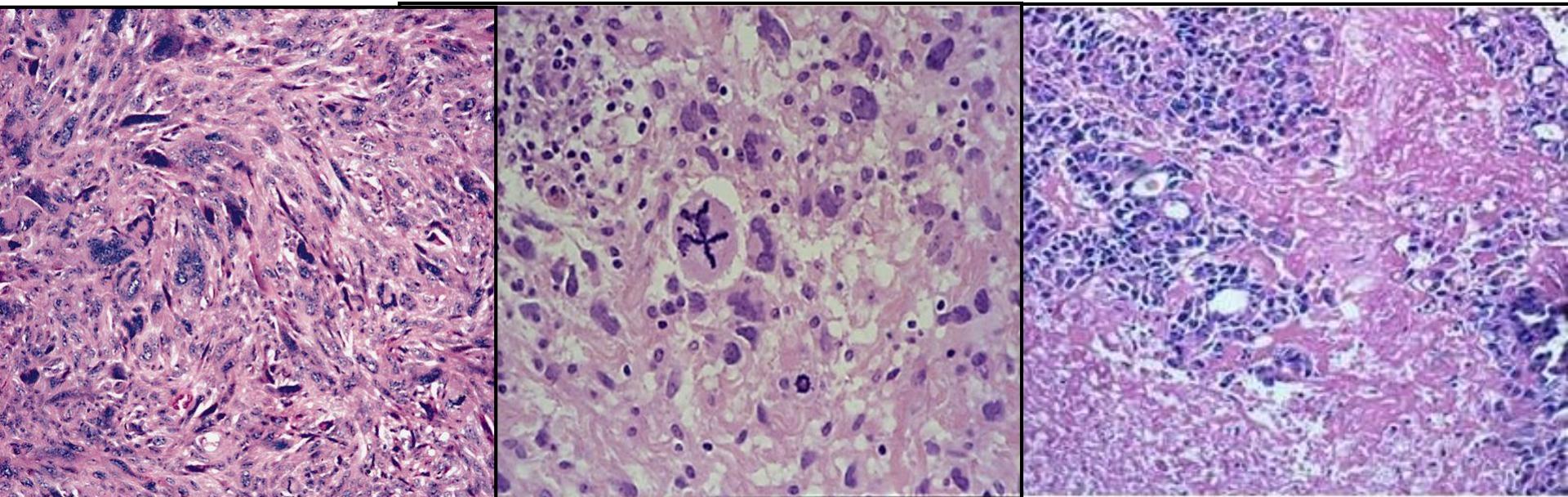


Soft tissue neoplasms

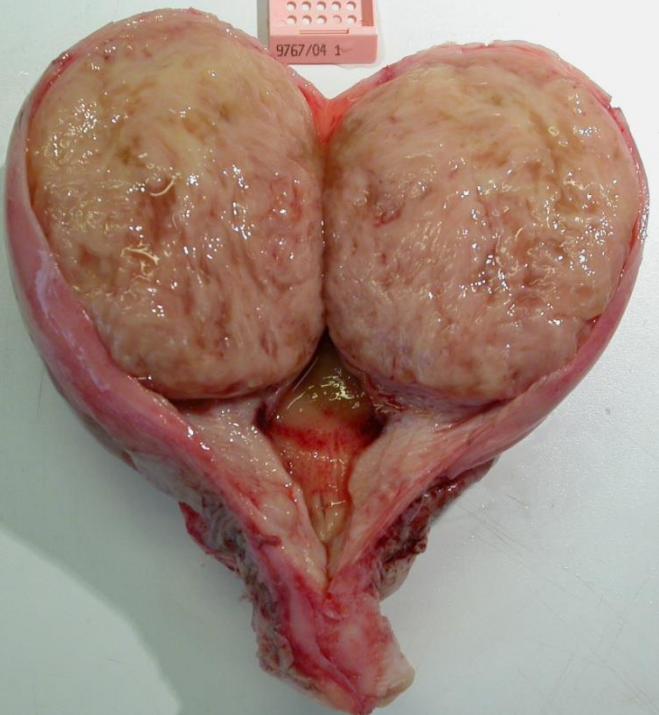
Histological Features of Malignancy In Mesenchymal Tumors

- Cellular atypia
- Number of mitoses
- Necrosis



Leiomyoma

- Most common tumor in women (premenopausal)
- Most common in the uterus, but may occur anywhere, may be multiple
- Well circumscribed, whitish-gray, whorly appearance
- Submucosal, intramural or subserosal
- Composed of smooth muscle bundles

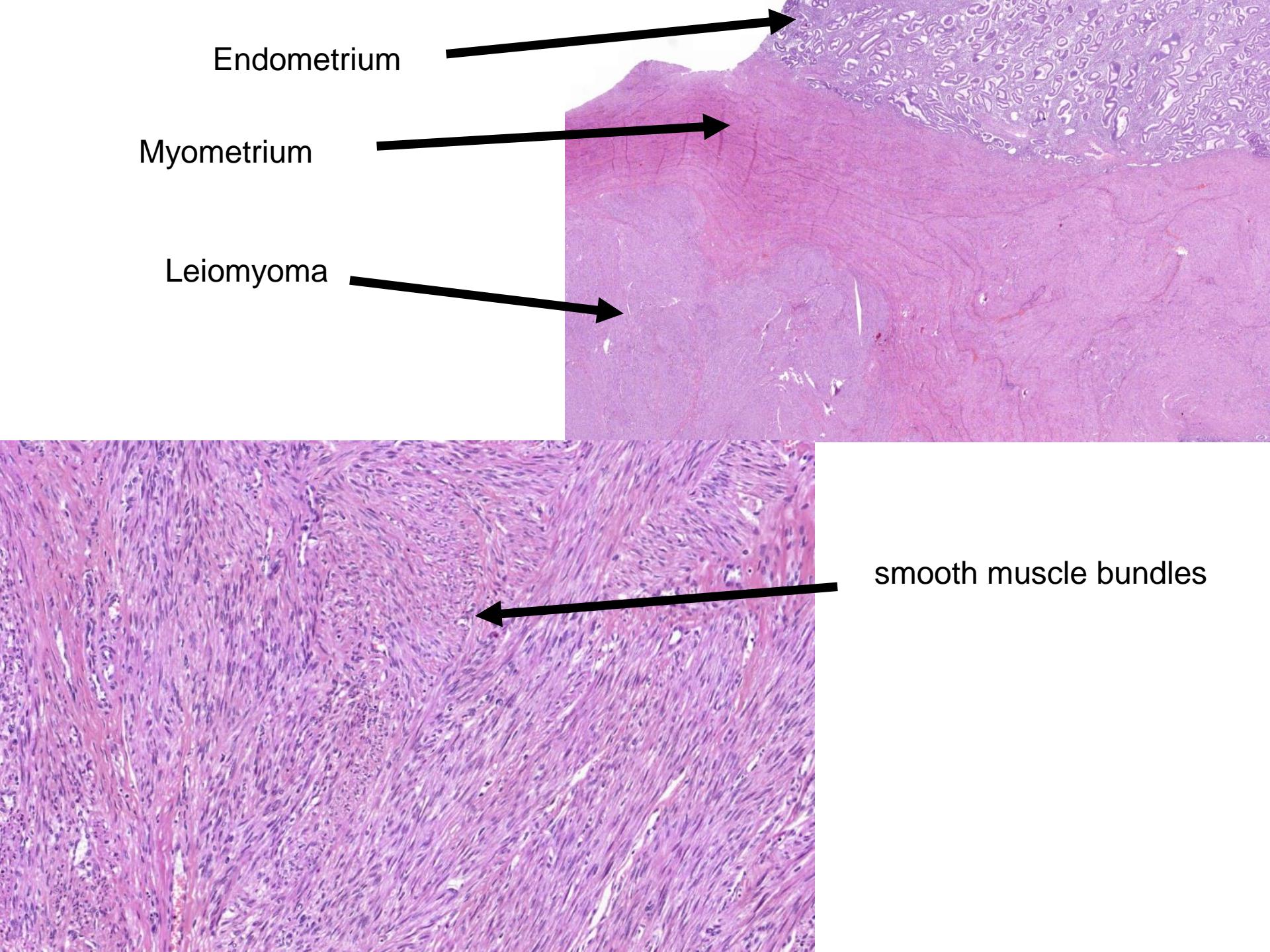


Endometrium

Myometrium

Leiomyoma

smooth muscle bundles



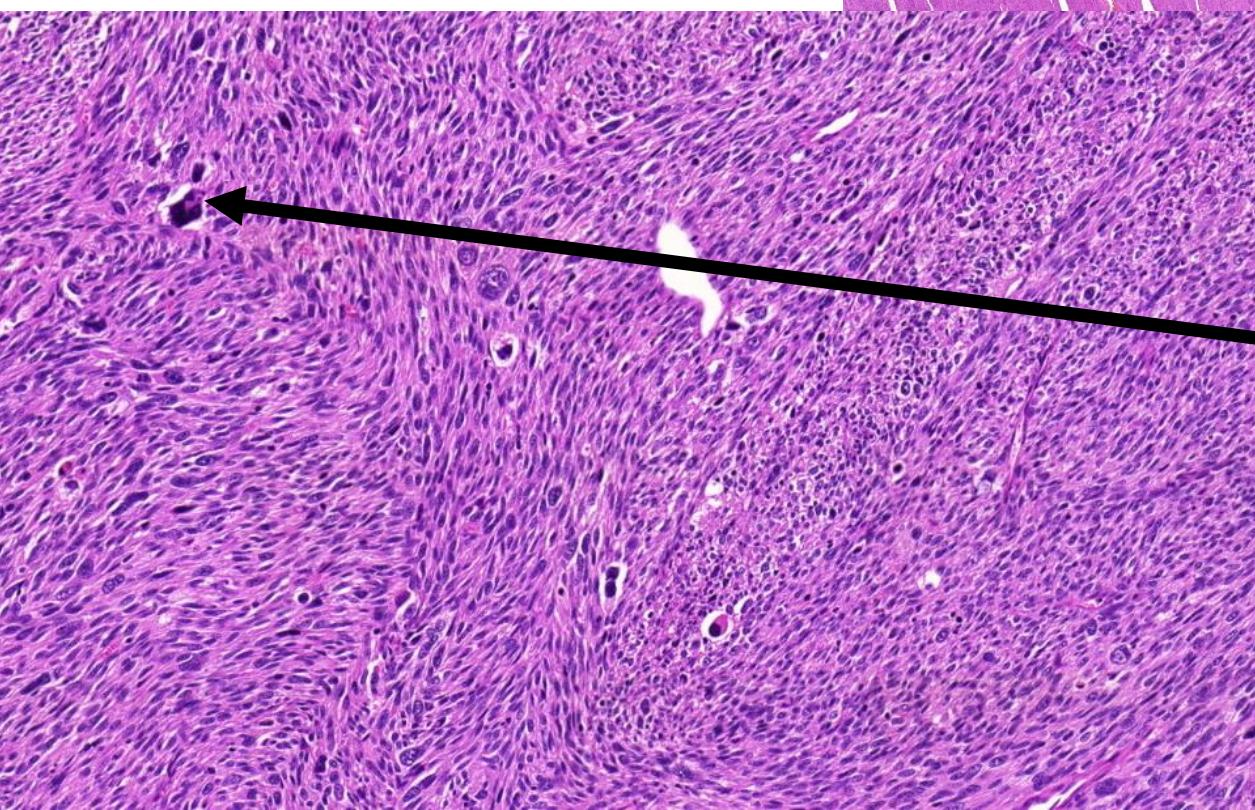
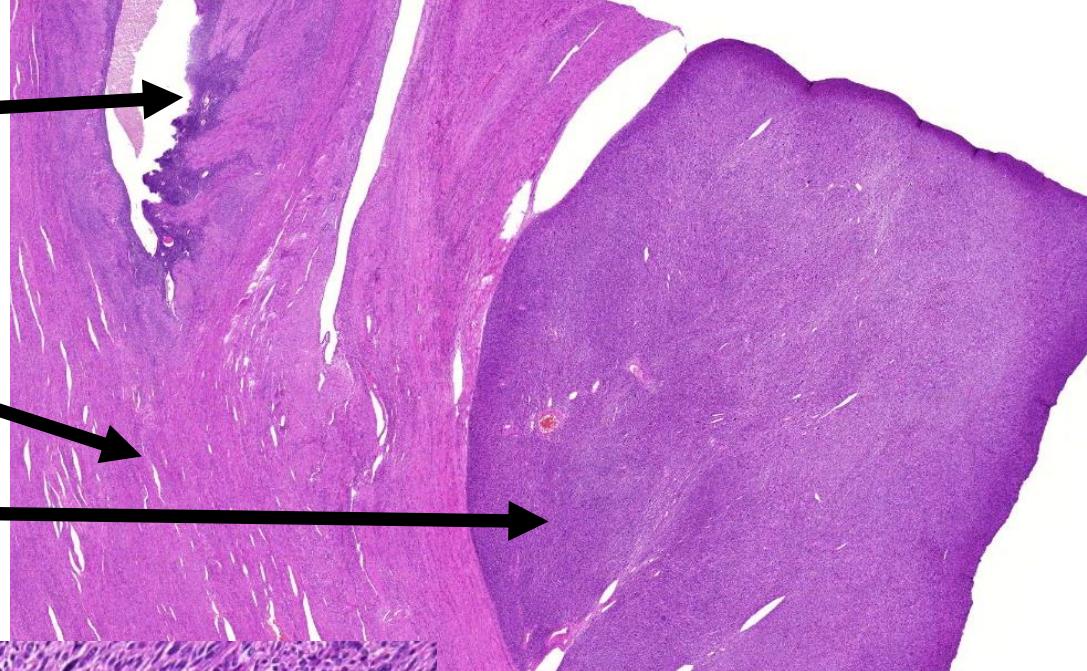
Leiomyosarcoma

- Most common tumor in women (postmenopausal)
- Arises de novo, solitary
- Soft, with necrosis, haemorrhage
- Cytological atypia, high mitotic rate

endometrium

myometrium

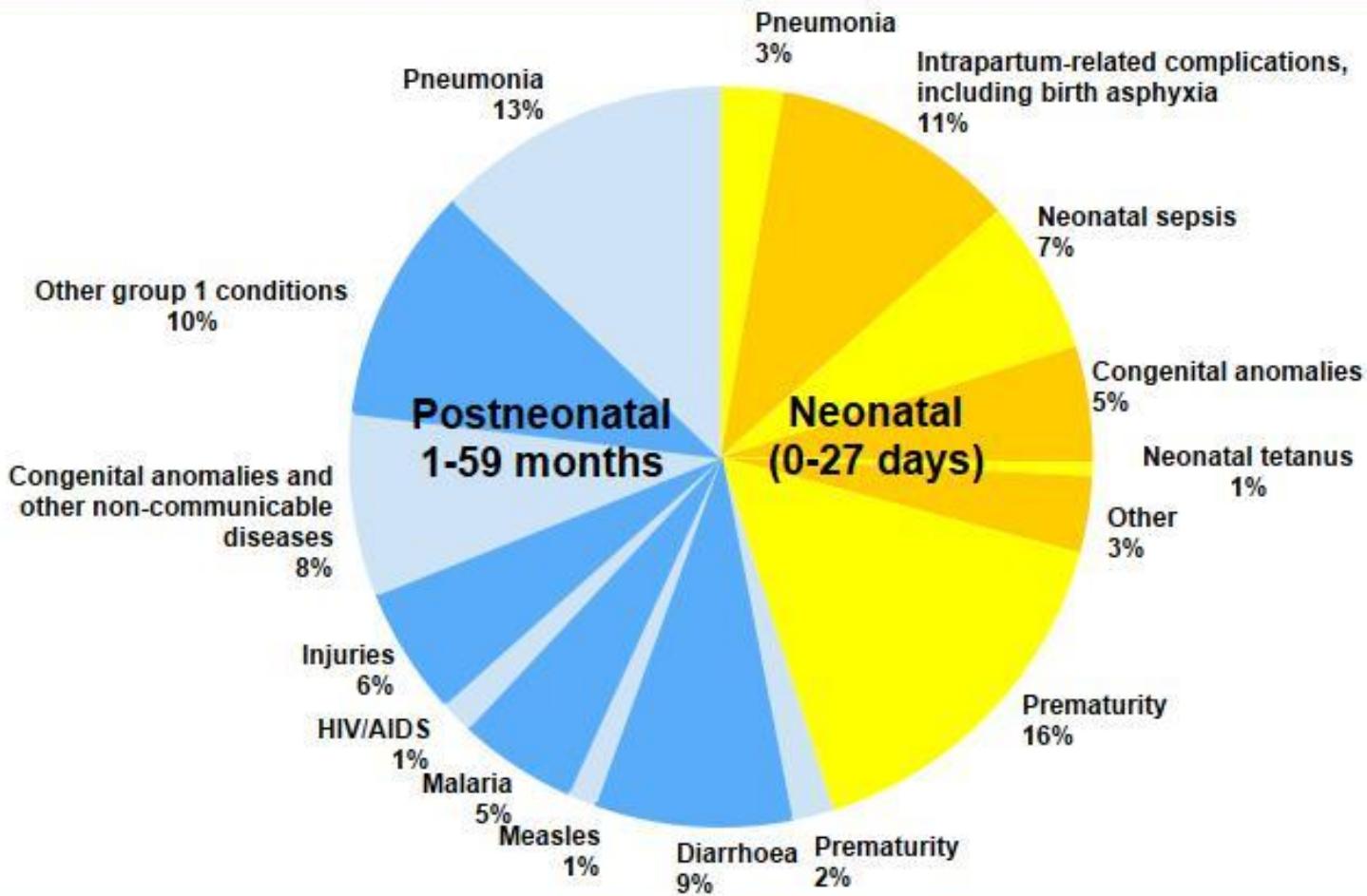
leiomyosarcoma



cell atypia
mitosis

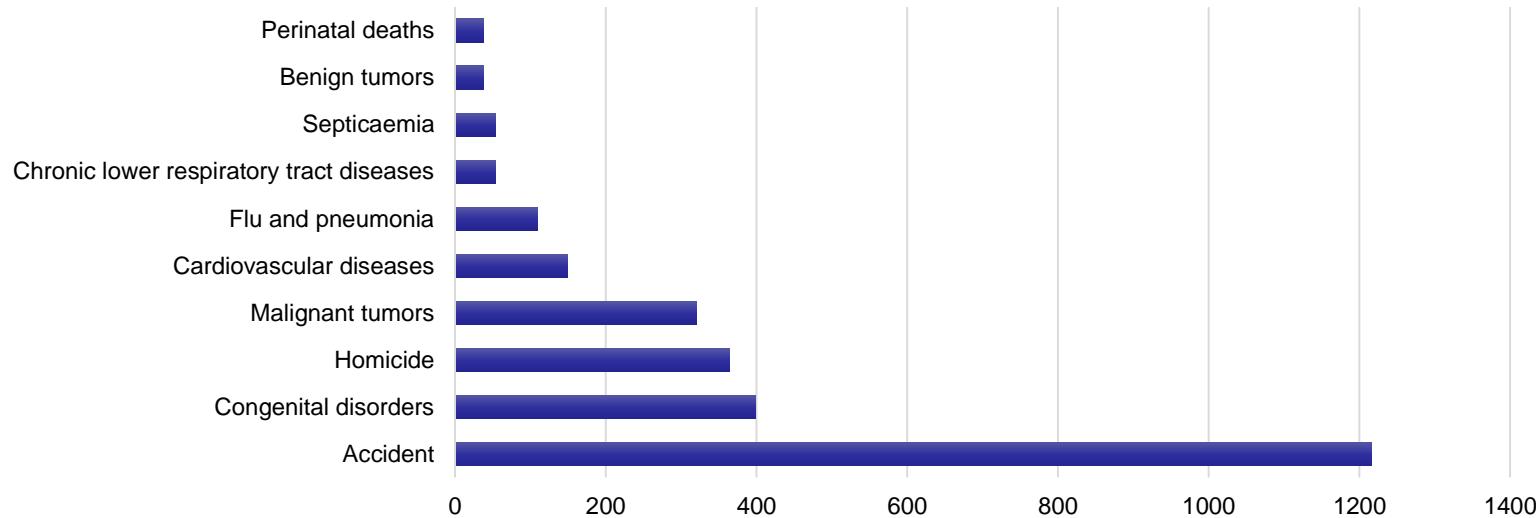
Childhood tumors

Causes of deaths among children under 5 years, 2015

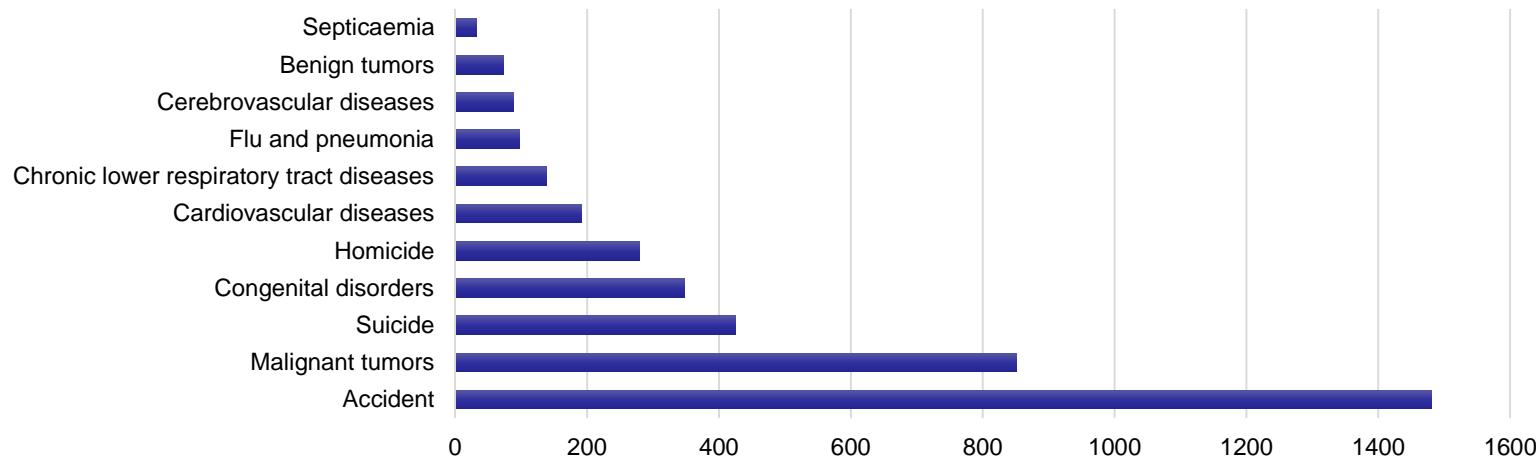


Source: WHO-MCEE methods and data sources for child causes of death 2000-2015
(Global Health Estimates Technical Paper WHO/HIS/IER/GHE/2016.1)

Leading causes of death in 1-4 year old children (USA, 2014)



Leading causes of death in 5-14 year old children (USA, 2014)



Data Source: National Vital Statistics System, National Center for Health Statistics, CDC.
Produced by: National Center for Injury Prevention and Control, CDC using WISQARS™

Gyermekkori malignus daganatok gyakorisági eloszlása Magyarországon (2007)

1. Leukemia (ALL 22 %, AML 4 %, CML 1 %)
2. CNS tumors (25 %)
3. Lymphoma (NHL 7 %, HL 7 %)
4. Neuroblastoma (9 %)
5. Soft tissue tumors (6 %)
6. Wilms tumor (5 %)
7. Osteosarcoma (4 %)
8. Ewing sarcoma (4 %)
9. Retinoblastoma (2 %)
10. Germ cell tumors (2 %)
11. Pleuropulmonary blastoma
12. Hepatoblastoma (1 %)

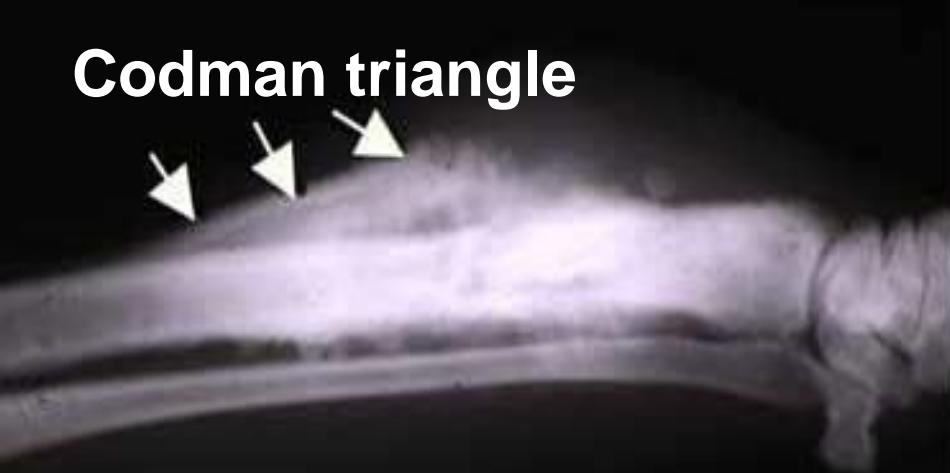
Osteosarcoma



- Peak at age **10-14 years** and in the elderly
- Metaphysis of long bones – most common around knees
- symptoms: pain, swelling, pathological fracture
- diagnosis: x-ray, biopsy
- Increased risk: prior radio- or chemotherapy



Codman triangle



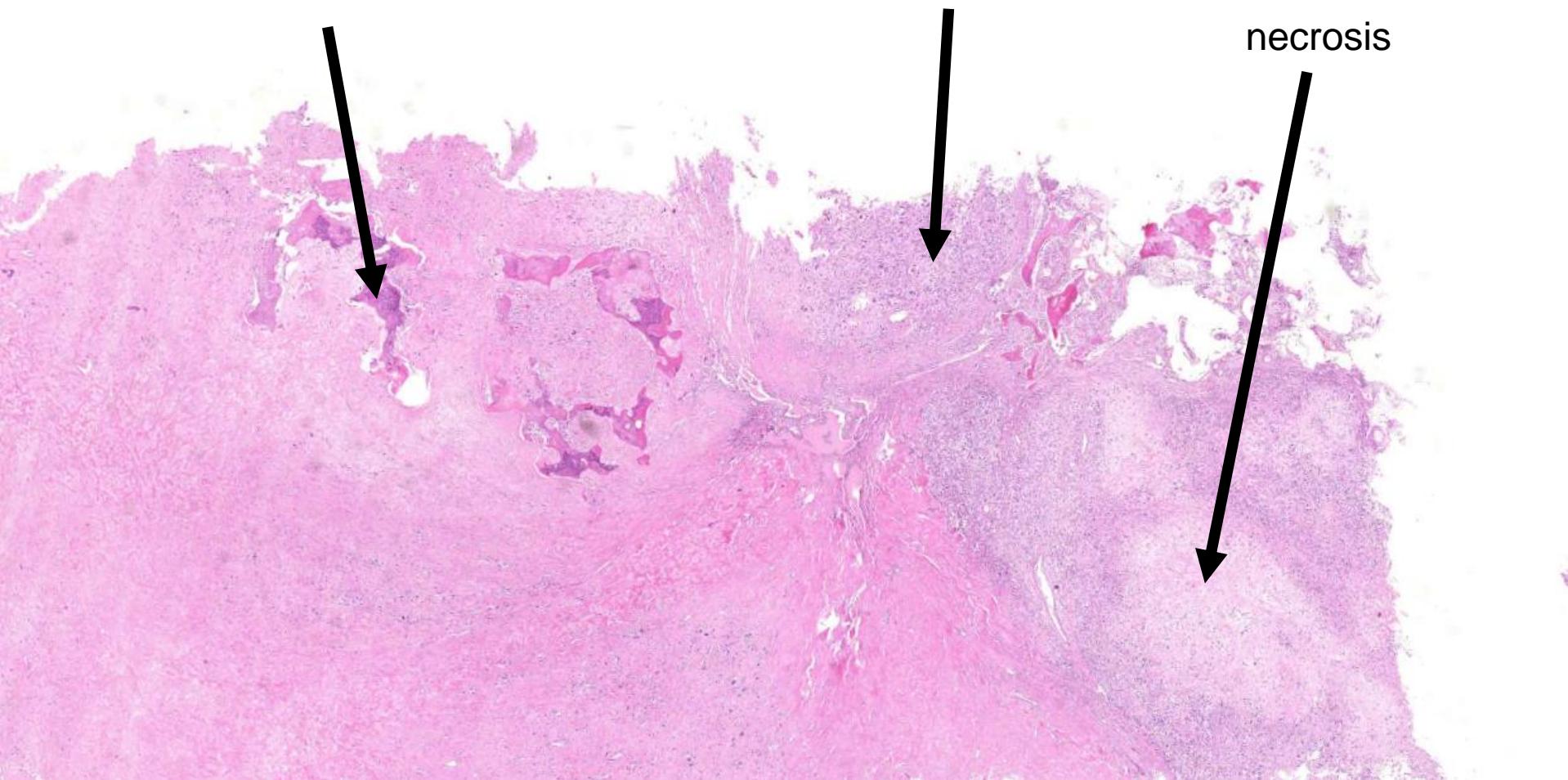
Histology

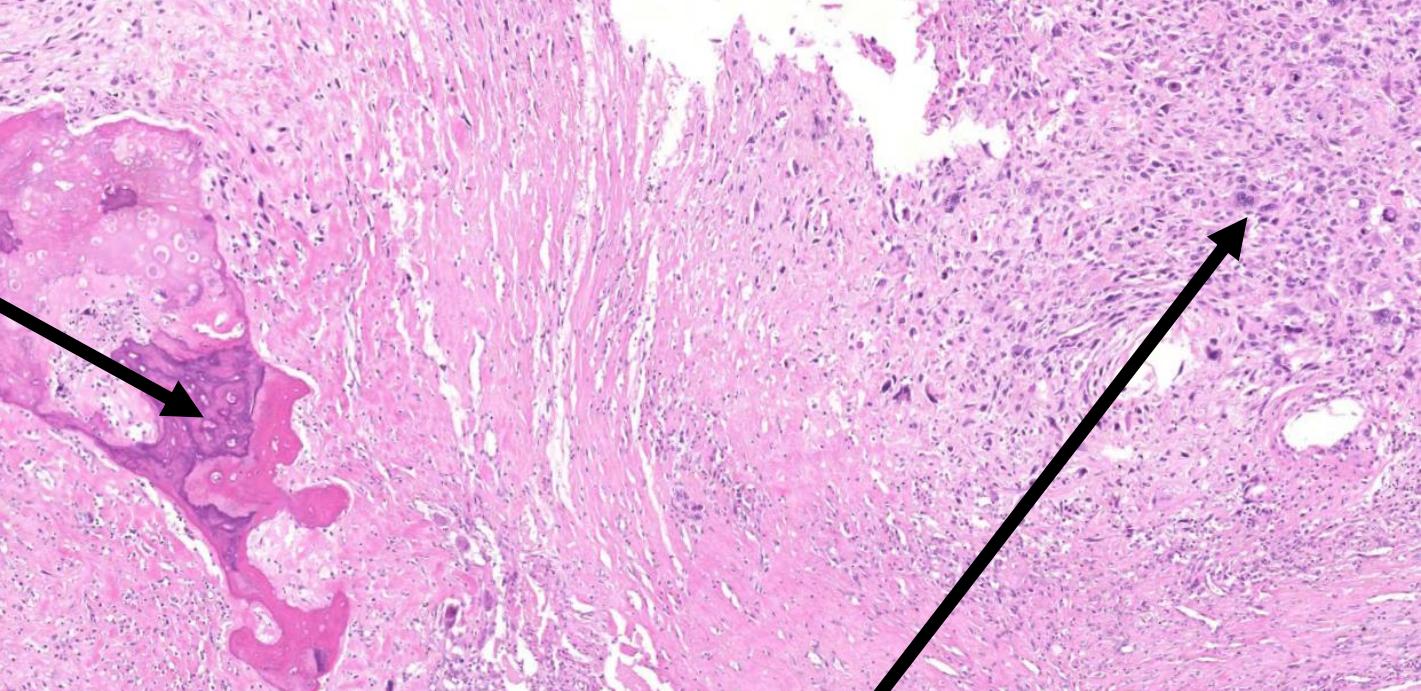
- **osteoid** (bone formation) is the most characteristic feature (amorphous, eosinophilic material).
- anaplastic tumor cells (**osteoclast-type giant cells**)
- Atypical mitotic figures
- Tumor cells found in the osteoid matrix as well

osteoid formation

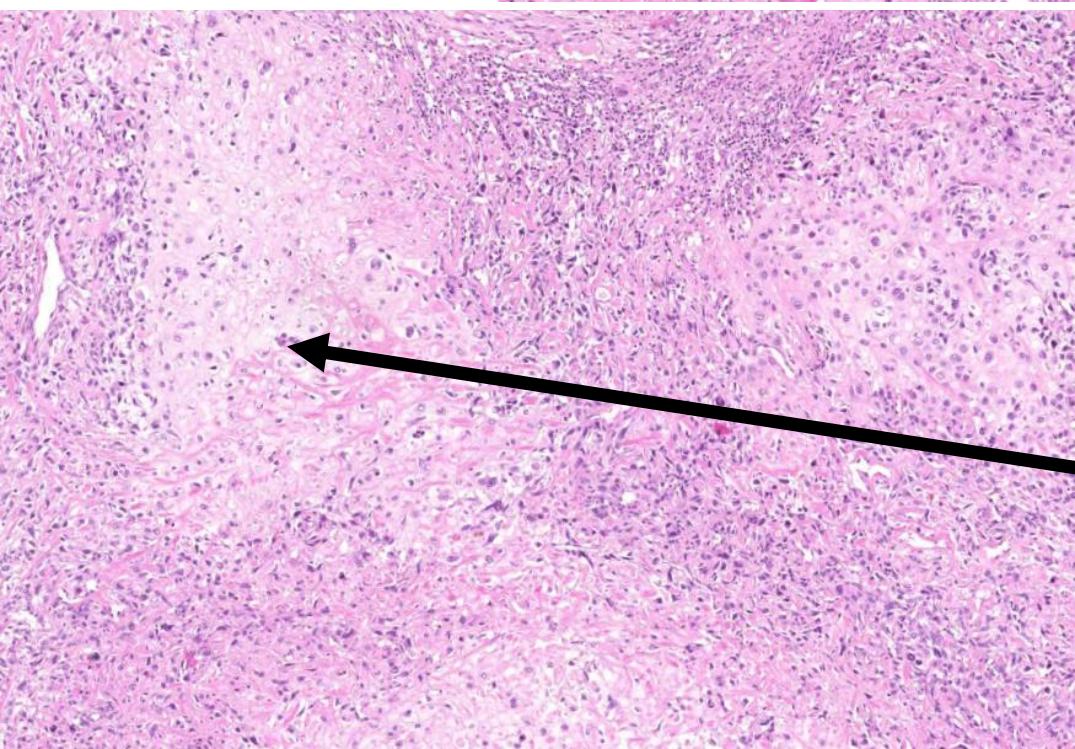
tumorcells

necrosis





osteoid formation



tumorcells

necrosis

NEUROBLASTOMA

Neuroblastoma

- Derives from the neural crest
- Adrenal medulla, sympathetic ganglia, Mellékvese velő, symp. Ggl, posterior mediastinum)
- Most common solid tumor in children
- May be sporadic or inherited
- May be in situ (40x more common) or solid (1kg, encapsulated) invasive

Symptoms

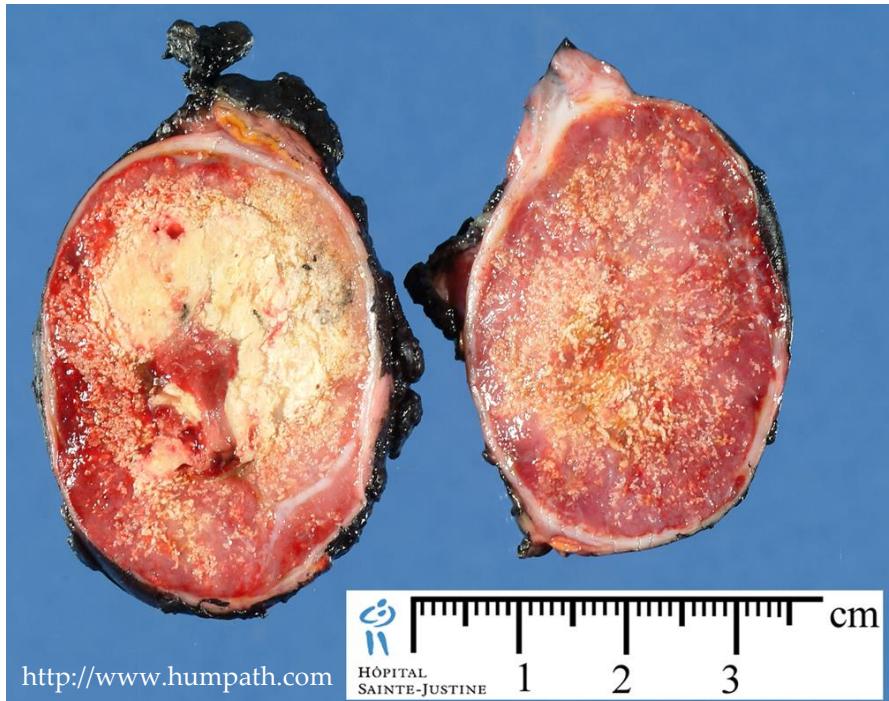
- No signs
- General sy.
- specific: watery diarrhea, recurrent fever, high blood pressure
- Symptoms depending on the site affected
- Blueberry muffin baby

Diagnosis

- US, CT etc.
- Blood test (NSE, ferritin, LDH)
- Urine test (VMA, HVA)
- Biopsy (N-MYC amplification test)

Prognostic factors

- Age: infants < 1 év = excellent prognosis
- Tumor ploidy: **hyperdiploid or near triploid** tumors which develop in infants have good prognosis
- **Deletion on the distal short arm of chr. 1** – worse prognosis
- **N-myc oncogene amplification** – worse prognosis
- Differentiation and regression (**Trk A receptor**): increased expression of Trk A gene has good prognosis, if not associated with N-myc amplification.



<http://www.humpath.com>



1 2 3 cm

Neuroblastoma and Related

Tumors

Andre Pinto, MD

Vania Nosé, MD, PhD



<https://basicmedicalkey.com/>



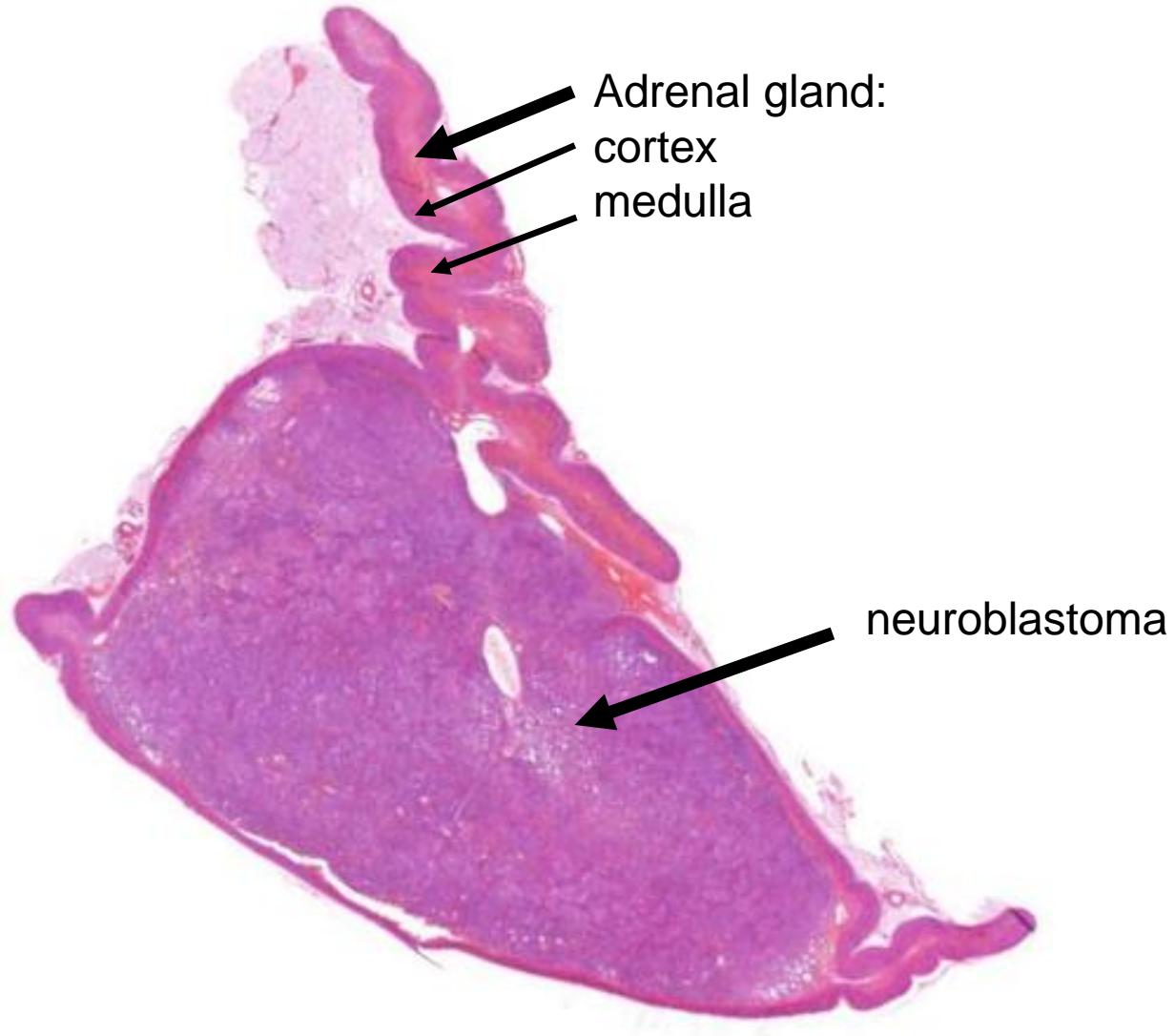
Raccoon Eyes and Neuroblastoma

Robert Timmerman, M.D.

N Engl J Med 2003; 349:e4 July 24, 2003 DOI: 10.1056/ENEJMcm020675

Histology

- Small round blue cell tumor
- Homer-Wright-pseudorosettes
- neuropil
- Markers: neuronspec.enolase (NSE), chromogranin-A positivity



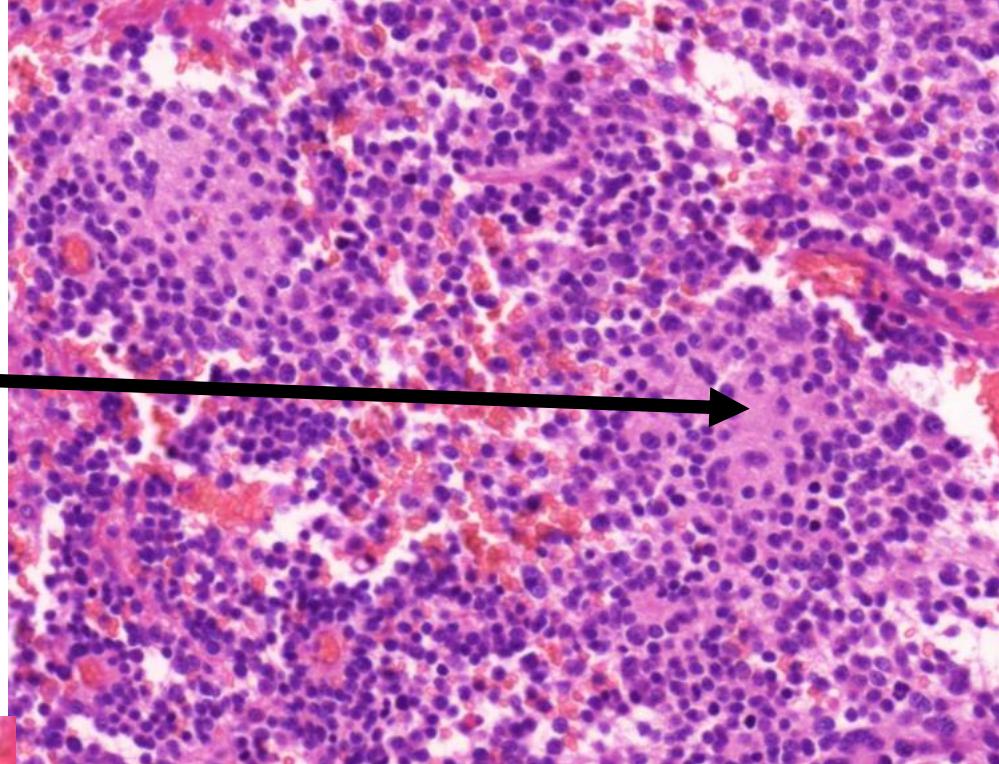
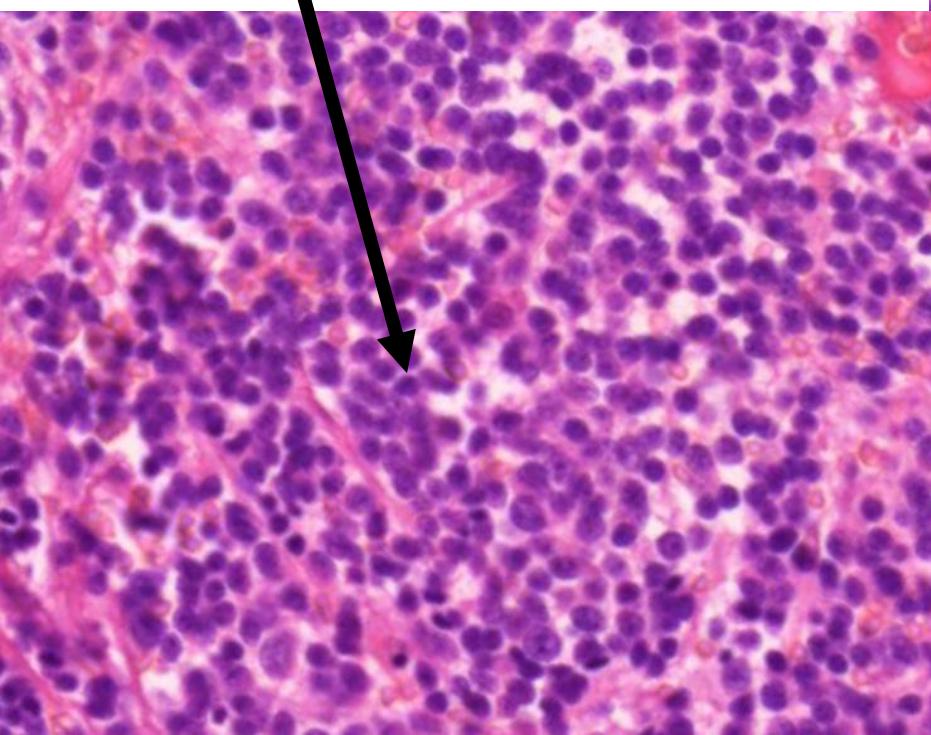
Adrenal gland:
cortex
medulla

neuroblastoma

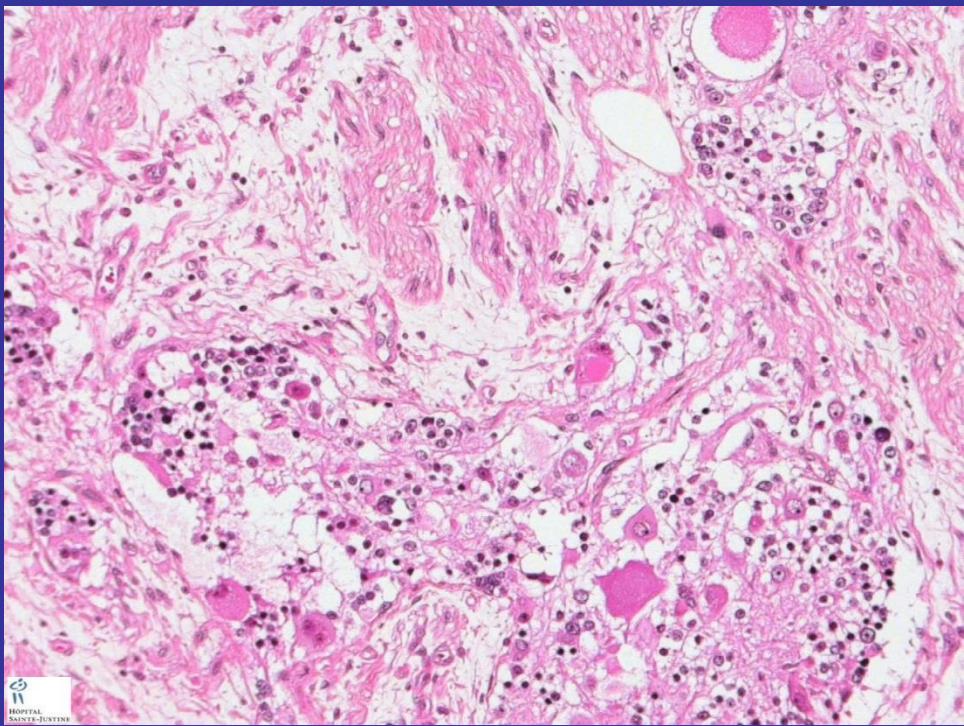
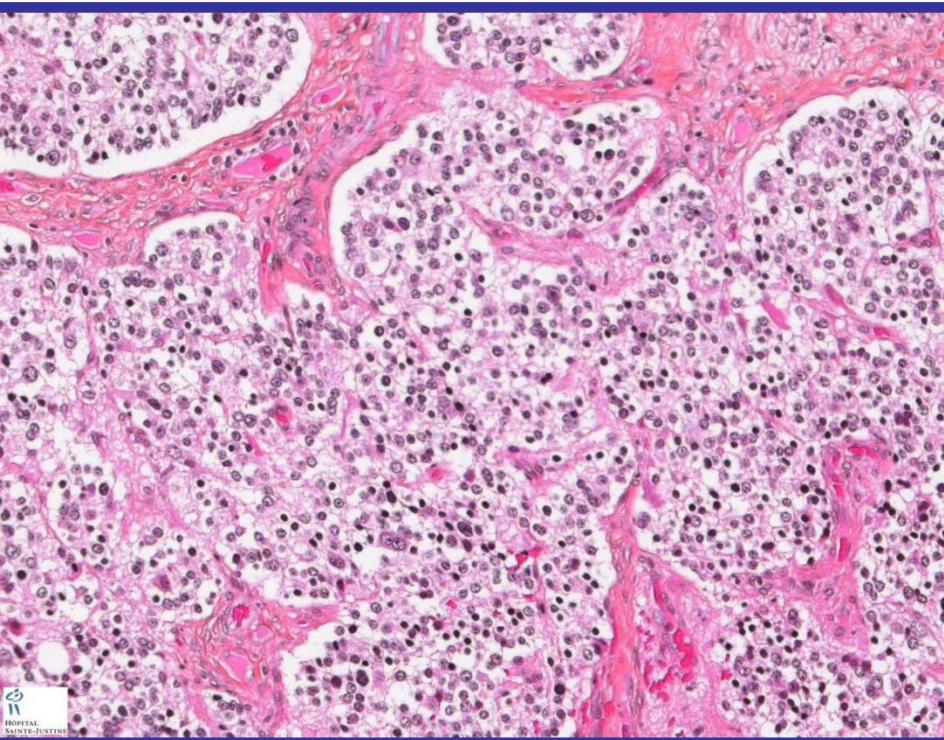
neuropil
Homer-Wright
pseudorosettes



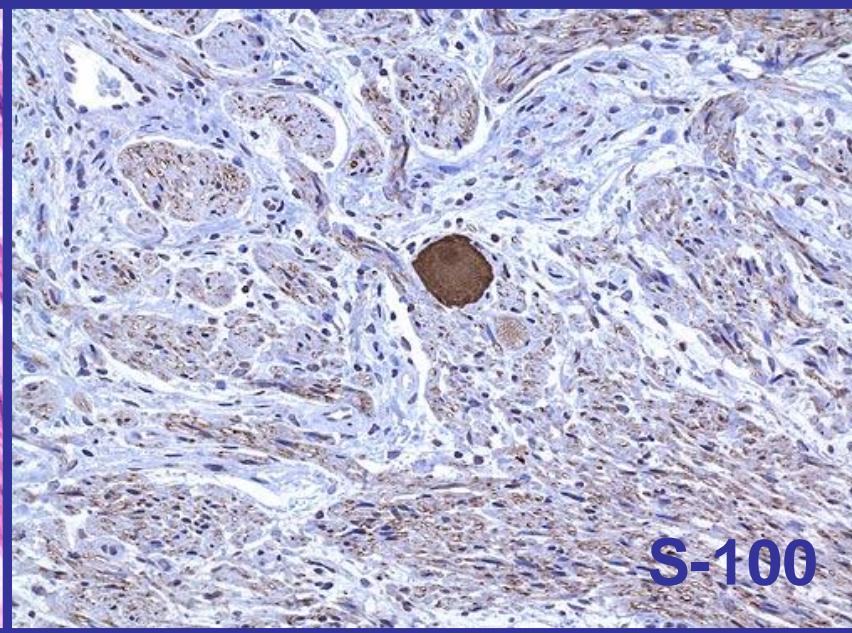
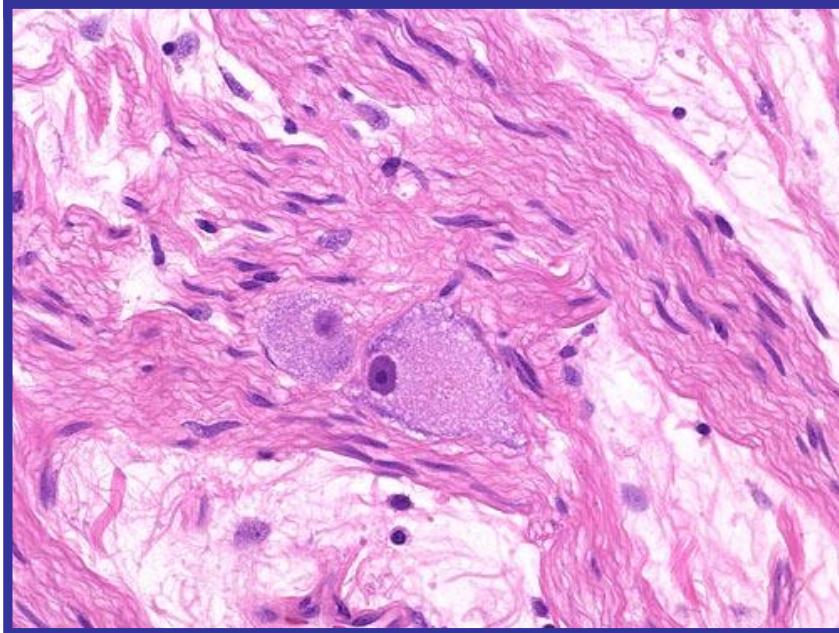
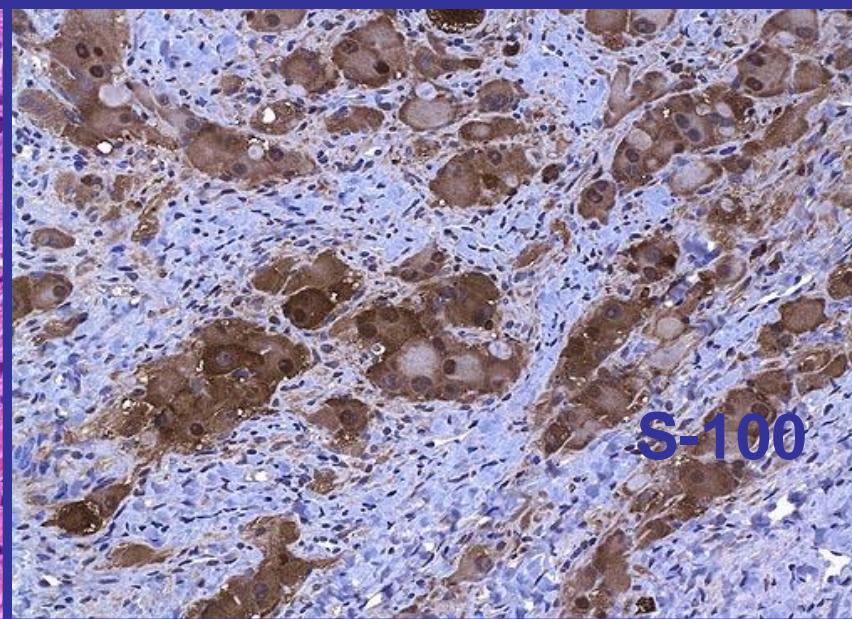
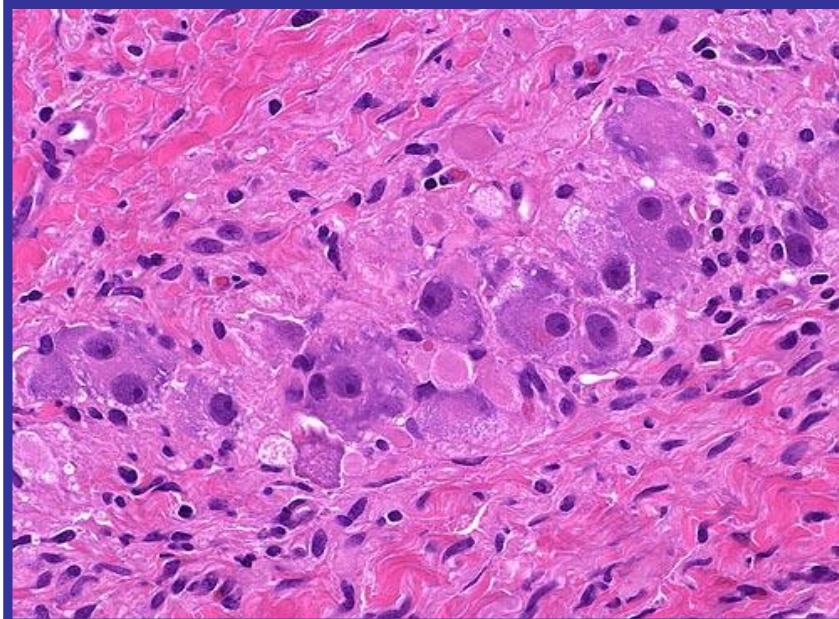
Small round blue tumorcells



Ganglioneuroblastoma



Ganglioneuroma



Wilms tumor - nephroblastoma

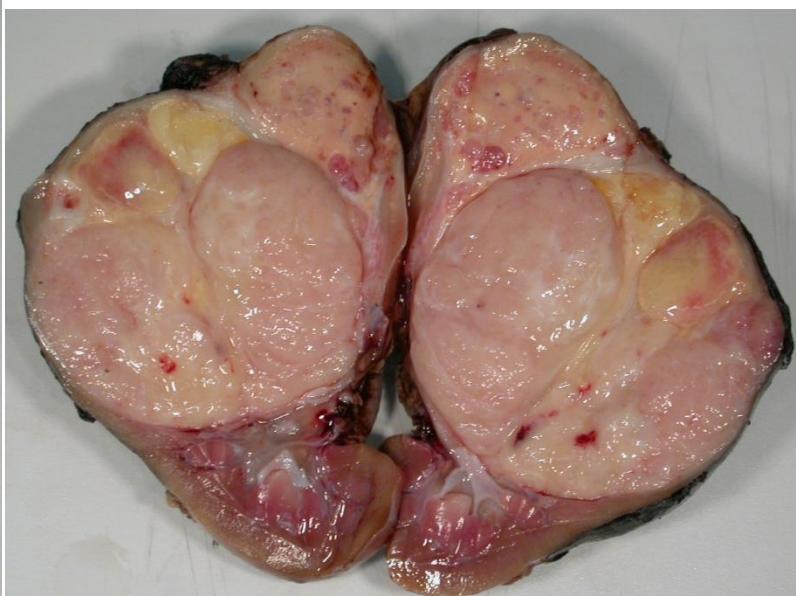
- Palpable big abdominal mass
- Pain
- Ileus
- Hematuria
- Hypertension
- 11p 13 del.(WT-1 gene), 11p 15.5 (WT2 gene)

Pathology

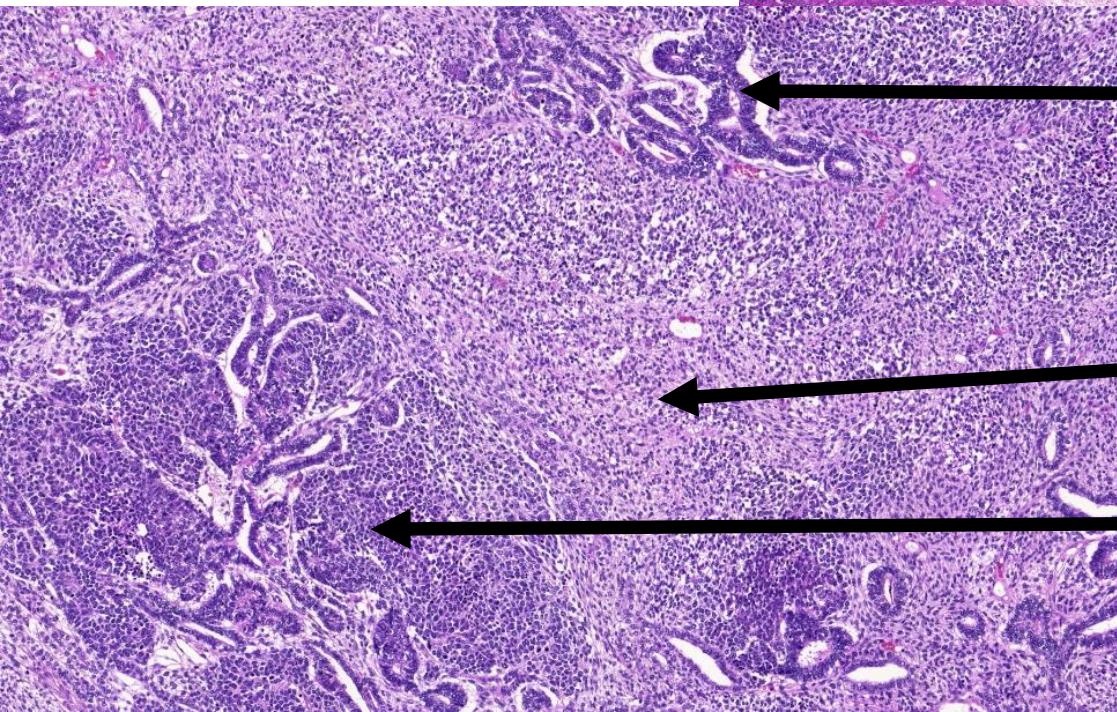
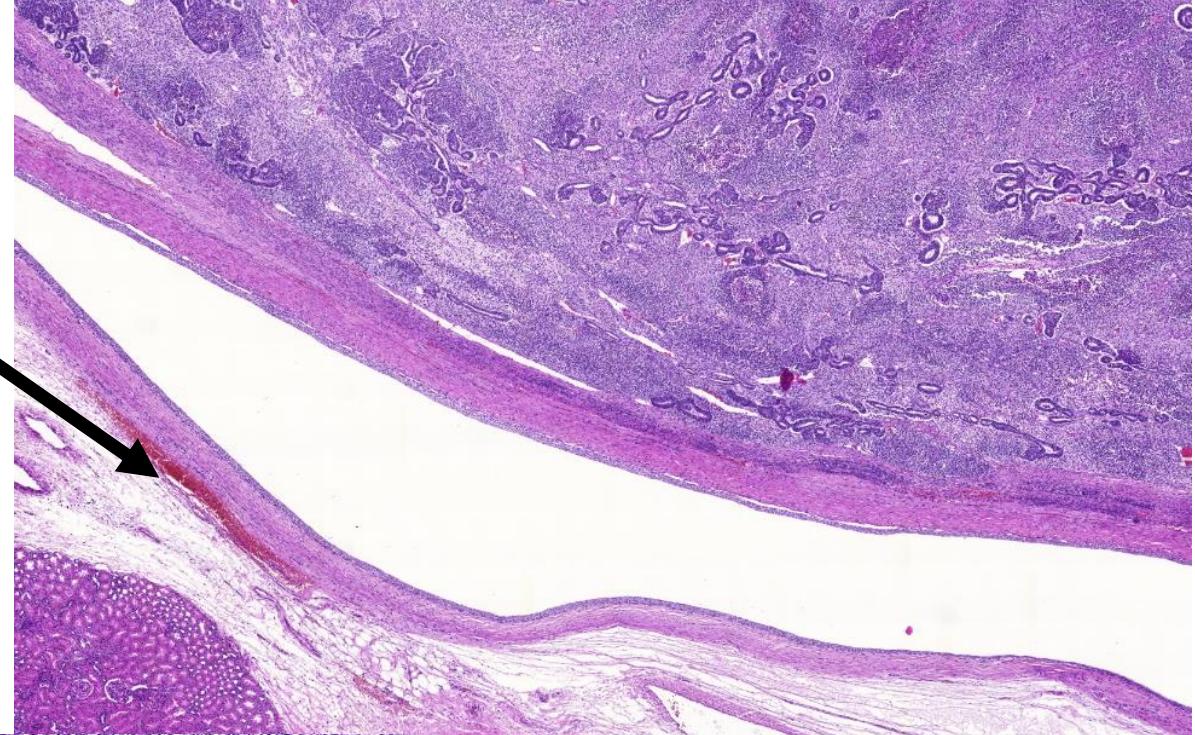
- **Unilateral** or bilateral (<5%)
- Encapsulated and vascularized tumors
- Metastasis formation most commonly in the lungs
- Triphasic tumor:
 - **blastema (metanephric)**
 - **mesenchymal (stroma): skeletal muscle, cartilage, bone, connective tissue**
 - **epithelial (abortive tubules, glomeruli)**

Rhabdomyoid component may show malignant features:
Rhabdomyosarcomatous Wilms.

Wilms tumor



Kidney pyelon



abortive tubules and
glomeruli

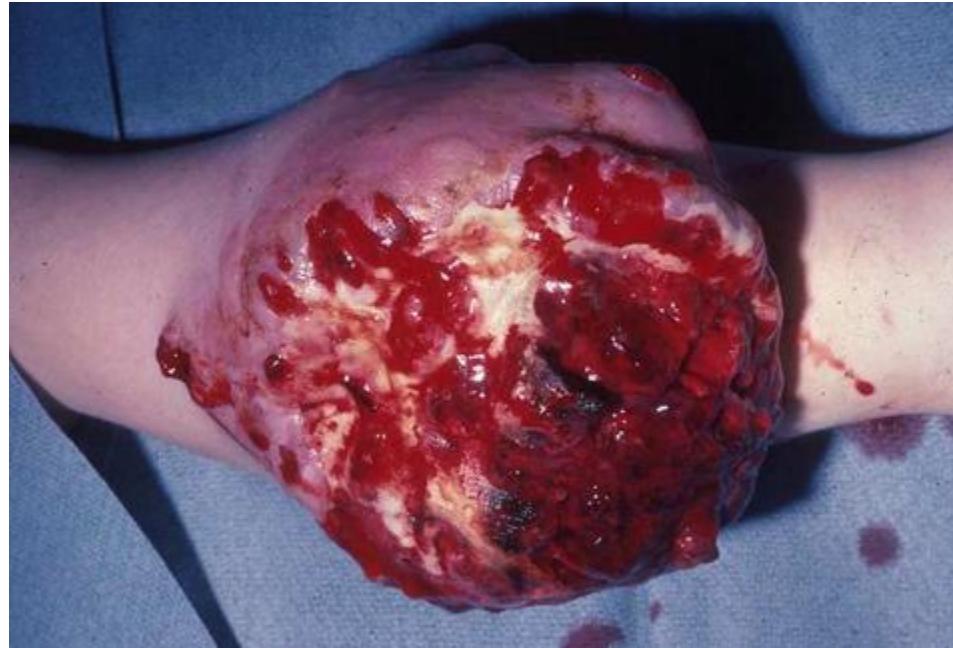
stroma

blastema

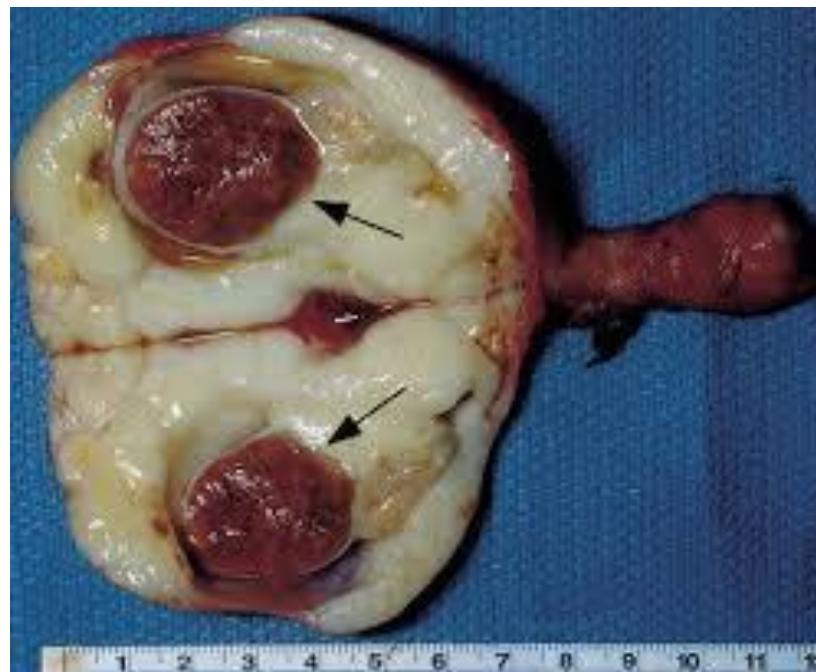
Rhabdomyosarcoma

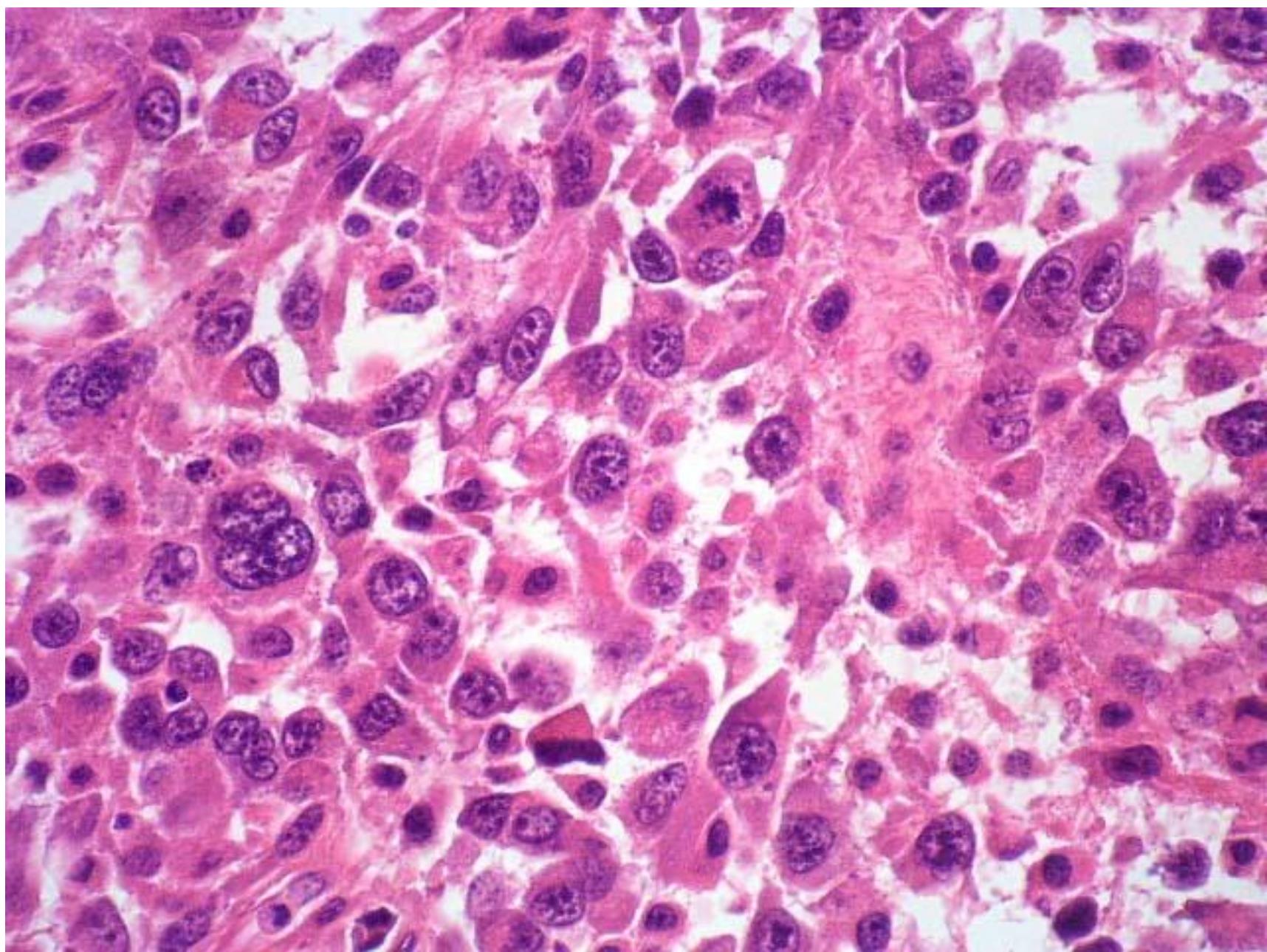
- Common sarcoma type of childhood
 - Head-neck region, urogenital area
- Embryonal type
 - Botryoid
- Alveolar type
 - Young adults, extremities
- Pleiomorphic type
 - Adults, lower limb

vagina



Botryoid type





Teratoma

- Germ cell neoplasm
- Ovary, testis, sacral region
- Often cystic
- Tissues seen from all three germ layers:
 - Ecto-, meso- and endodermal
- Benign (mature) and malignant (immature) teratoma



