

Deborah Schofield 1983 20 740093 ;,Mrs

55 YEAR OLD FEMALE WITH HISTORY OF RECURRENT MYXOINFLAMMATORY FIBROBLASTIC SARCOMA, FIRST EXCISED IN 2012, WITH SUBSEQUENT WIDE EXCISION (PROF. CYRIL FISHER SECOND OPINION, E.G. 3658/15) WITH WIDELY CLEAR MARGINS. SHE THEN RECURRED A REASONABLE DISTANCE AWAY FROM THE PRIMARY TUMOUR, AND HAD A FURTHER OPERATION WITH RADIOTHERAPY, AGAIN WITH CLEAR MARGINS. In Jan 2020, she DEVELOPED FURTHER MULTIFOCAL RECURRENCES,;CORE BIOPSY FROM RIGHT POPLITEAL FOSSA MASS in jan 2020 showed high-grade malignant neoplasm, consistent with recurrent sarcoma, which would fit with recurrent 'high-grade' MIFS. This specimen: core biopsy from specimen labelled 'right lower leg ILP injectable site, for titan trial 4679, Subject number 7010, collected 10.45'

MACROSCOPY

Lower leg ILP: 3 cores ranging from 12-14. 1-3) AE.

HISTOLOGY

Cores of viable tumour, comprising sheets of largely ovoid and polygonal cells with moderate to marked nuclear atypia, with some focal necrosis and relatively sparse predominantly chronic inflammatory infiltrate. Atypical mitotic figures are prominent, and the tumour is seen to infiltrate skeletal muscle. There is surrounding fibroadipose tissue with sparse chronic inflammatory infiltrate. **Interspersed large polygonal cells with a abundant eosinophilic cytoplasm are present (slide 3); there is a possible hint of cross striations and these might represent represent rhabdomyoblasts**

The features are consistent with high-grade sarcoma, as noted in the previous biopsy (646/20).

Dr Magnus Hallin/Dr Khin Thway

T: soft tissue t leg m sarcoma