Xiu Dong 2456 20 745029 :, Mrs

35 YEAR OLD FEMALE. LARGE MASS, LEFT LEVEL 2, PARAPHARYNGEAL. THIS SPECIMEN: CORE BIOPSY FROM PARAPHARYNGEAL MASS (ONE BLOCK RECEIVED), PREVIOUSLY SEEN BY DR SYRED: DIFFICULT LOW-GRADE SPINDLE CELL LESION WITH OVERALL APPEARANCES FAVOURING FIBROMATOSIS OVER DIFFERENTIAL OF LOW-GRADE SARCOMA WITH MYOFIBROBLASTIC DIFFERENTIATION. NO PREVIOUS RMH HISTOLOGY.

MACROSCOPY

HISTOLOGY

The features are as previously described by Dr Syred, and show cores comprising small amounts of skeletal muscle and fibroadipose tissue, with fibrous tissue containing moderately cellular tumour, composed of loose fascicles of spindle and stellate cells with elongated vesicular nuclei, frequent small nucleoli in variably collagenous stroma with interspersed small thick-walled vessels and larger thin-walled vessels. The cells are plump, but no conclusive atypia is identified. No mitotic figures are seen in eight hpf, and no necrosis is present.

The referring report describes the tumour to be focally positive for SMA, with h-caldesmon positivity. Beta-catenin is reported to be 50% nuclear positive. The tumour is negative for S100 protein, MelanA, CD34, MUC4, AE1/AE3 and EMA. The Ki-67 proliferation index is reported as very low (1%).

The features are consistent with desmoid-type fibromatosis. Specific features of spindle cell sarcoma are not noted.

Dr Magnus Hallin/Dr Khin Thway

T: soft tissue t parapharynx m fibromatosis