

Maria Chacaltana 1570 20 721973 ;,Miss

13 YEAR OLD FEMALE, WITH HISTORY OF METASTATIC NEUROBLASTOMA. BMT IN SEPT 2019: BILATERAL METASTATIC NEUROBLASTOMA WITH VARIABLE MATURATION (11437/19). BILATERAL BMT IN OCT 2019. PRIOR TO START OF CHEMO AS PER BEACON: METASTATIC NEUROBLASTOMA With MATURATION BILATERALLY (10% OR LESS ON EACH SIDE. 12972/19). THIS SPECIMEN: BILATERAL BONE MARROW TREPHINES FOR REASSESSMENT PRE-BEACON TRIAL, TREATMENT ON 10.02.20. ASPIRATE, AT 04.02.20: Left side is aparticulate and haemodilute. There is no evidence of infiltration by non-haematological cells, but the sample is sub-optimal. Right side is hypercellular, with trilineage haematopoiesis. There is no evidence of infiltration on this side.

MACROSCOPY

A: Right bone marrow trephine: Bony core with blood clot, measuring 18mm 1) AE B: Left bone marrow trephine: Bony core measuring 18mm 2) AE

HISTOLOGY

A1) Right bone marrow trephine:

A core of normocellular to possibly slightly hypercellular marrow with trilineage haematopoiesis. No metastatic neuroblastoma is seen, either morphologically or with CD56, NSE or neurofilament.

B2) Left bone marrow trephine:

A core of marrow with almost complete obliteration by moderately to focally relatively sparsely cellular tumour, composed of dispersed, variably maturing, but generally largely mature ganglion-like cells, with scattered mild atypia, with surrounding prominent neurofibrillary stroma. There is some haemorrhage. No definite haematopoiesis is noted. The tumour is diffusely and strongly positive for CD56, NSE and neurofilament.

The features are consistent with variably maturing metastatic neuroblastoma, with total tumour occupying essentially the entire marrow space (approximately 95%), with maturing ganglion cell component accounting for approximately 15-20% of the entire tumour area, and neurofibrillary stroma comprising the rest. No primitive neuroblastic component is seen.

Dr Magnus Hallin/Dr Khin Thway

T: soft tissue T BONE MARROW M neuroblastoma

