ROYAL MARSDEN NHS FOUNDATION TRUST - HISTOPATHOLOGY REPORT 711086: (1900) - NHS Number: (2)

Lab No

0432/20

Reported

22 Jan 2020

Pathologist DR HALLIN/DR THWAY

Source

MALE

Internal Operation Sample Received 10 Jan 2020

Ward Branch

FULHAM ROAD

Sex **Clinical Diagnosis** Age Operation

10 Jan 2020

Consultant MIAH, DR A B

SITE

SOFT TISSUE AND OTHER CONNECTIVE TISSUE A (T1X005)

DIAGNOSIS

FIBROUS HISTIOCYTOMA MALIGNANT (M88303)

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B CHEST WALL (TY2150)

(M88303)

60 YEAR OLD MALE WITH PREVIOUS EXCISION OF UNDIFFERENTIATED PLEOMORPHIC SARCOMA POST -RADIOTHERAPY (RIGHT POSTERIOR CHEST WALL INVOLVING THE INFRASPINATUS MUSCLE) IN OCT 2018. PATIENT NOTICED A NON-TENDER LUMP OVER THE LOWER LEFT CHEST WALL IN NOV 2019. CLINICAL EXAMINATION REVEALED A MOBILE LUMP MEASURING 2 CM OVER THE LOWER LEFT. CHEST WALL, THIS SPECIMEN: MASS, LEFT CHEST WALL, CLINICALLY RELAPSE.

MACROSCOPY

Left chest: 3 cores ranging from 12-13mm. 1-3) AE.

HISTOLOGY

Cores of fibroadipose tissue with blood, with fibrous tissue containing cellular tumour composed of moderately to markedly atypical ovoid to spindle cells with moderate amounts of darkly eosinophilic cytoplasm. Bizarre cells and tumour giant cells are prominent. There are intermingled atypical mitotic figures, with an index of up to 16/10hpf. No definite necrosis is seen. In other areas, the stroma is collagenous with blander spindle cells, and a moderate chronic inflammatory infiltrate including some lymphoid aggregates.

There is focal strong desmin expression, and very occasional tumour nuclei show largely weak to moderate myogenin expression. A very occasional scant cell shows AE1/AE3 expression. SMA shows only weak focal scanty granular cytoplasmic staining, and is interpreted as negative. The tumour is negative for CD34, STAT6, S100 protein and SOX10.

The features are consistent with recurrent pleomorphic sarcoma, showing focal rhabdomyosarcomatous differentiation in this biopsy, at least grade 2.

Dr Magnus Hallin/Dr Khin Thway