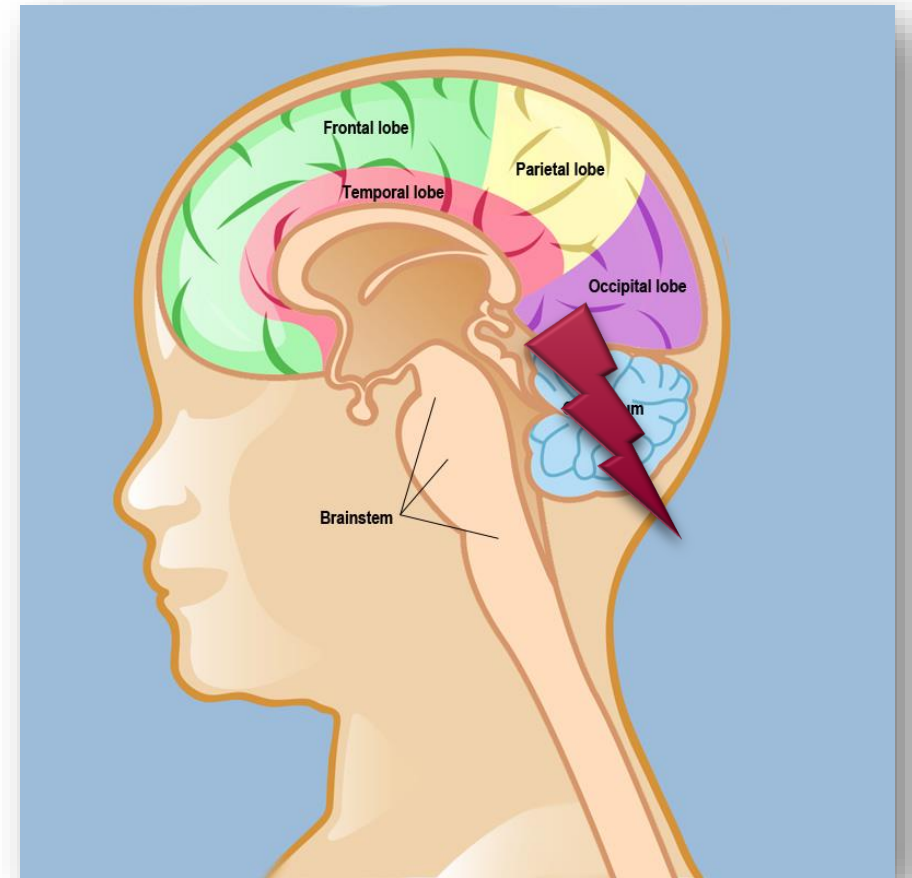


d Angiogenesis and clonal selection



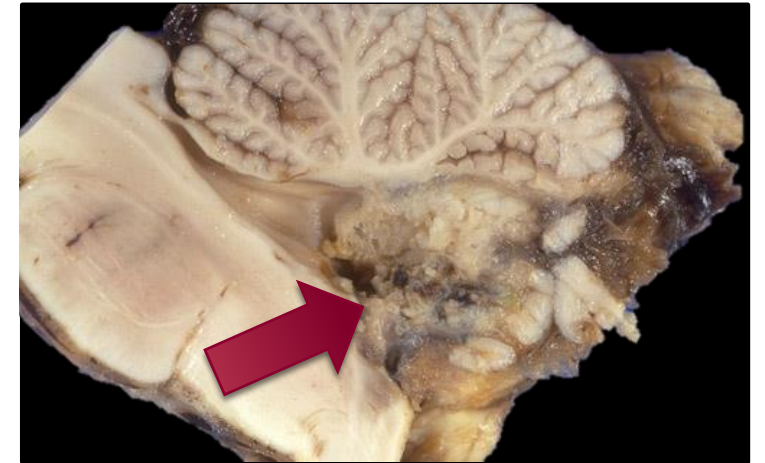
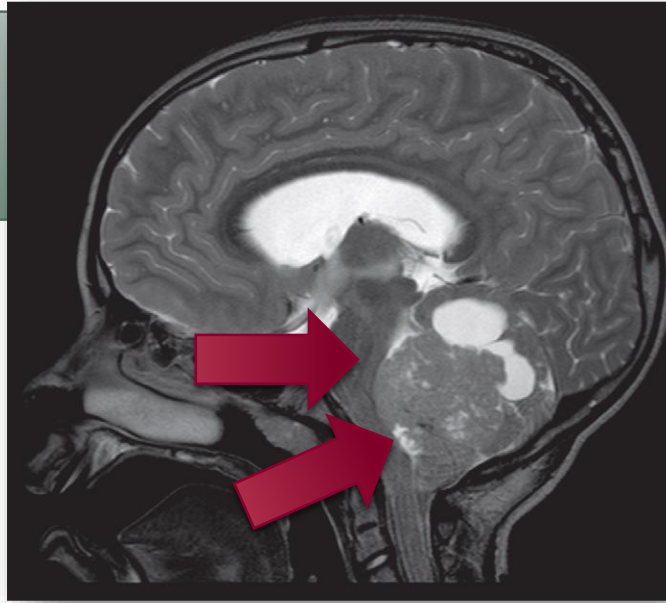
EMBRIONAL NEUROEPITHELIAL TUMORS

- Predominance in children
- Disseminate through CSF pathways
- Small undifferentiated cells
- High mitotic index, widespread apoptosis
- Potential for divergent neuroepithelial differentiation

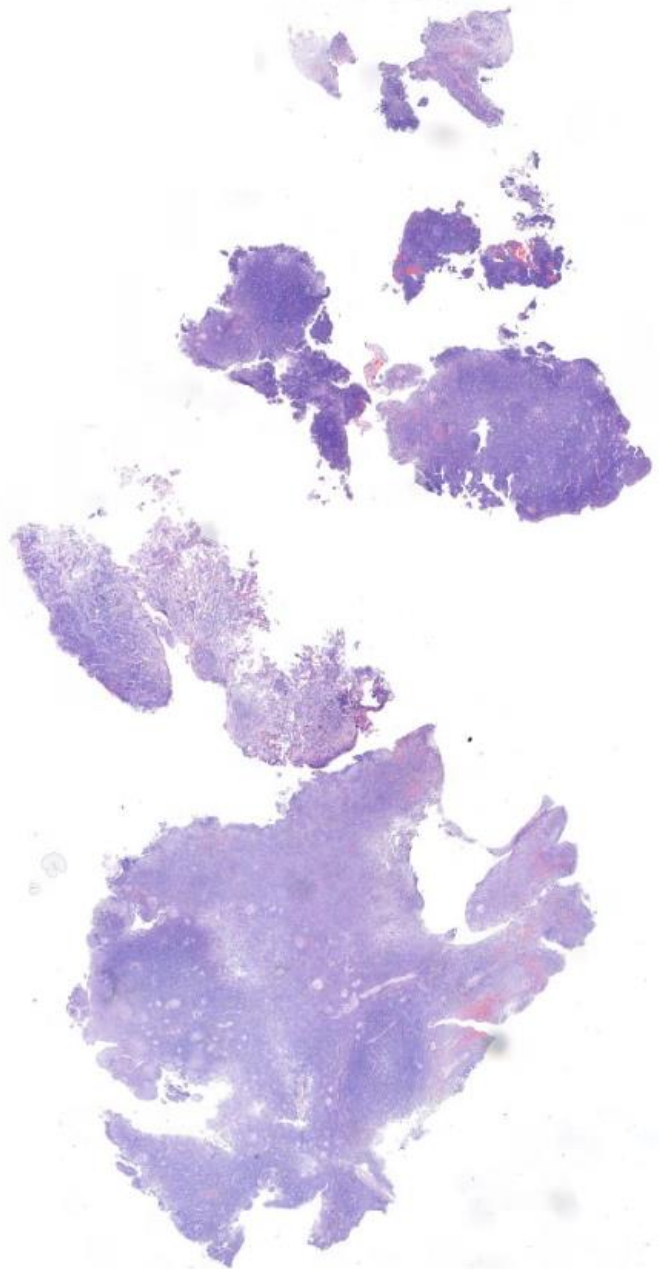


Medulloblastoma Grade IV

- 20% of pediatric brain tumor
- Infratentorial, 4th ventricle
- Four molecular subgroups :
 - WNT- activated (10%)
 - Sonic hedgehog (SHH)-activated (30%)
 - Group 3 (20%)
 - Group 4 (40%)

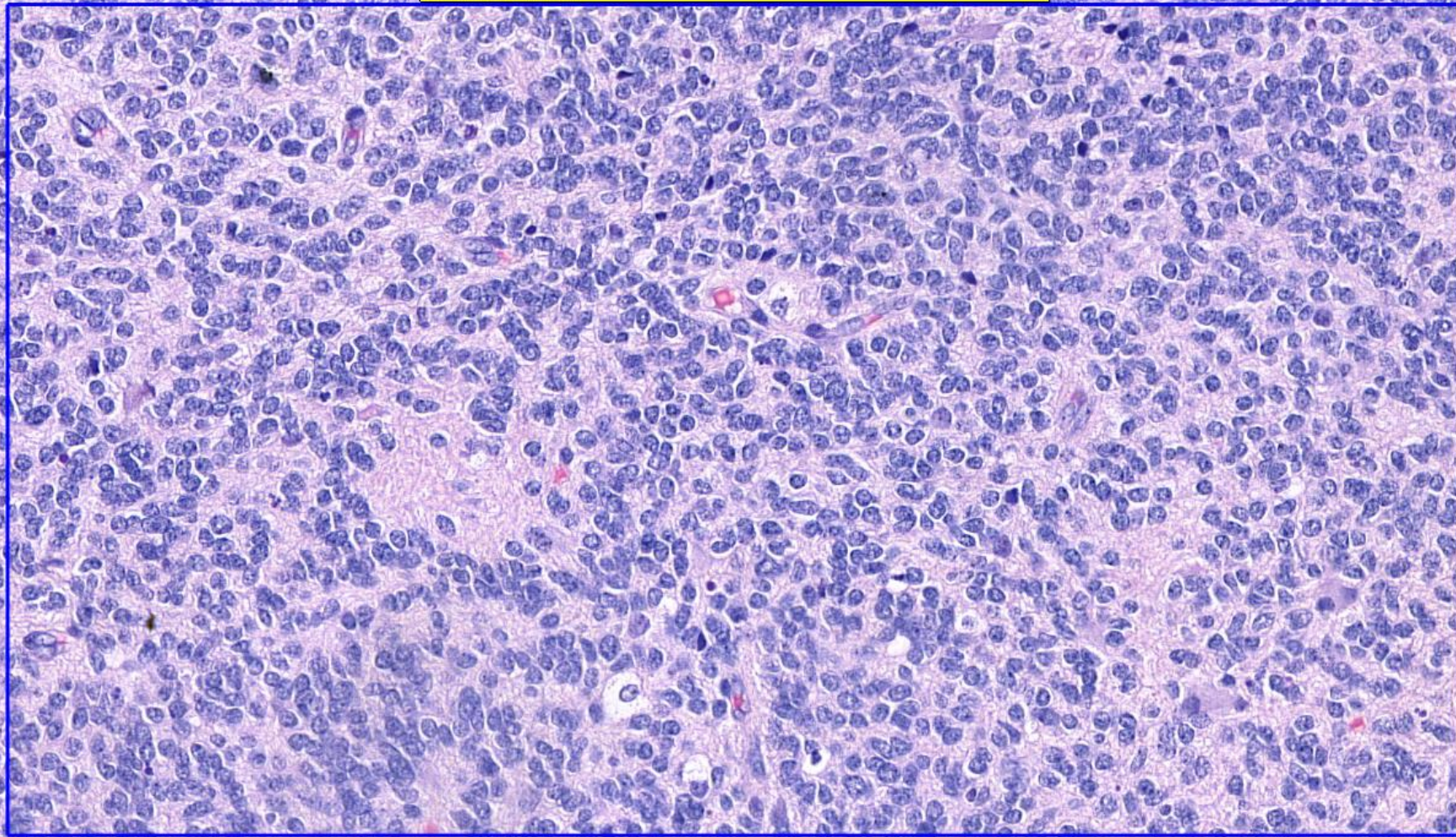


5000 μm



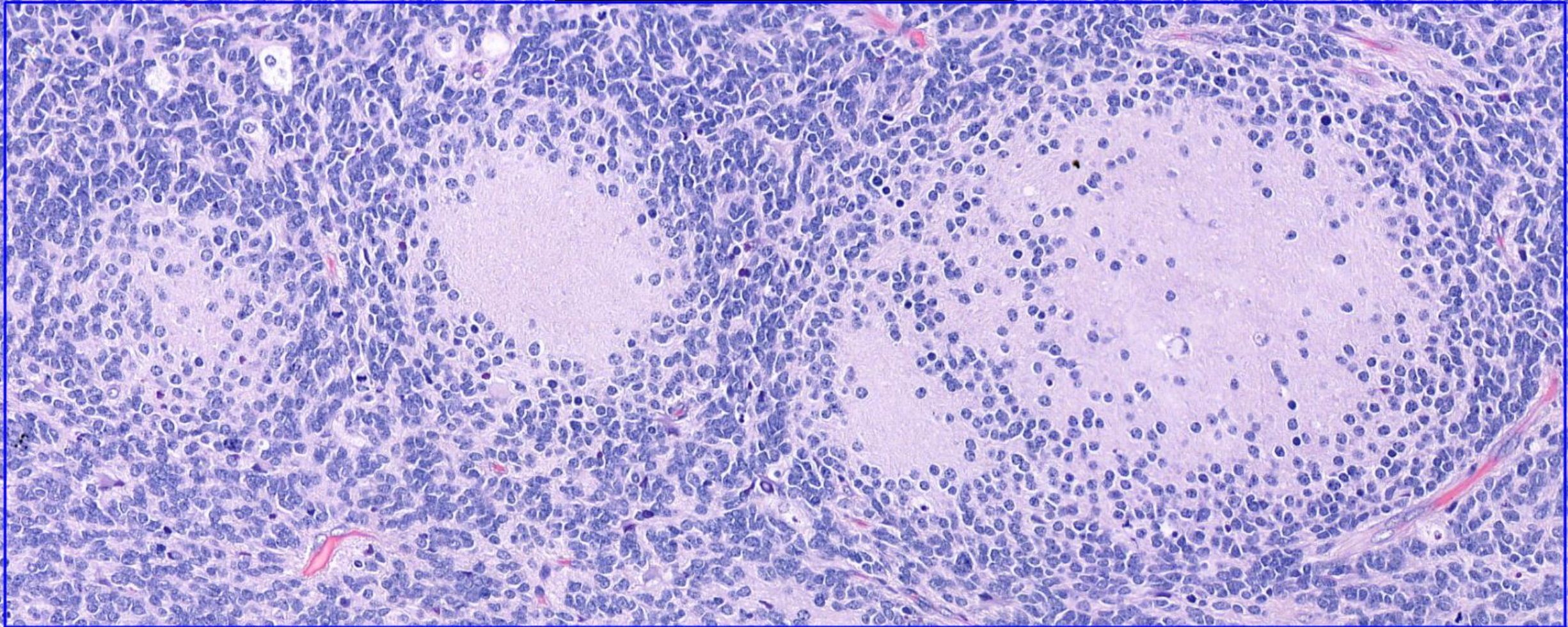
50 μm

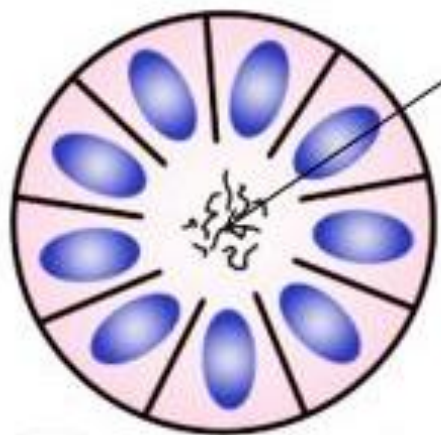
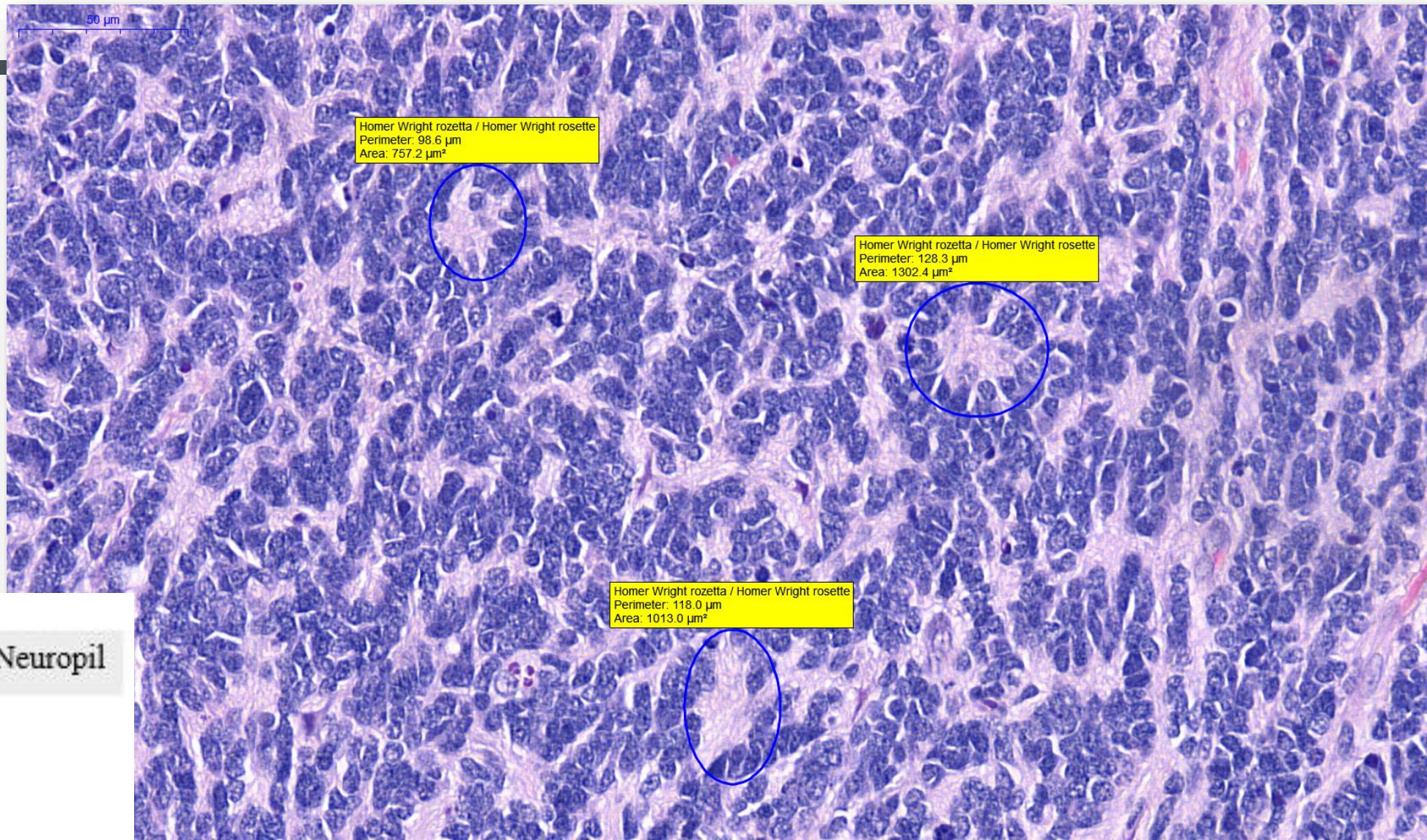
Kis kerek sejtes, differenciáltalan tumor / small round cell, undifferentiated tumor
Perimeter: 1672.3 μm
Area: 161784.4 μm^2



50 μm

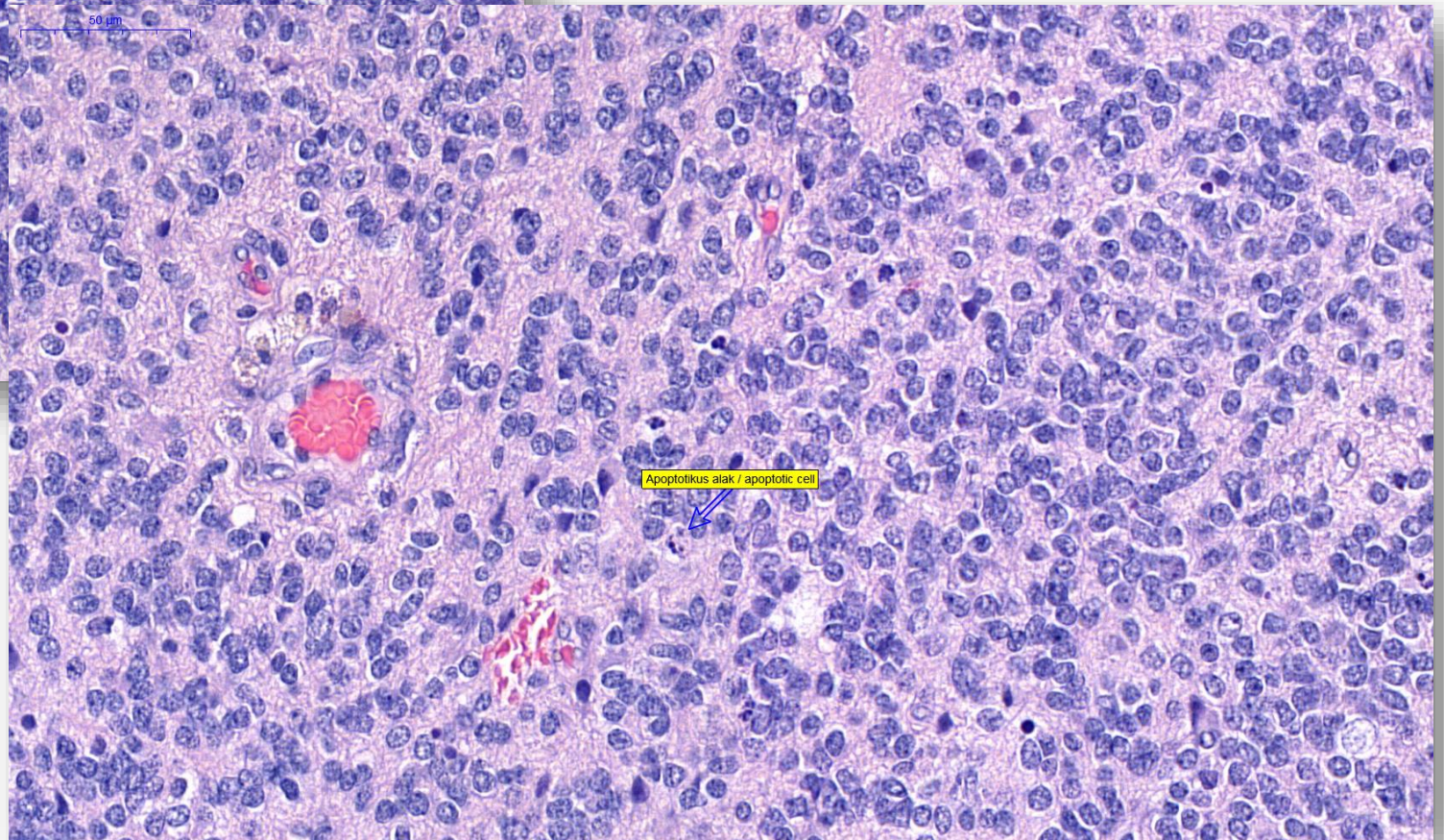
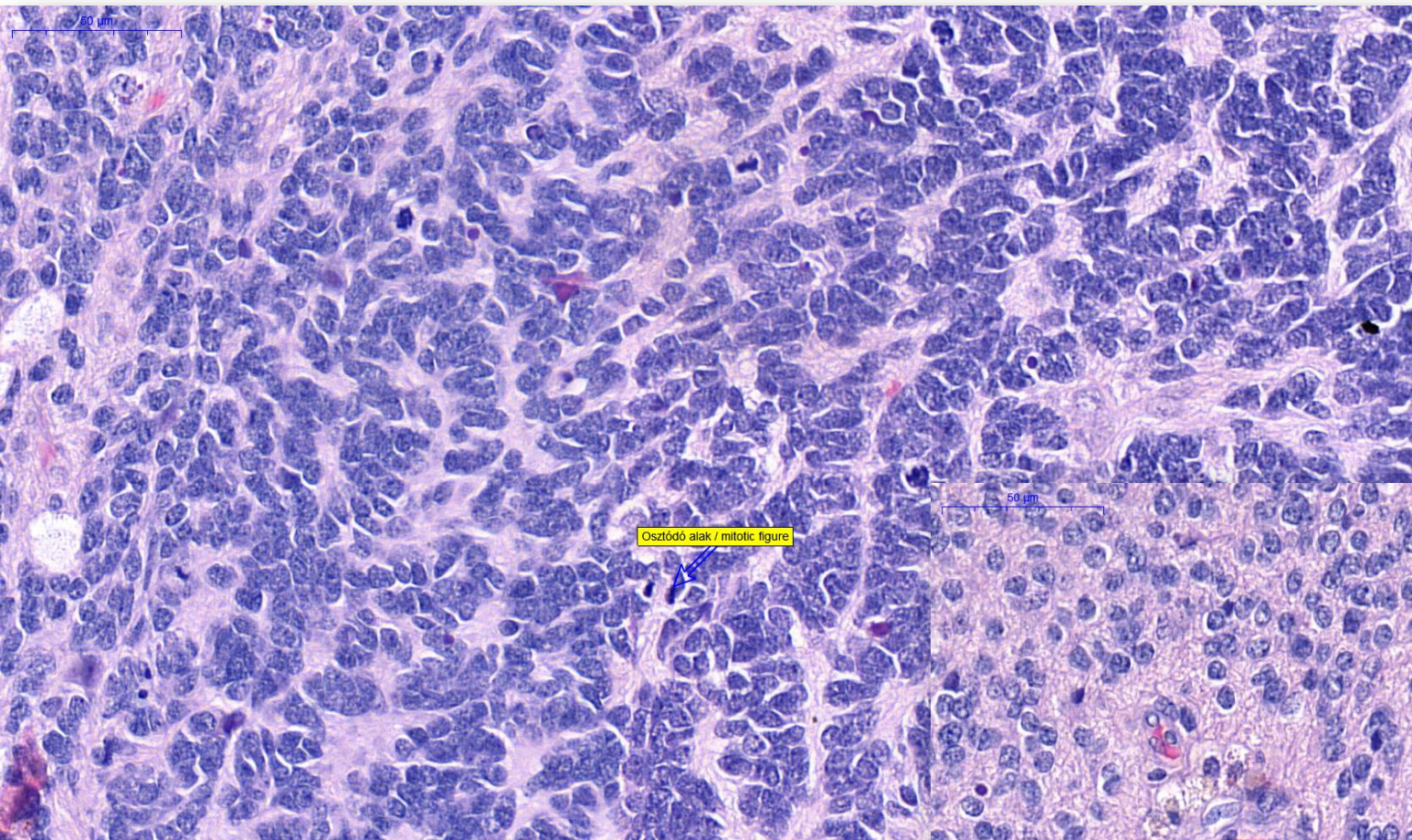
Nodulusok neurocytás differenciációval / nodules of neurocytic differentiation
Perimeter: 2463.5 μm
Area: 309844.2 μm^2



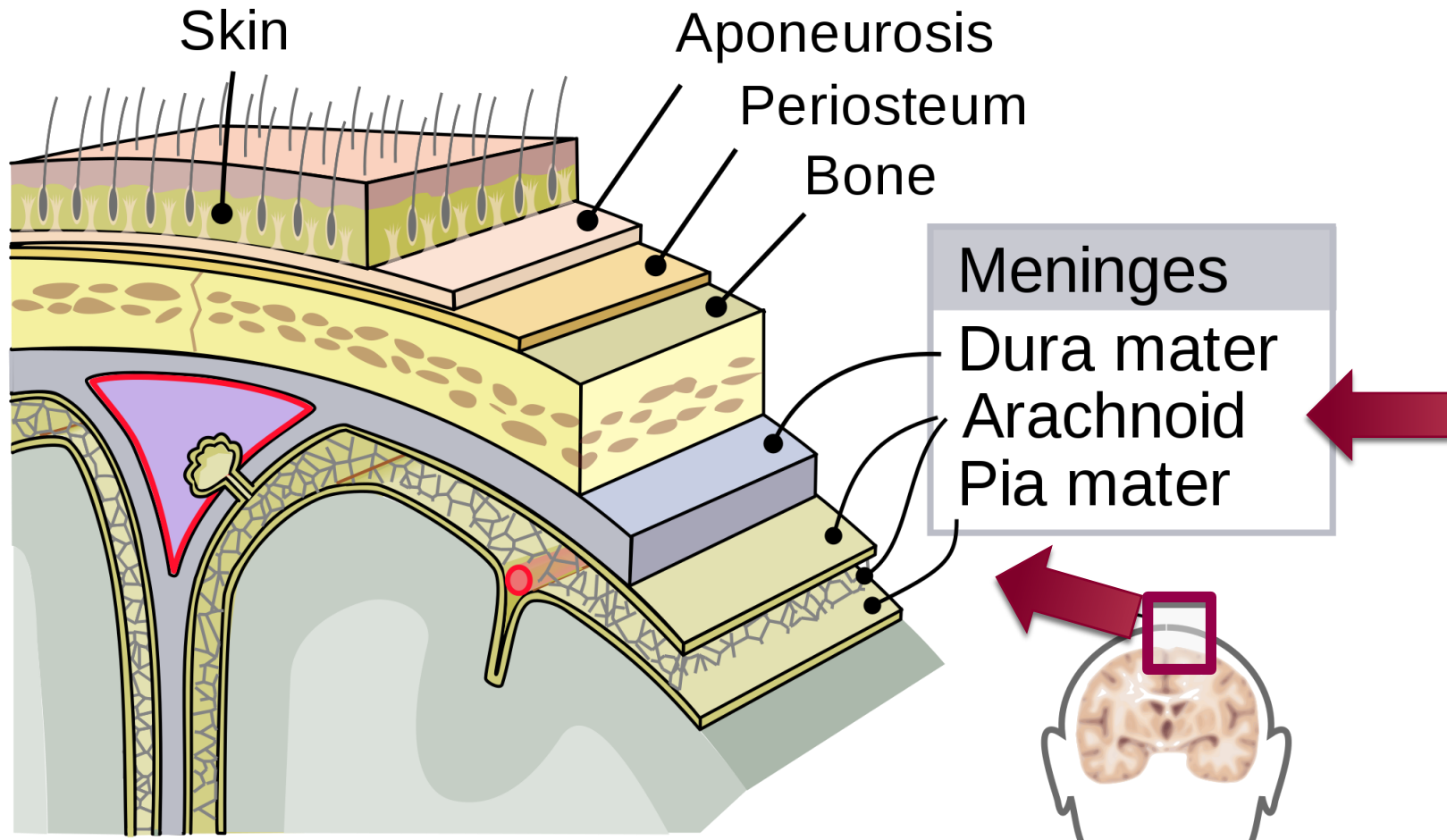


Neuropil

Homer-Wright rosette

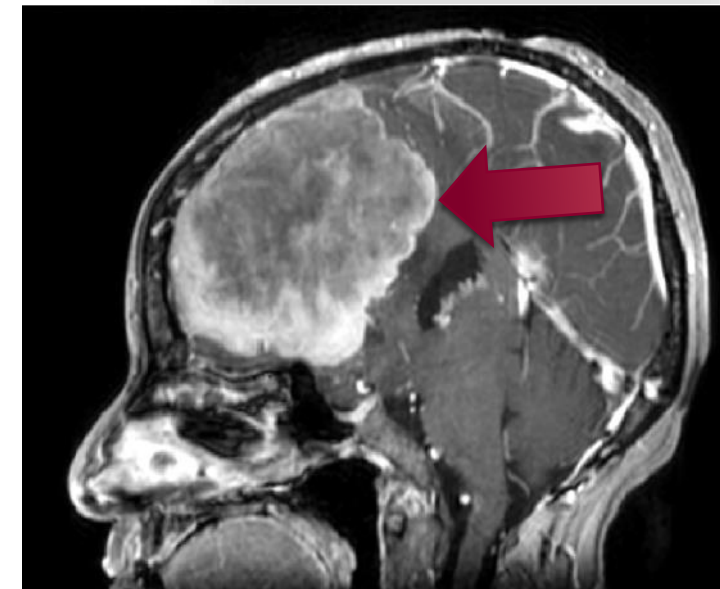
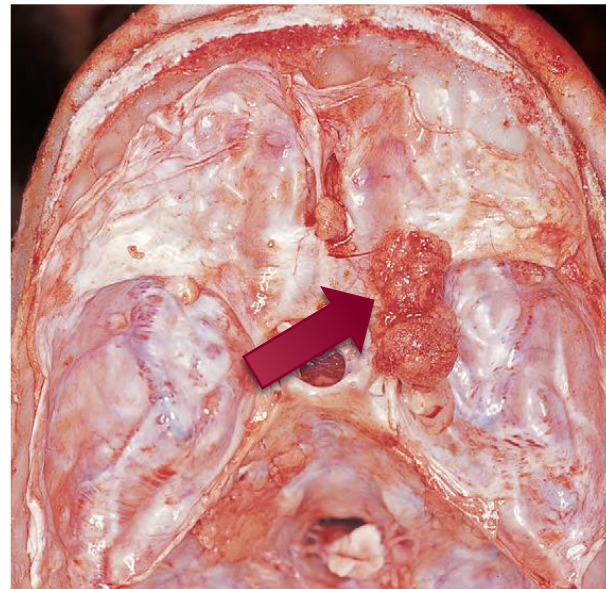
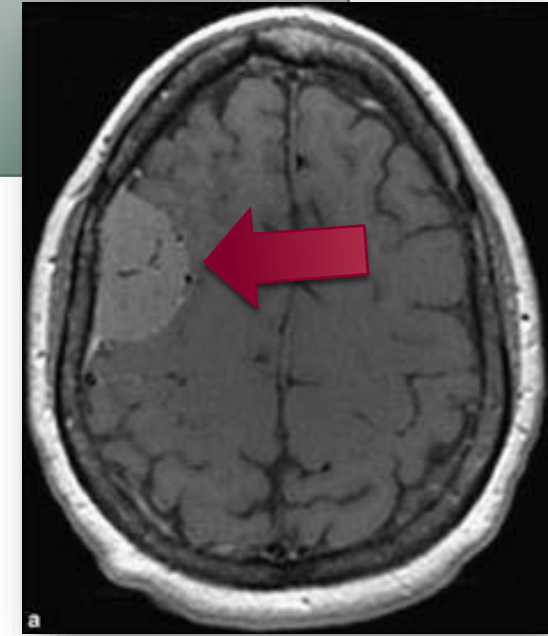


V. MENINGIOMAS

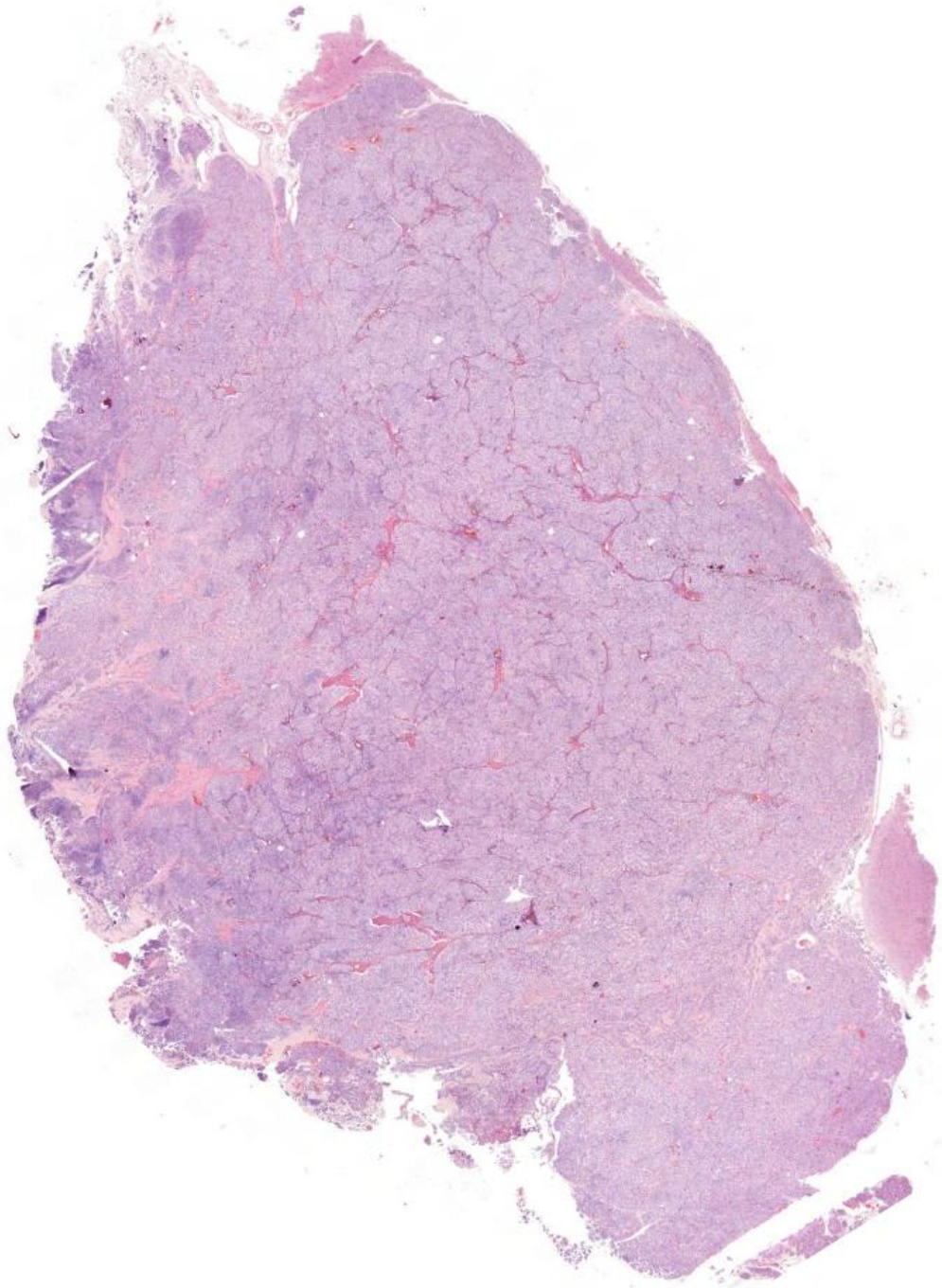


Meningeoma Grade I.

- Incidence increases with age
- Primary CNS tumors ~30% meningioma
- External surfaces or intraventricular (Rare)
- Focal neurological deficits
- Several histological variants

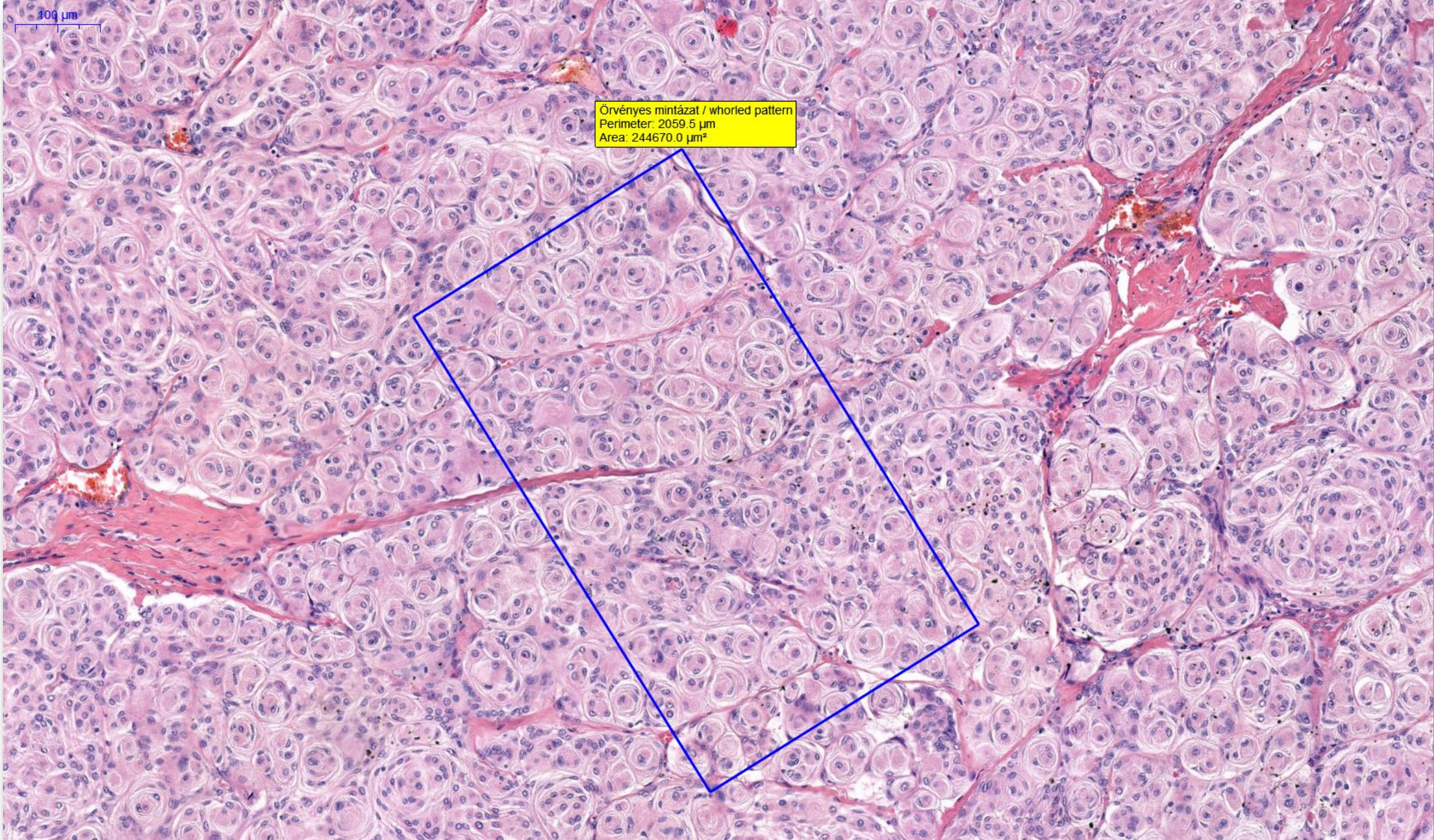


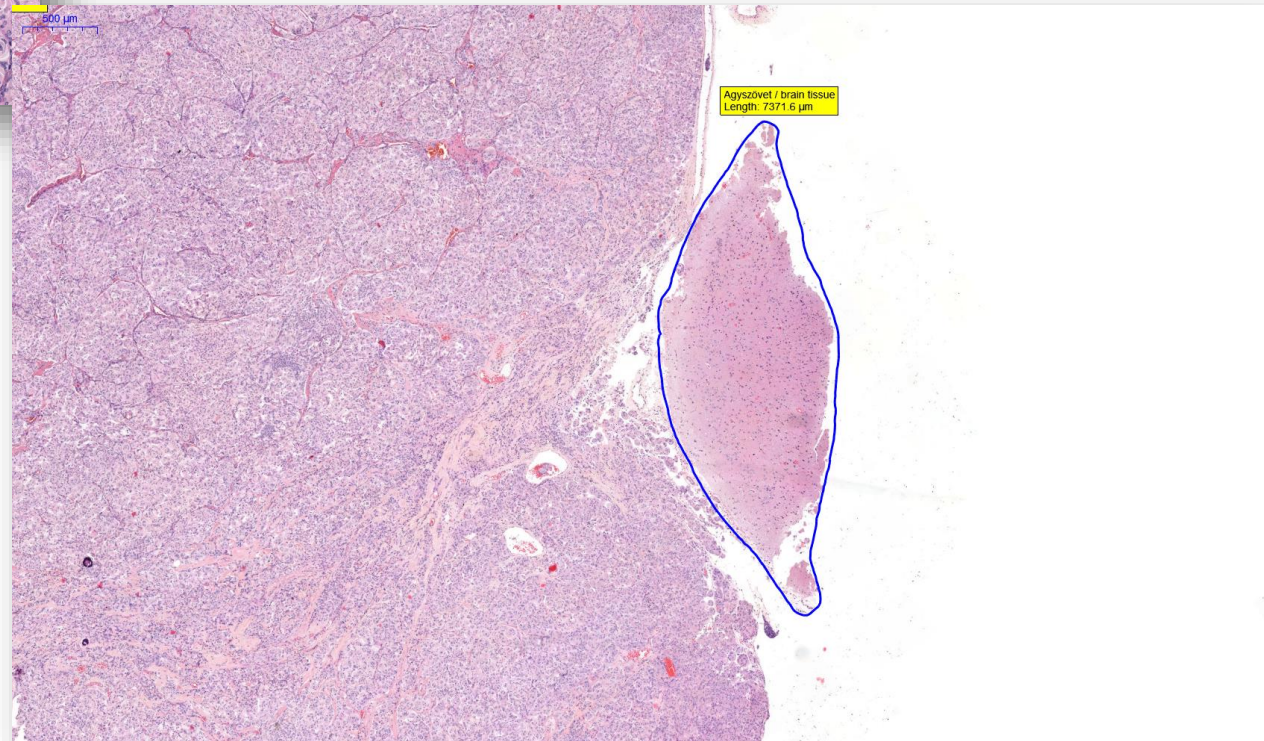
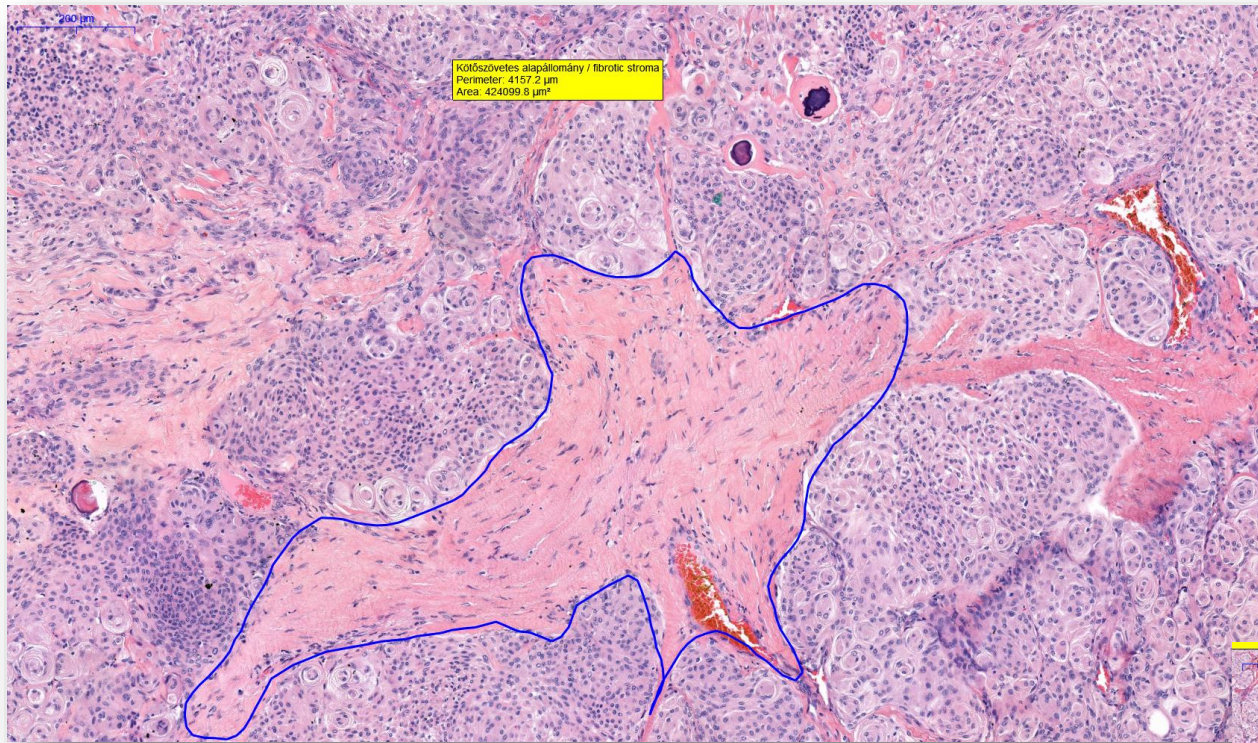
2000 μm



100 µm

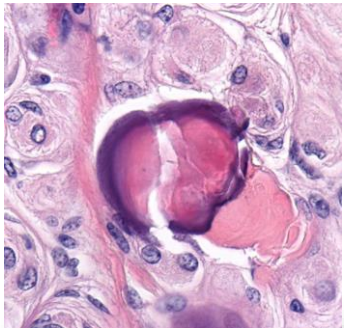
Örvényes mintázat / whorled pattern
Perimeter: 2059.5 µm
Area: 244670.0 µm²



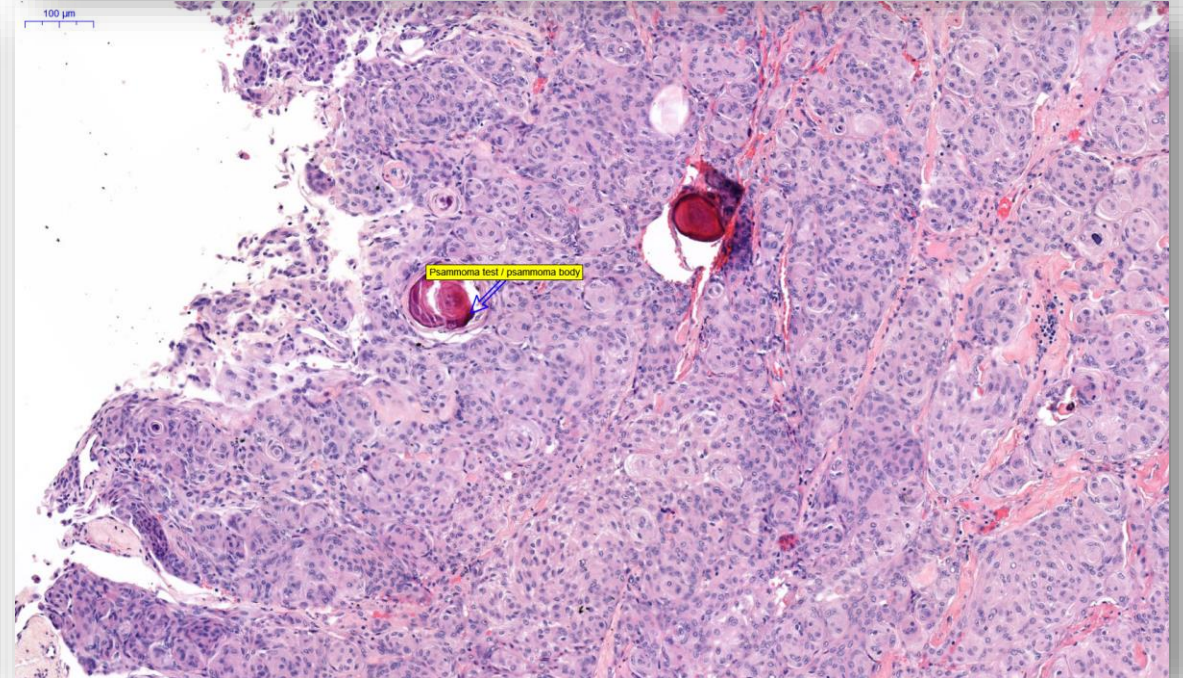
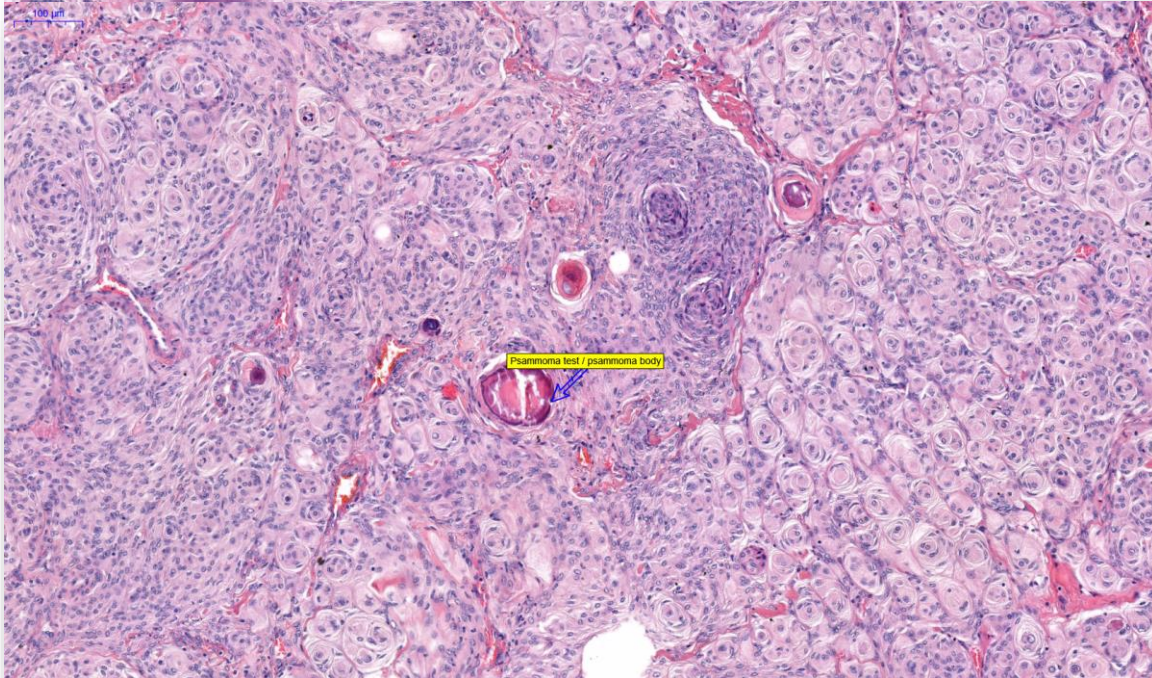


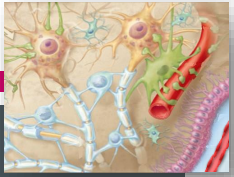
Meningioma

- Grade I. – Common
- Grade II. – Mitosis - 4/10HPF
- Grade III. – 20/10HPF



Psammoma body

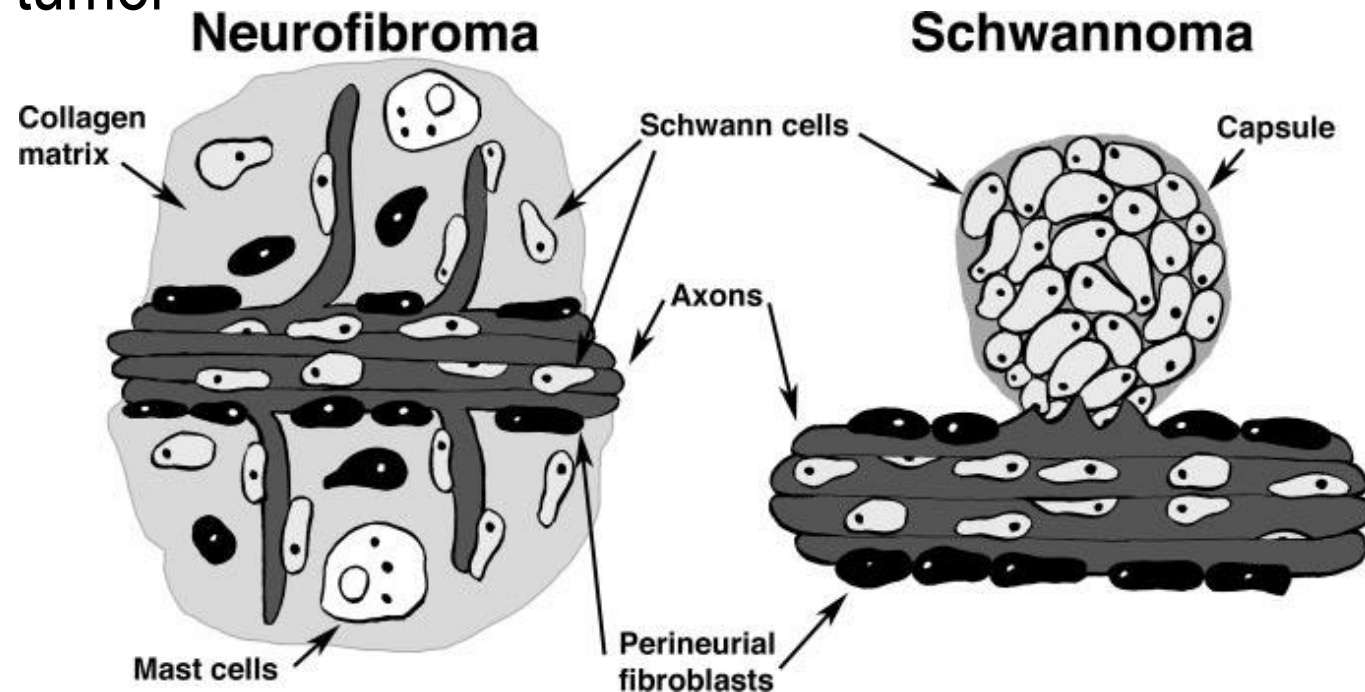


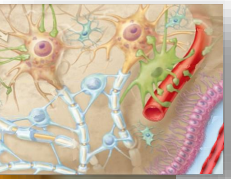


TUMORS OF THE PERIPHERAL NERVOUS SYSTEM

Peripheral nerve sheath tumors

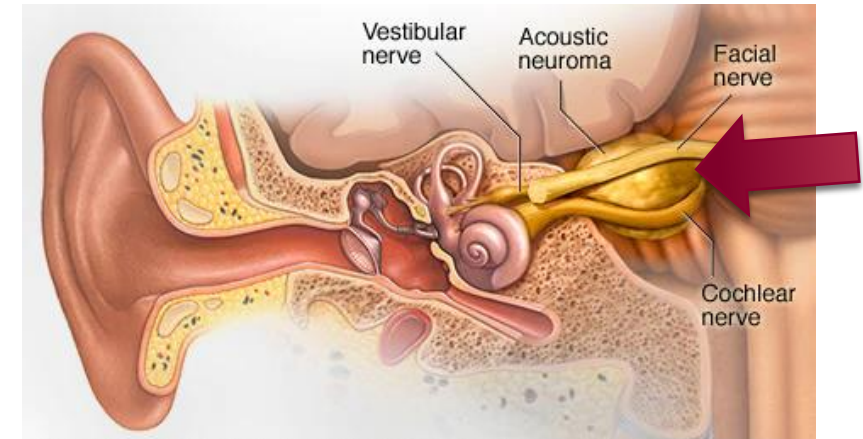
- Schwannoma
- Neurofibroma
- Malignant peripheral nerve sheath tumor



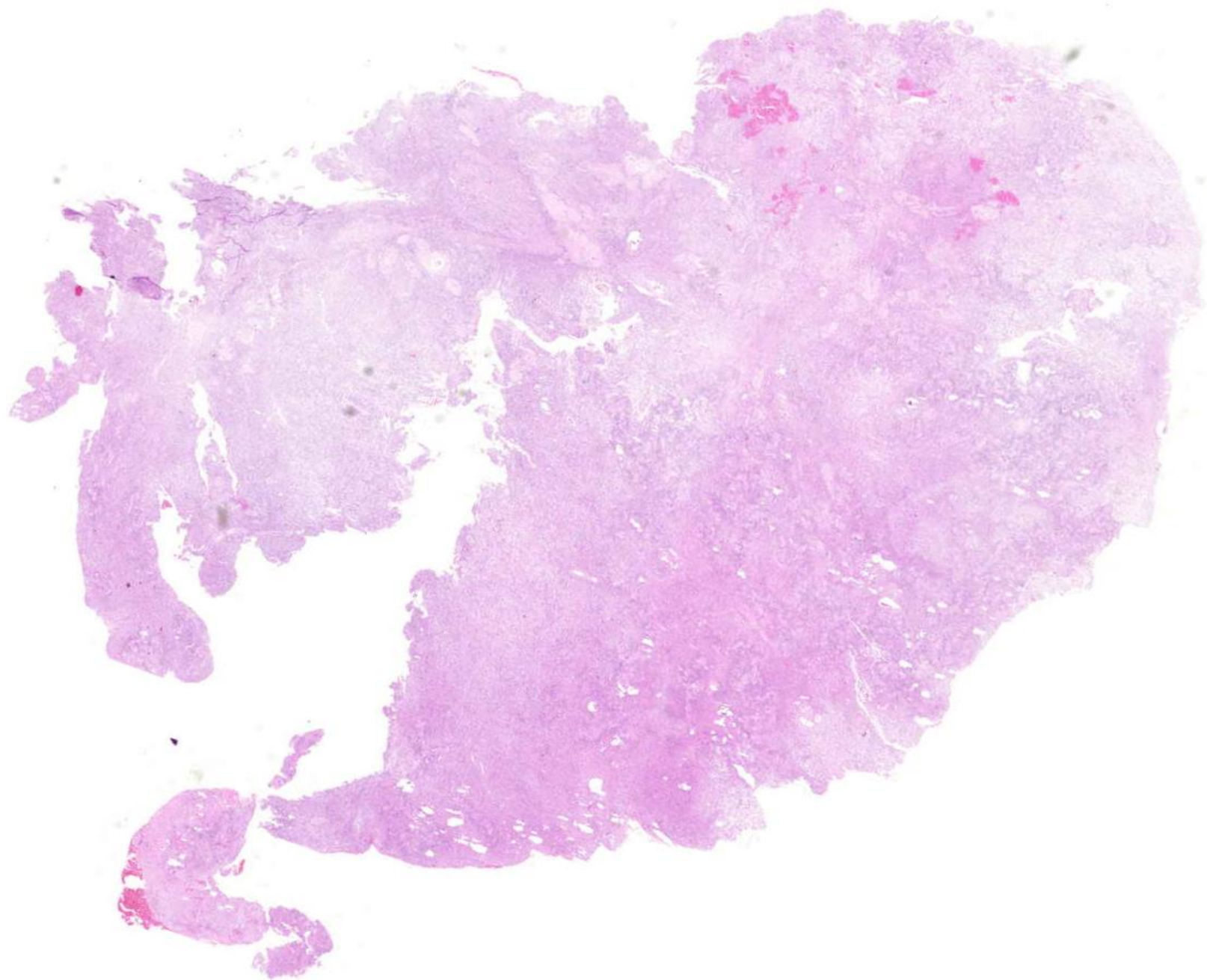


Schwannoma

- Sporadic
- 10% NF2 associated
- Spinal chord – Peripheral nerves – Compression
- Cranial nerves – Vestibular nerve – Hearing loss
- Histology
 - Antoni A area – Cellular, Verocay-body
 - Antoni B area – Loose, Paucicellular



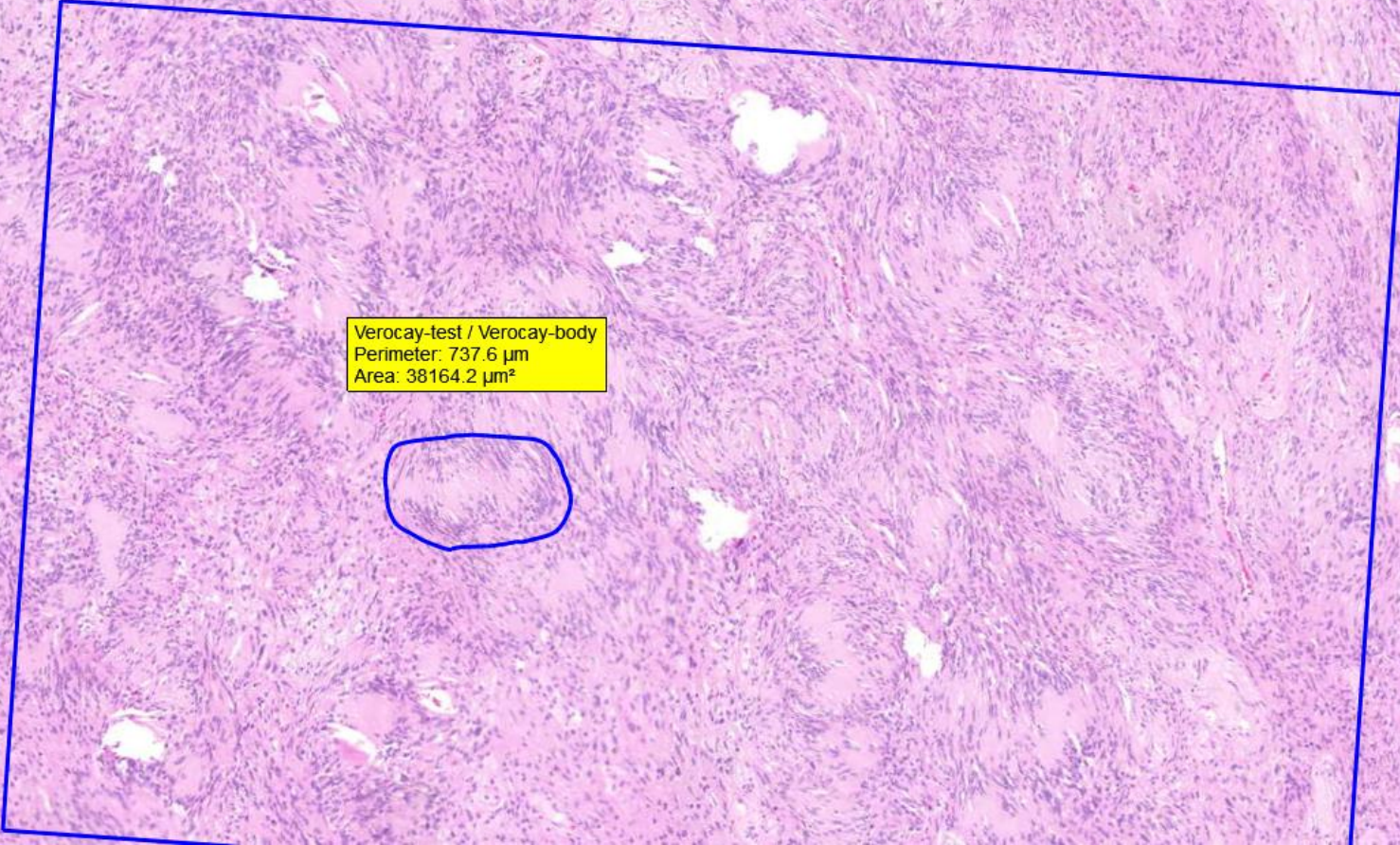
2000 μ m

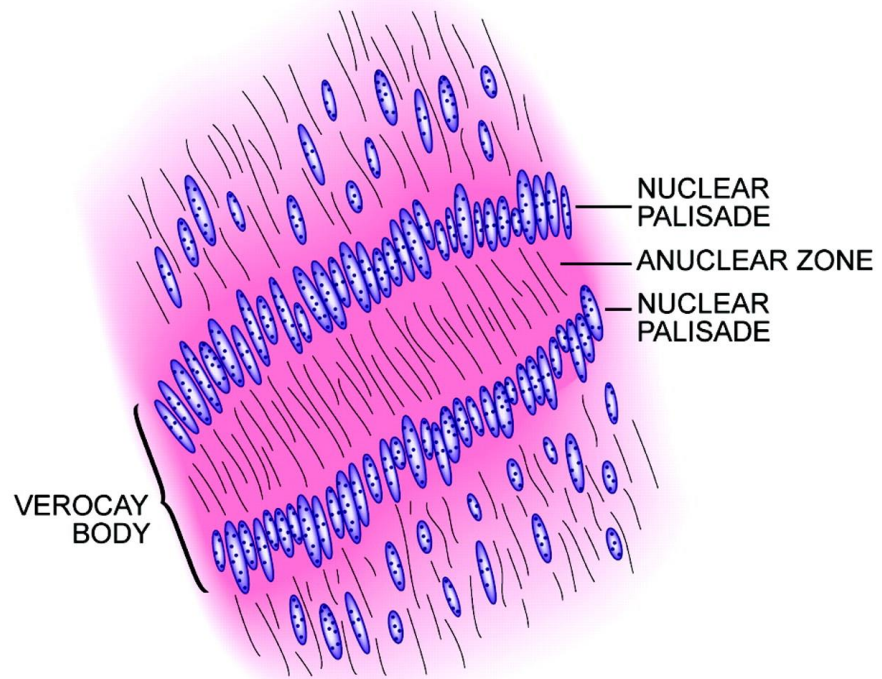
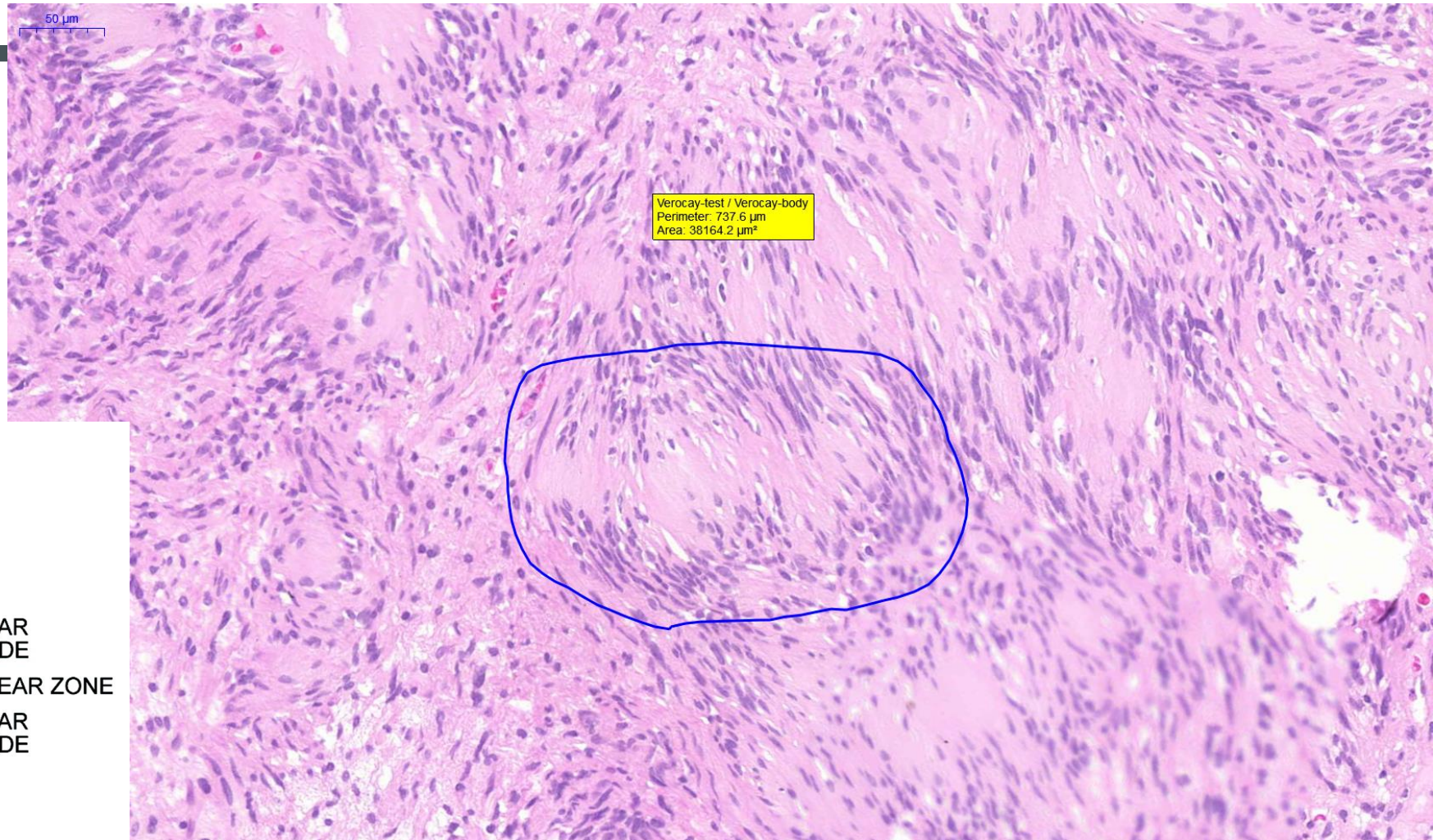


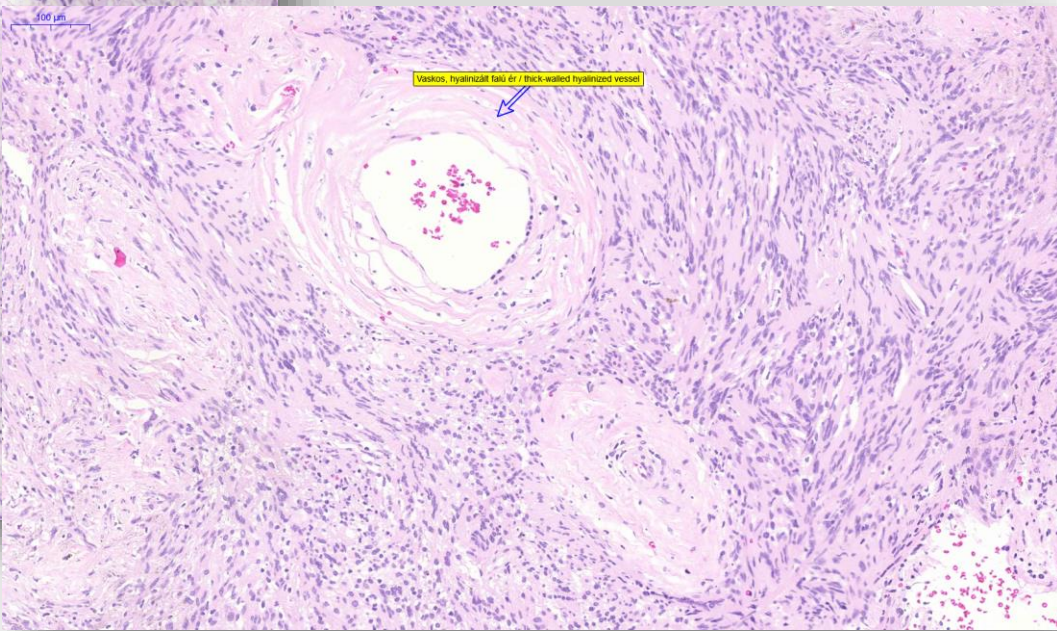
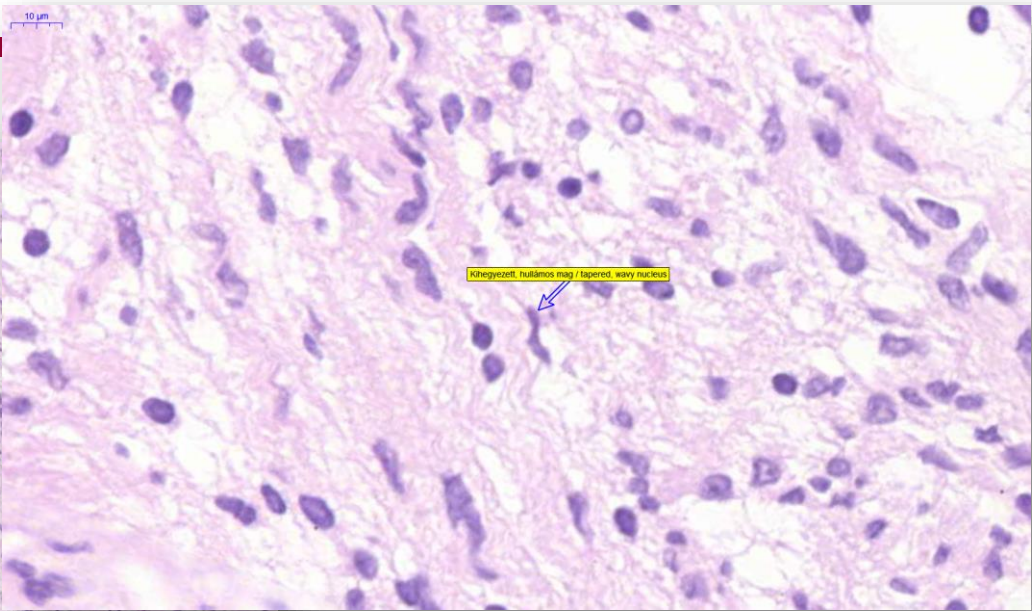
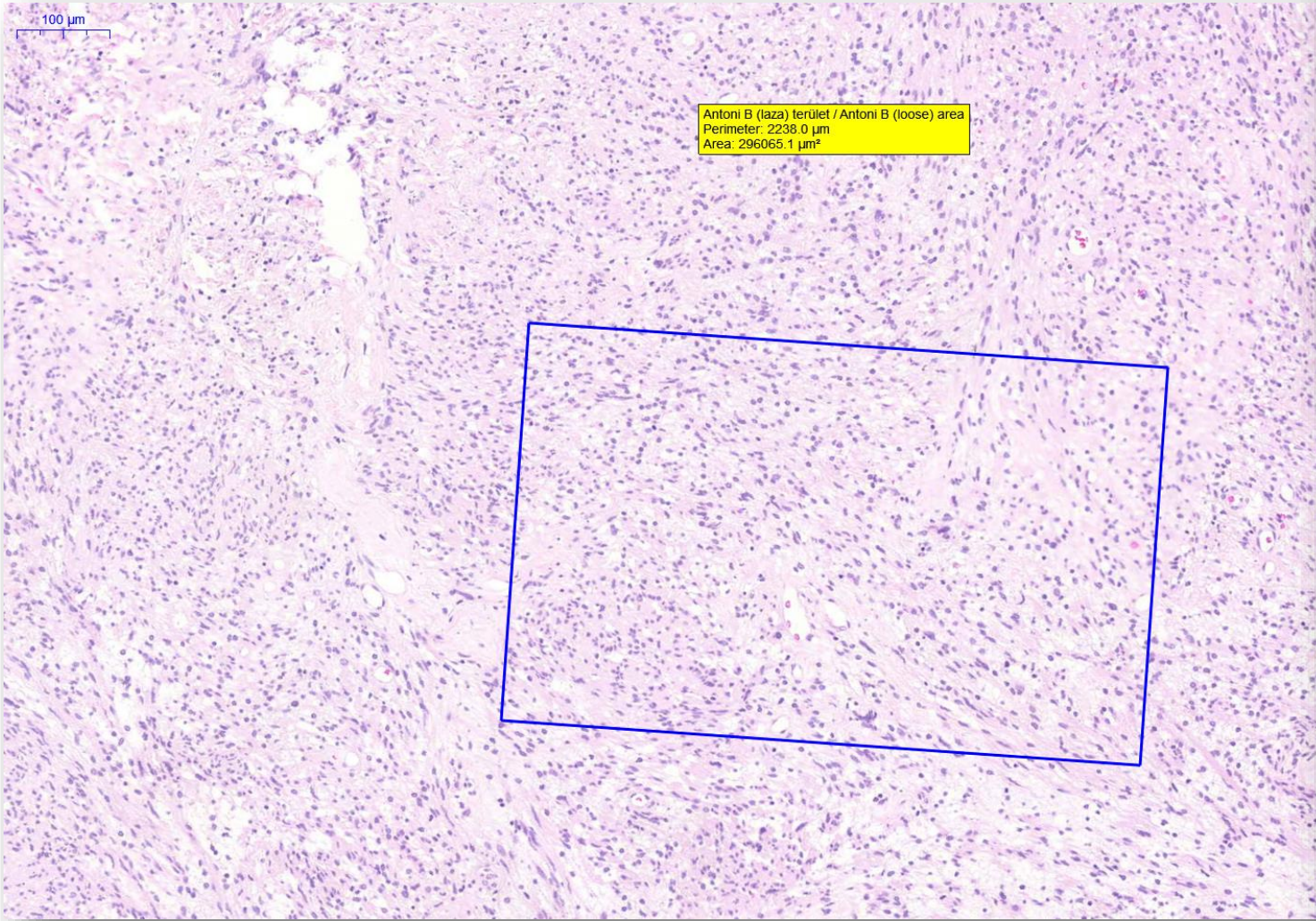
200 μm

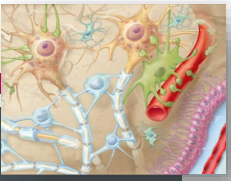
Antoni A (kompakt) terület / Antoni A (compact) area
Perimeter: 6.4 mm
Area: 2.4 mm^2

Verocay-test / Verocay-body
Perimeter: 737.6 μm
Area: 38164.2 μm^2

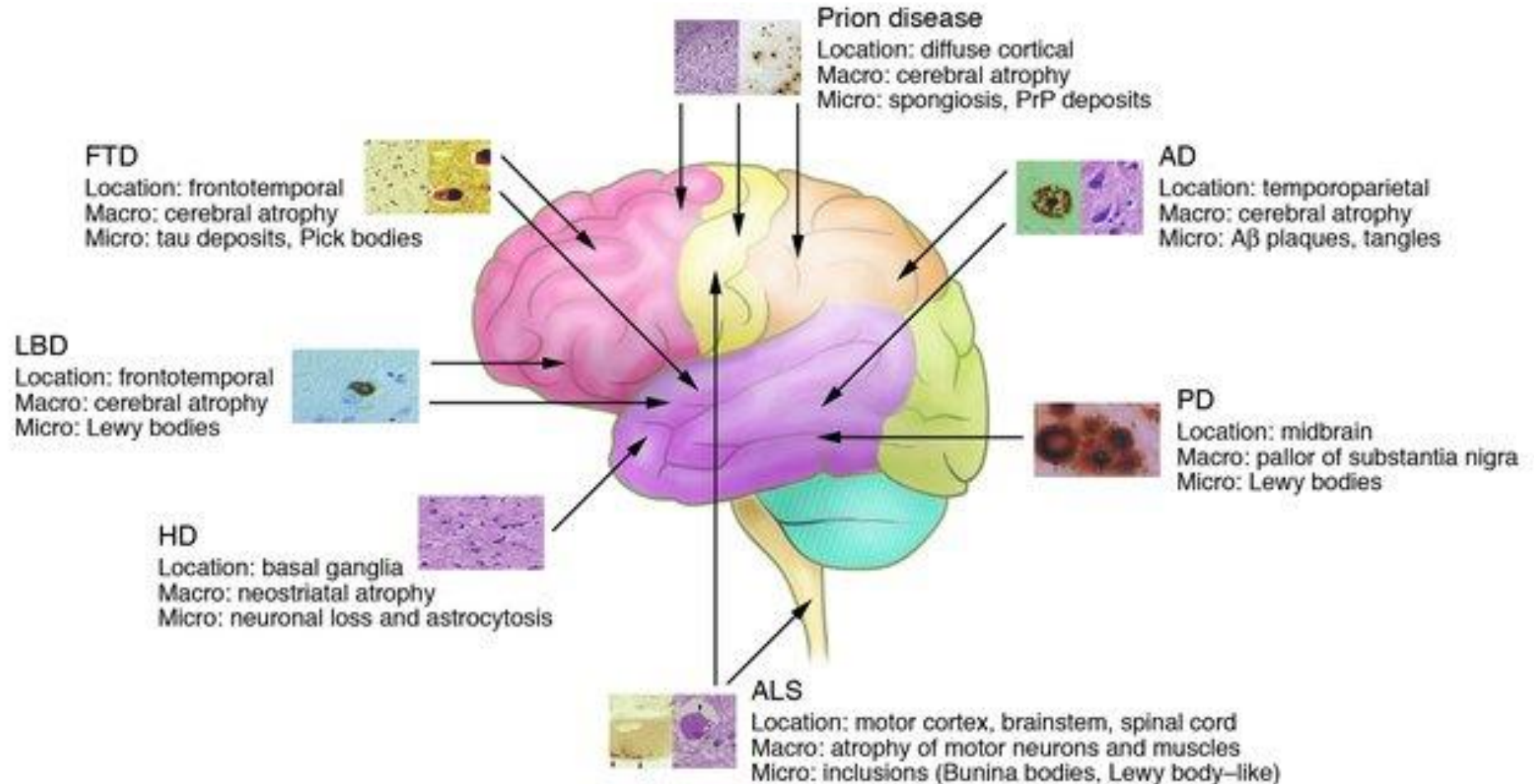






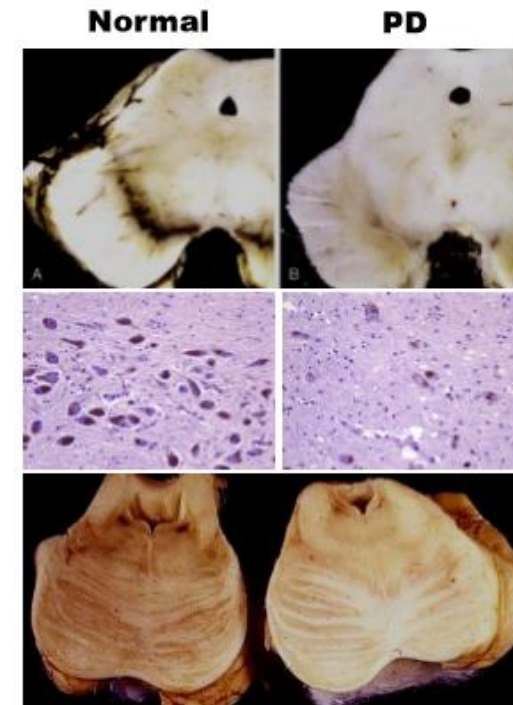
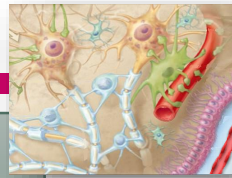


NEURODEGENERATIVE DISORDERS



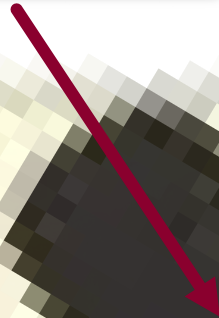
Parkinson Disease (PD)

- Common (10-20 new case/100 000/y)
- After 60 ys (40-70 ys)
- Loss of dopaminergic neurons
- Specific movement symptoms: tremor, rigidity, bradykinesia, instability
- +/- Dementia
- Autonomic dysfunction and behavioral disorders often present in advance motor problems
- Types: - Sporadic
- Familiar (AD/AR)



2000 μ m

Substantia nigra



BRAD05



1000 μm

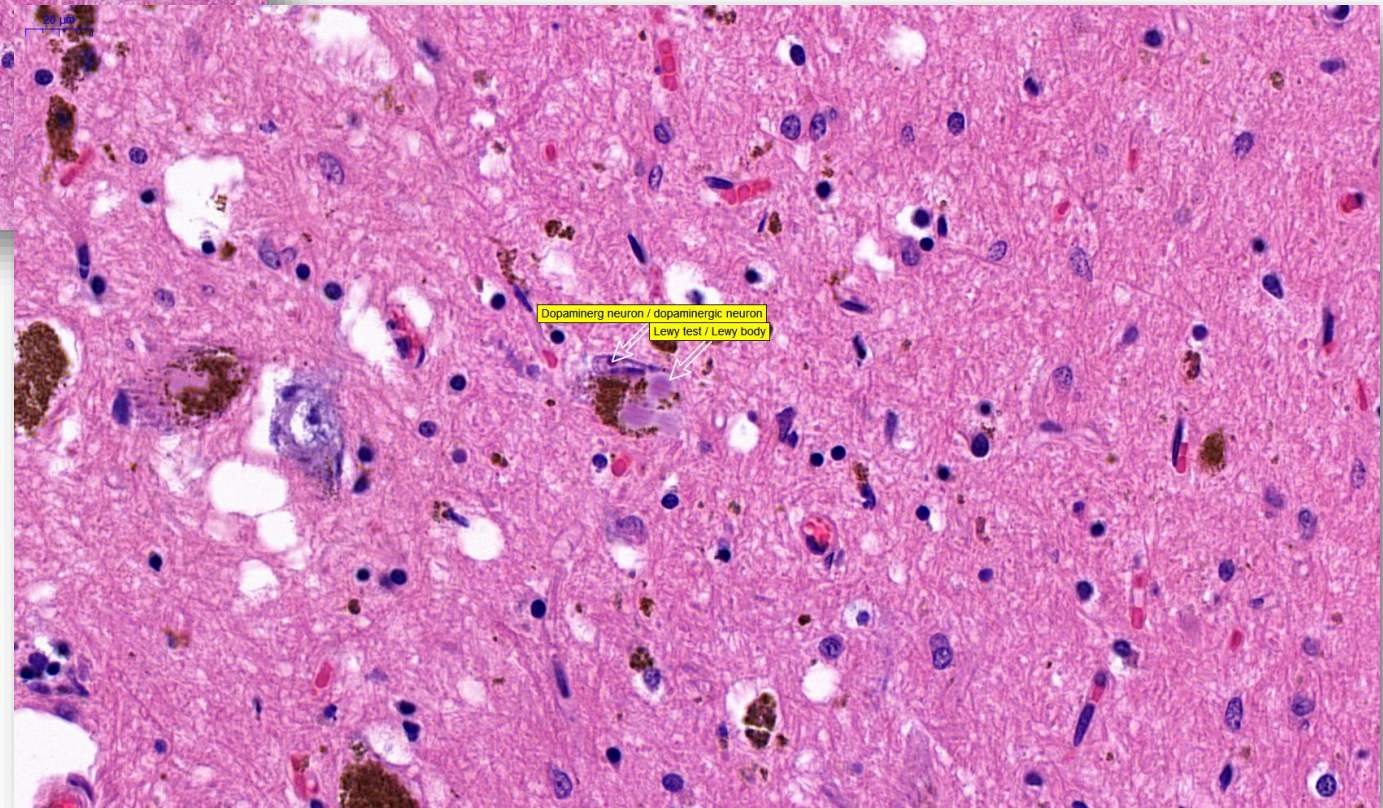
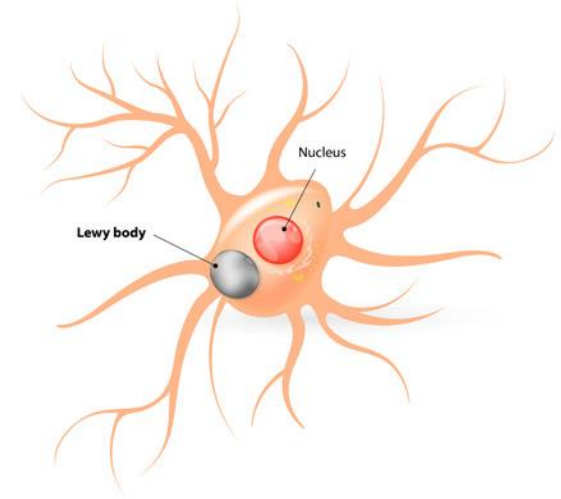
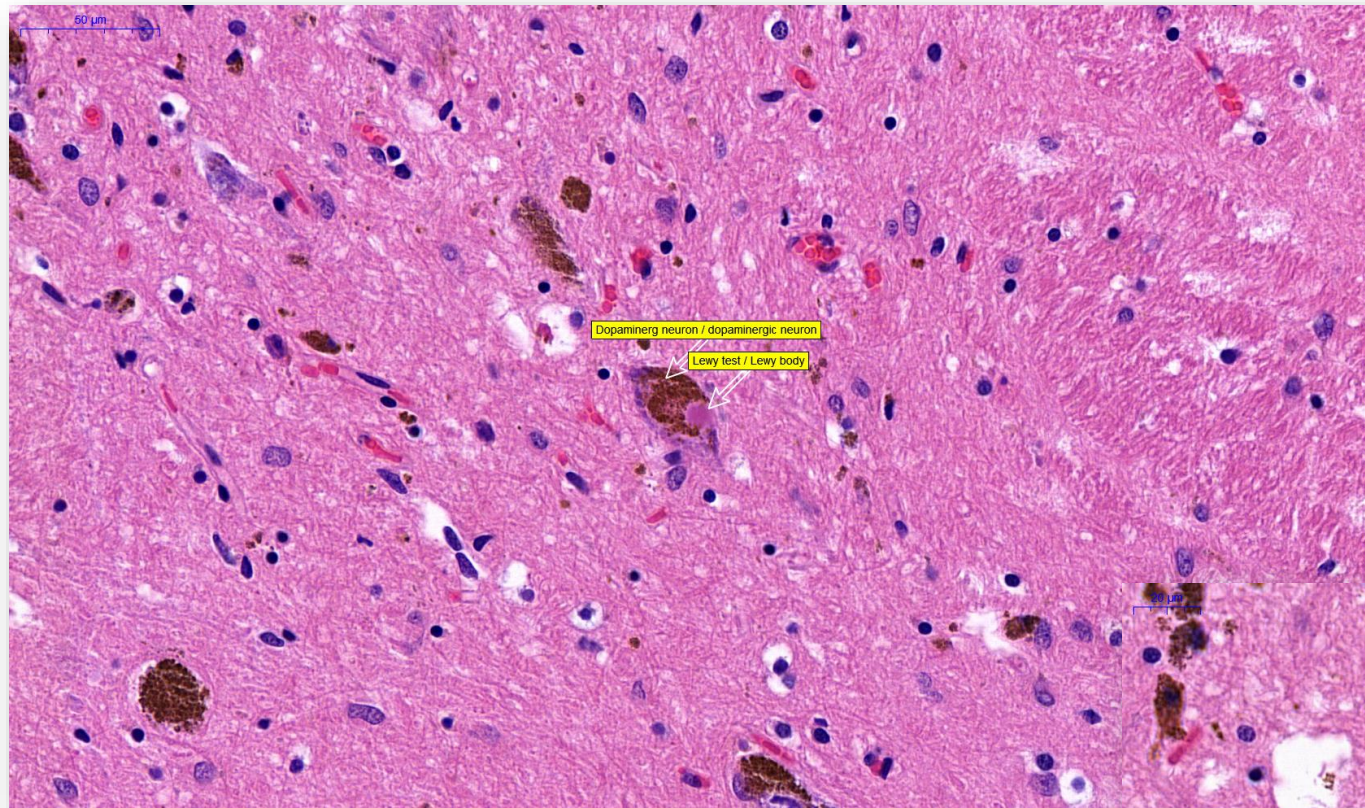
Substantia nigra
Perimeter: 21.5 mm
Area: 17.1 mm²

Neuronvesztés, gliosis / neuronal loss, gliosis
Perimeter: 2305.9 μm
Area: 286227.0 μm^2

Dopamine Lewy test / Lewy body ic neuron

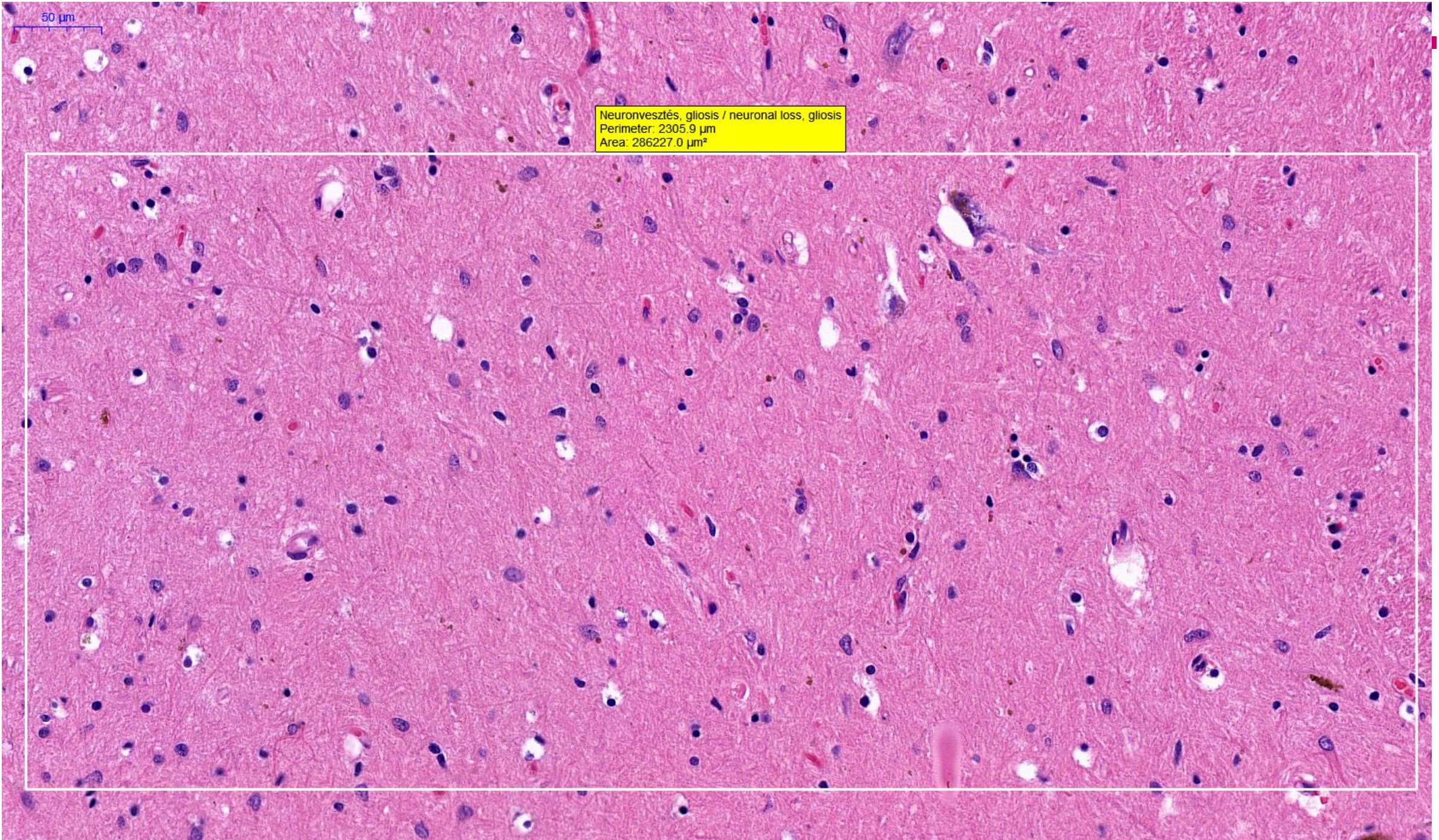
Dopamine Lewy test / Lewy body ic neuron


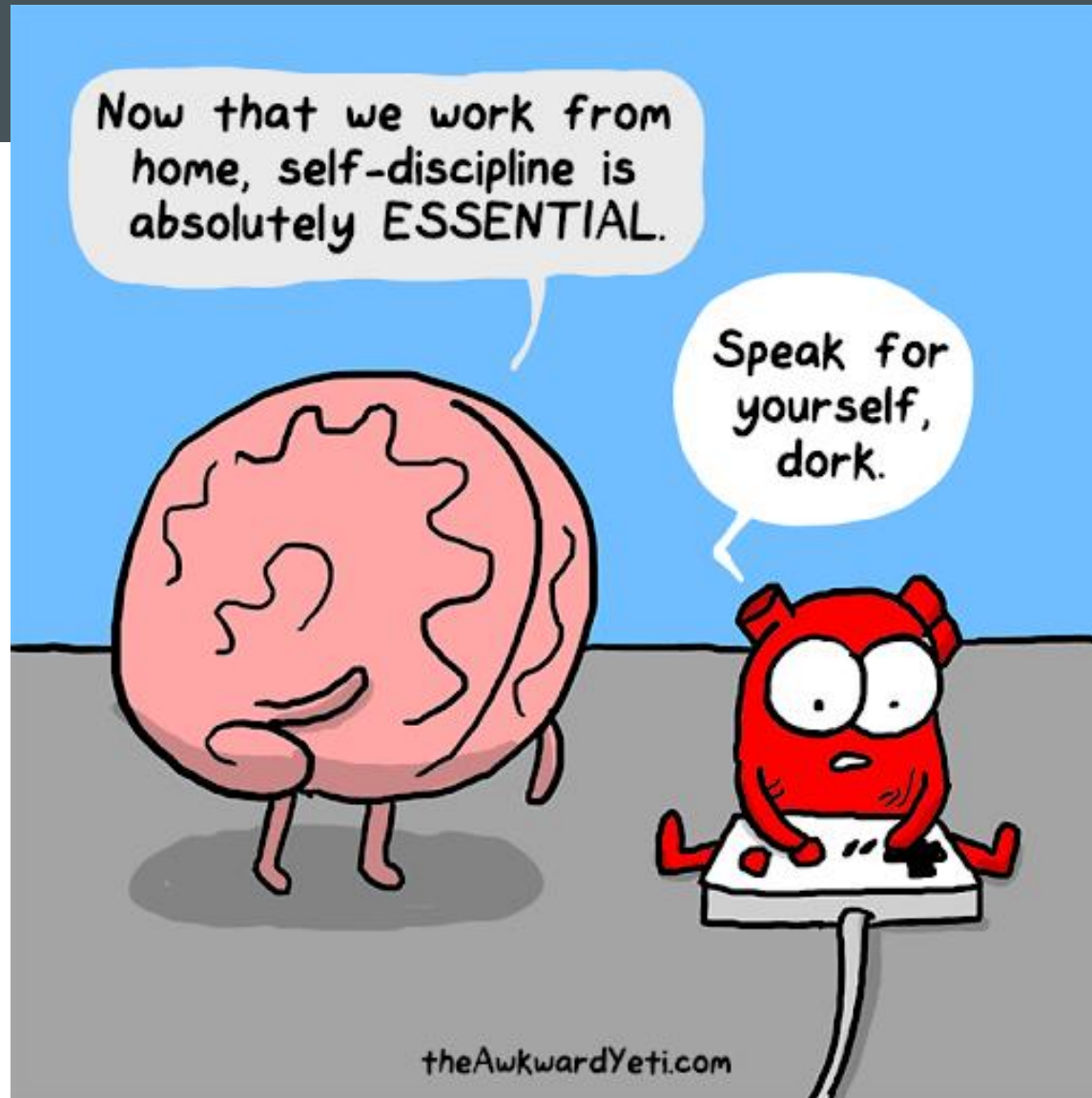




50 μm

Neuronvesztés, gliosis / neuronal loss, gliosis
Perimeter: 2305.9 μm
Area: 286227.0 μm^2





KEEP
CALM
AND
STUDY
THE BRAIN