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Pathology
MBBS

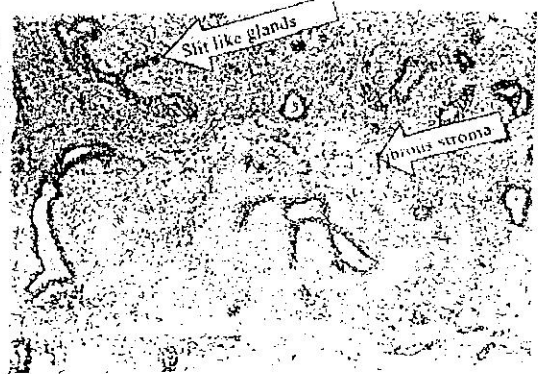
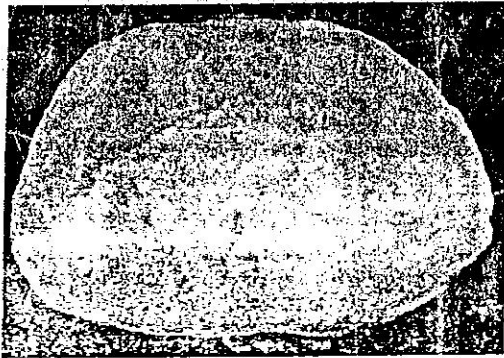
3rd Year

(16)

SGD

Code : 20

SGD-1



Well demarcated, encapsulated, nodular tumour
Micro: Compressed slit like glands in cellular stroma.

An 18yrs old female presents with solitary, discrete, movable mass in right breast which enlarges late in the menstrual cycle. On examination the lump is freely mobile and sharply circumscribed. FNAC is performed which shows slowly growing, well differentiated cells with rare mitosis and normal configuration.

1. What is the Diagnosis?

2. Is this mass benign or malignant?

3. What are the differences b/w benign and malignant cells?

4. What are the four characteristics of a neoplasm?

→ uncontrolled excessive new growths

→ persist even after cessation of stimulus which evokes the change.

→ 2 components-

- 1) Parenchyma (neoplastic cell population)
- 2) stroma (connective tissue & vessels)

Fibroadenoma of R breast.
benign tumor

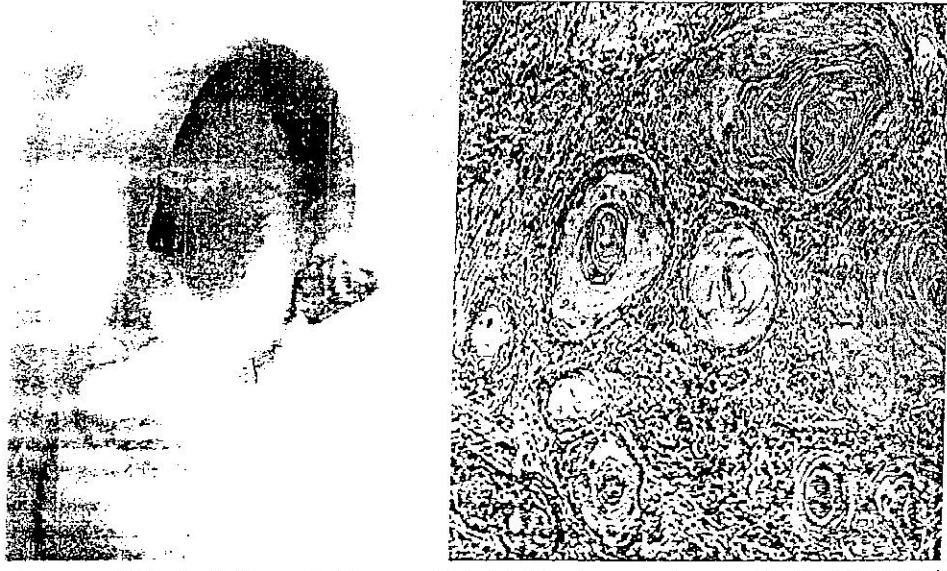
SGD-2



A 60 year old female presents with a firm lump in the right breast. On mammographic examination, areas of calcification are seen. Biopsy of the lump shows pleomorphic cells with hyperchromatic nuclei without invasion of the basement membrane.

1. What is the most likely diagnosis? *ductal carcinoma of breast*
2. Is this swelling benign or malignant? *(Malignant)*
3. What are the differences b/w Benign and malignant tumor?
4. What is the difference b/w hyperplastic and dysplastic cell?
5. What are the characteristics of dysplastic cell?

SGD-3



A 72-year-old man presents with a slowly growing, ulcerated lesion located on the pinna of his right ear. The lesion is excised, and histological sections reveal infiltrating groups of cells, with increased mitosis, hyperchromatic, poorly differentiated cells in the dermis. These cells have eosinophilic cytoplasm, intercellular bridges, and intracellular keratin formation.

Squamous cell carcinoma.

1. What is the most likely diagnosis?
2. Is this carcinoma invasive or not? *Locally Invasive.*
3. What is the difference b/w dysplasia and anaplasia?

Dysplasia

- ↳ Disorganized *ie* disordered proliferation and growth of cell
- ↳ Primarily seen in epithelium.

Anaplasia

- ↳ Proliferation of cell with *of* differentiation
- ↳ seen everywhere.

Cell-free DNA Markers.

- TP53, APC, RAS mutants in stool & serum Colon cancer.
- TP53 RAS mutants in stool & serum Pancreatic cancer.
- TP53, RAS mutants in sputum & serum Lungs cancer.
- TP53, in urine Bladder cancer.

SGD-1

A 50 yrs old male with h/o frequent dental treatments from a road side quack developed hepatitis C infection 20 yrs ago. He is brought to a hepatologist with weakness, fever and pain in the right hypochondrium.

Tumor markers

On USG the liver reveals a mass. The hepatologist orders a Single tumor marker to come to a diagnosis.

These are the substances such as proteins, biochemicals, or enzymes produced by tumor cells or by body in response to tumor

- Name the tumor marker he is most likely asked for? (serum α -fetoprotein)
- Enlist three tumor markers with their associated tumors.

Tumor Markers

Hormones

HCG

Calcitonin.

Catecholamines & Metabolites

oncofetal antigens

α -fetoprotein

Carcinoembryonic Antigen

Isoenzymes.

Prostates & Phosphatase.

Neuron-specific enolase.

Specific Proteins.

Immunoglobulins.

Prostate-specific Antigen
Prostate-specific membrane Antigen

CA125 - ovarian cancer.
CA119 - colon cancer
CA153 - breast cancer

Testicular tumor

Trophoblastic tumor. Non-seminomatous testicular tumor.

Medullary carcinoma of thyroid

Pheochromocytoma & related tumors

Liver cell cancer. Hepatitis.

Carcinoma of colon, Pancreas, lungs, stomach, heart.

Prostate cancer.

Small cell cancer of lung.
Neuroblastoma.

Multiple myeloma

Prostate cancer.

SGD-2

A 24 yrs old woman with a history of heavy and painful menstrual periods has been having difficulty conceiving despite months of trying to become pregnant. Her workup included a bimanual pelvic examination and an USG, which demonstrated a mass in the uterus that was presumed to be leiomyoma.

(Connective + skeletal tissues + Blood & lymph).
Bones, cartilage, Muscles, fat.

- a) Enlist any four benign mesenchymal tumors, other than leiomyoma. Fibroma, Lipoma, Chondroma, Osteoma.
- b) What is meant by GRADE of tumor explain with examples?
- c) What is meant by stage of tumors? Explain with examples.
- d) What are different staging systems? Explain them. AJCC (TNM).

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