

Caso # 1

Dra. Ruth Mabel Vergara V.
Panamá



19 DE MAYO DE 2011, Zaragoza, España

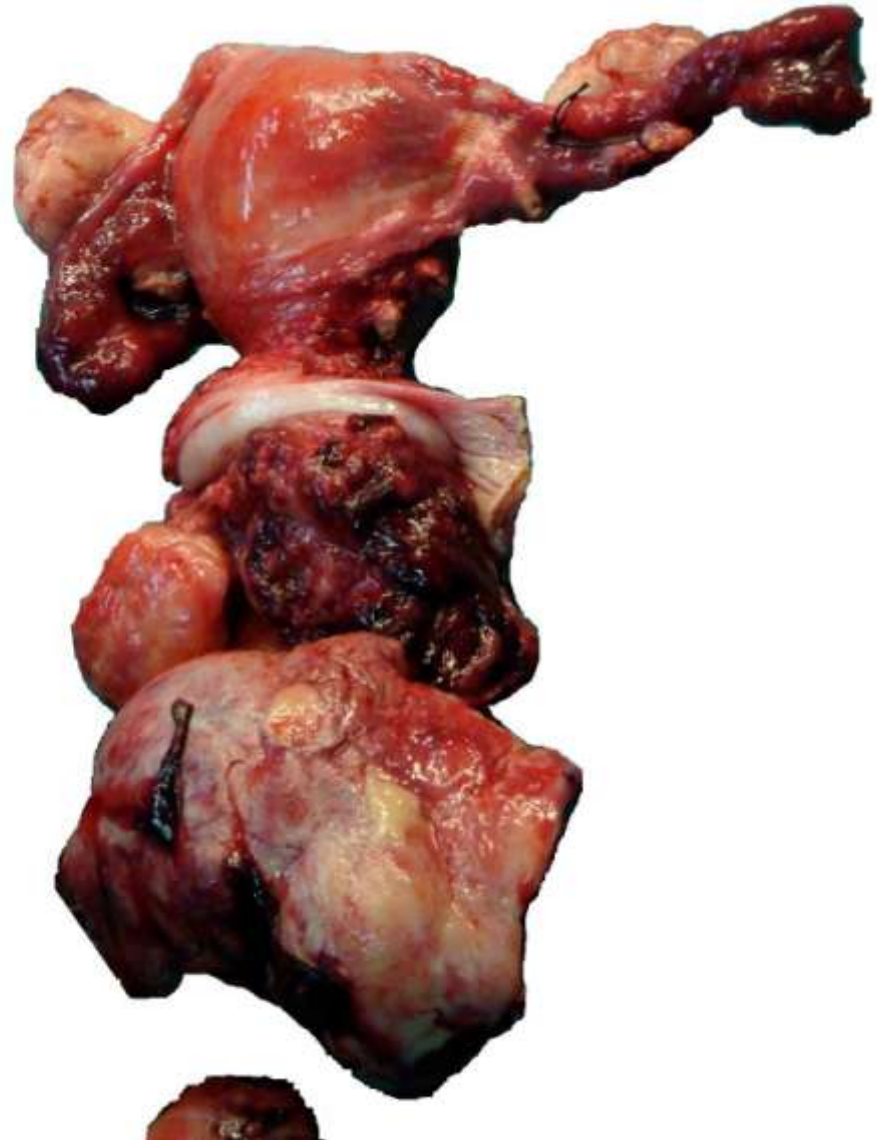
Historia Clínica

- Paciente femenina de 43 años con historia de pérdida de peso, fiebre y sangrado vaginal de dos meses de evolución, asociado a dolor en bajo vientre.
- Sin antecedentes patológicos y familiares de importancia.
- Al examen vaginal: masa que ocupa toda la pelvis, de 9cms, con área de necrosis y friable al tacto. Sin afectar fondo de saco y parametrios.

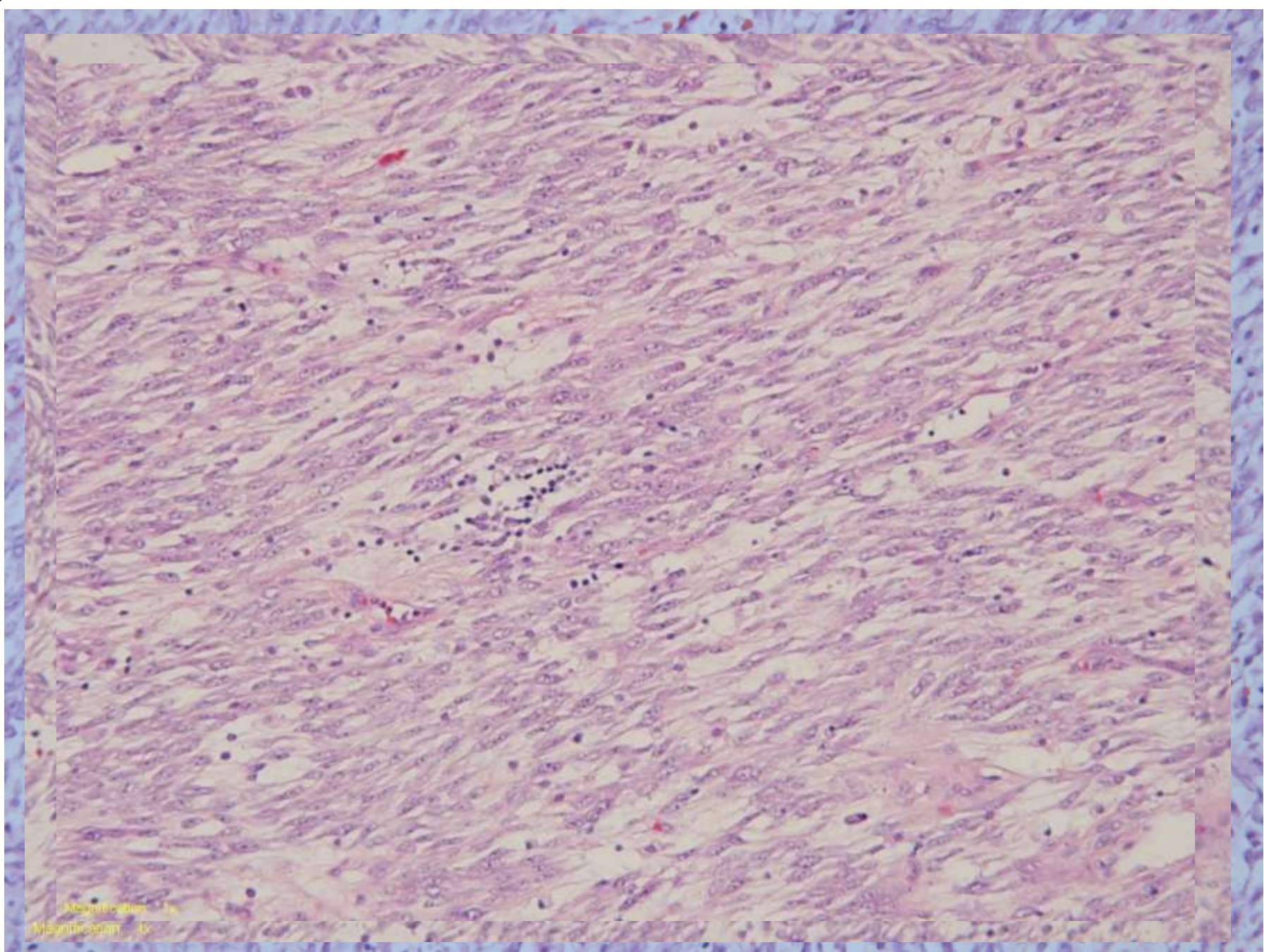
Estudio Macroscópico

Descripción:

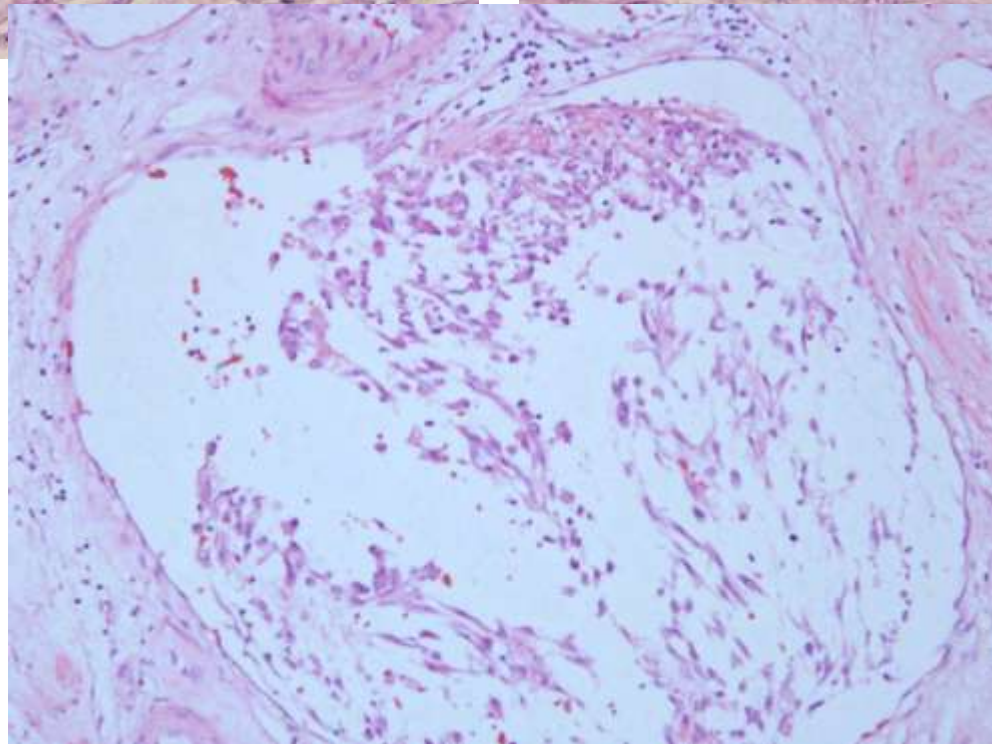
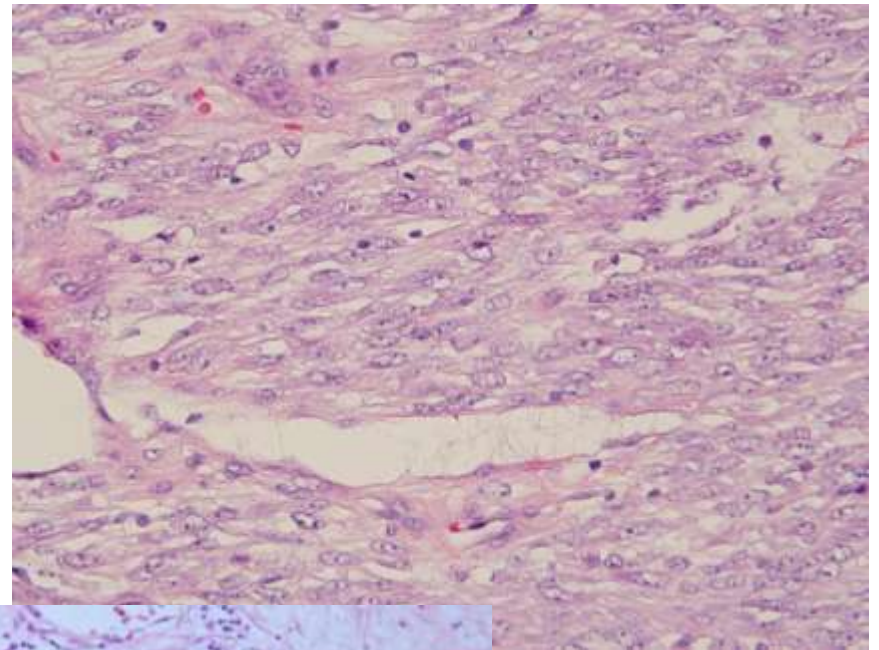
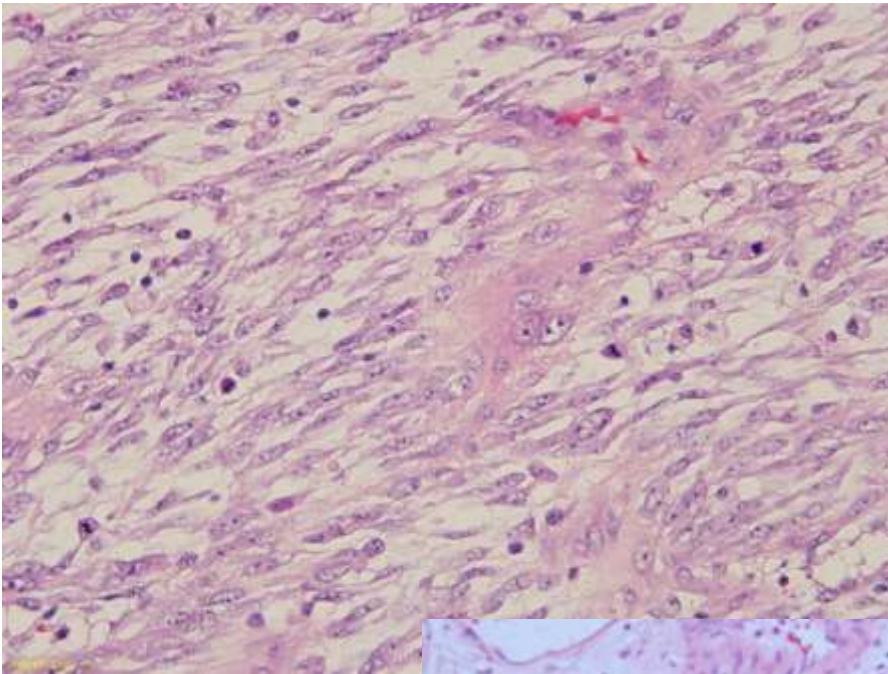
- Peso: 530g
- Medida: 9x7cm

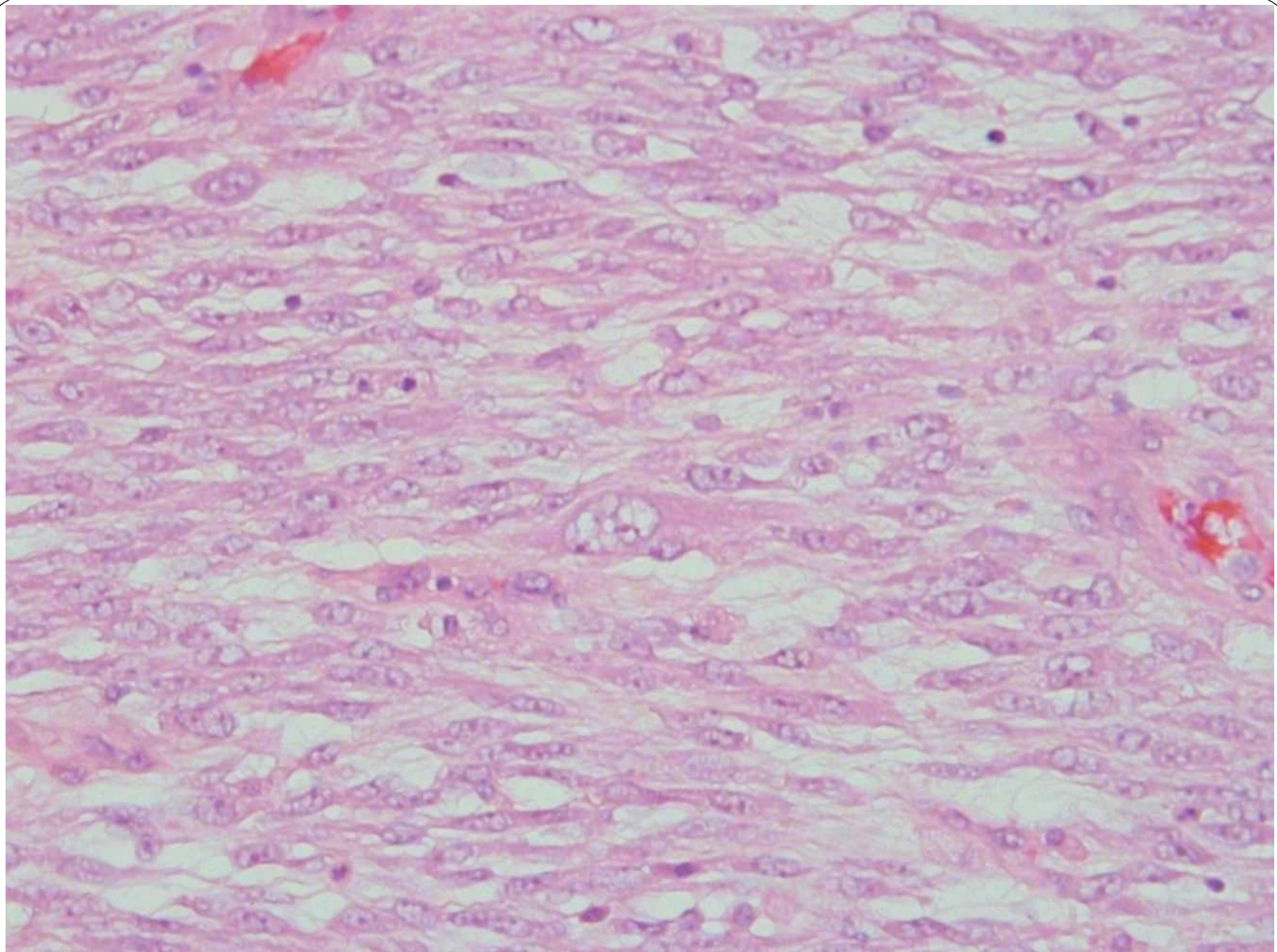


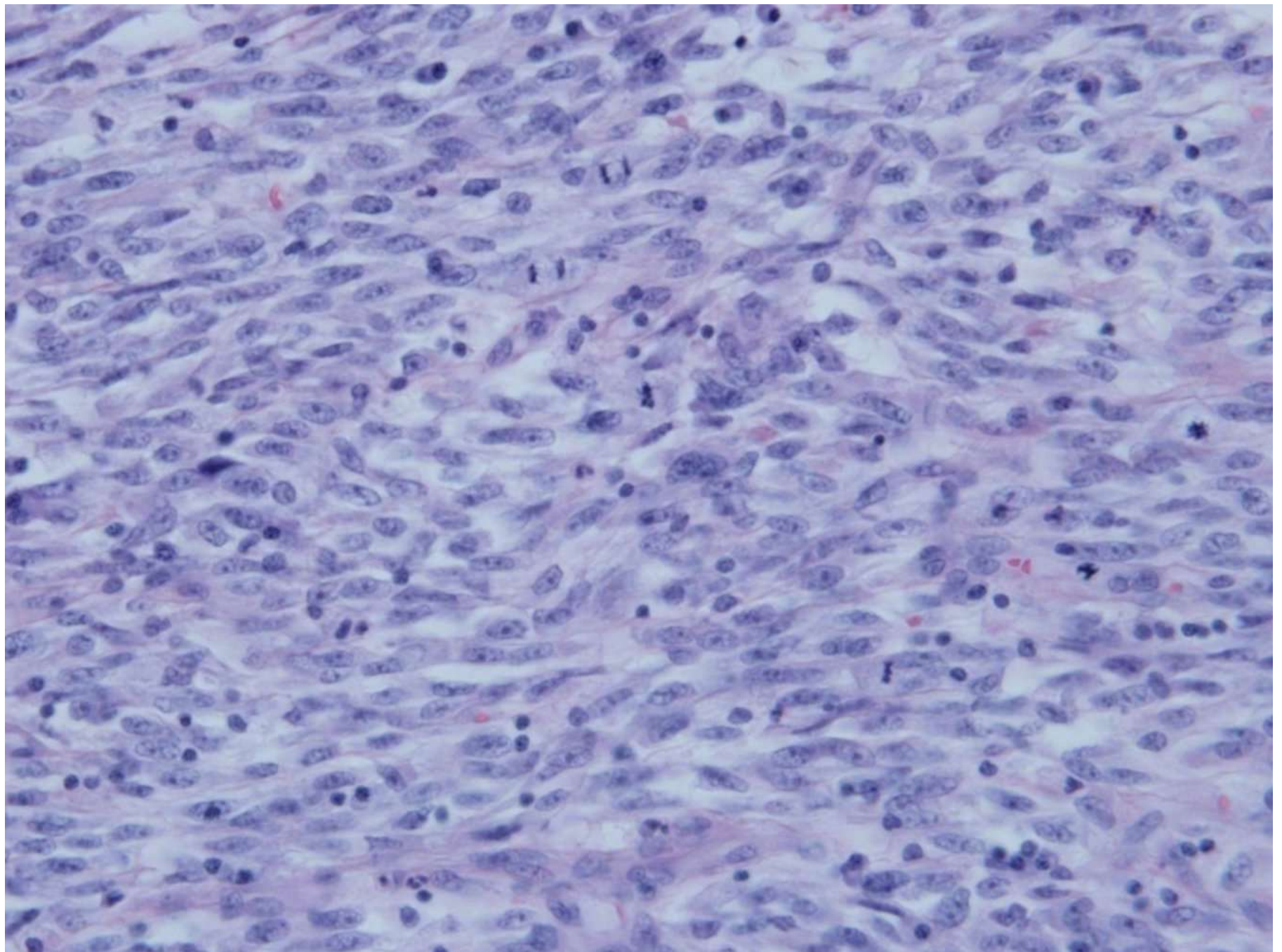




Mesenchymal
Mesenchymal

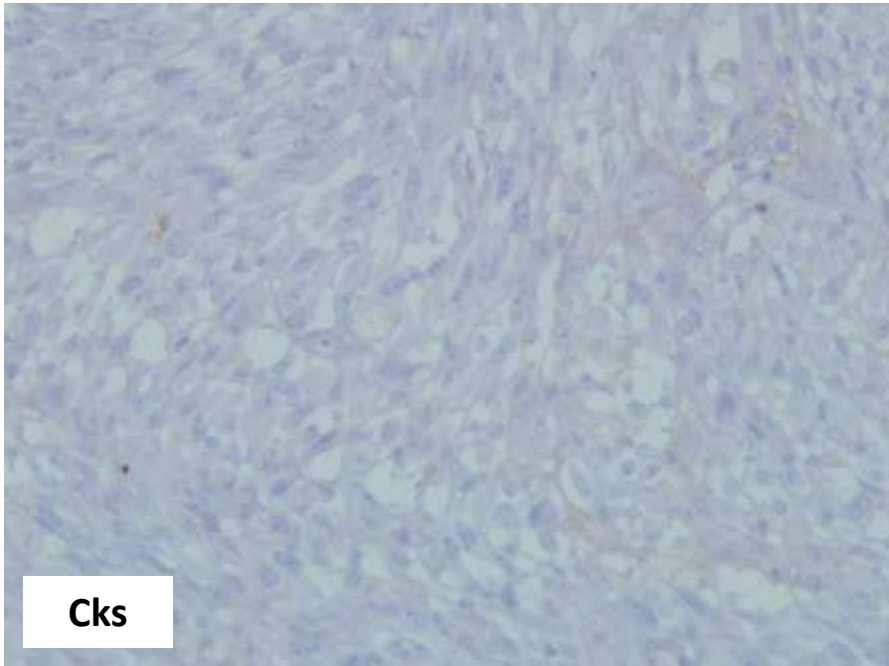




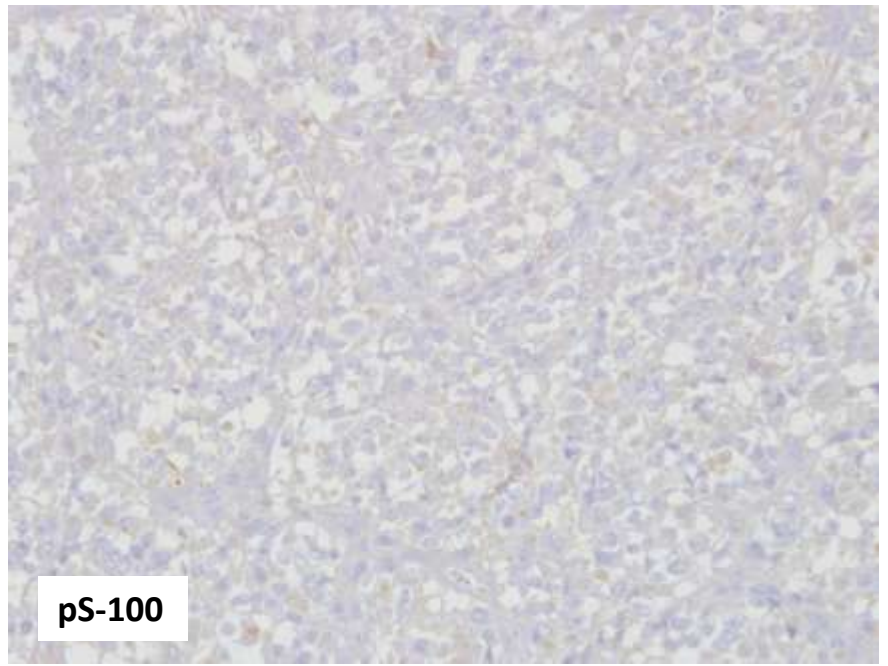


Cuál es su diagnóstico?

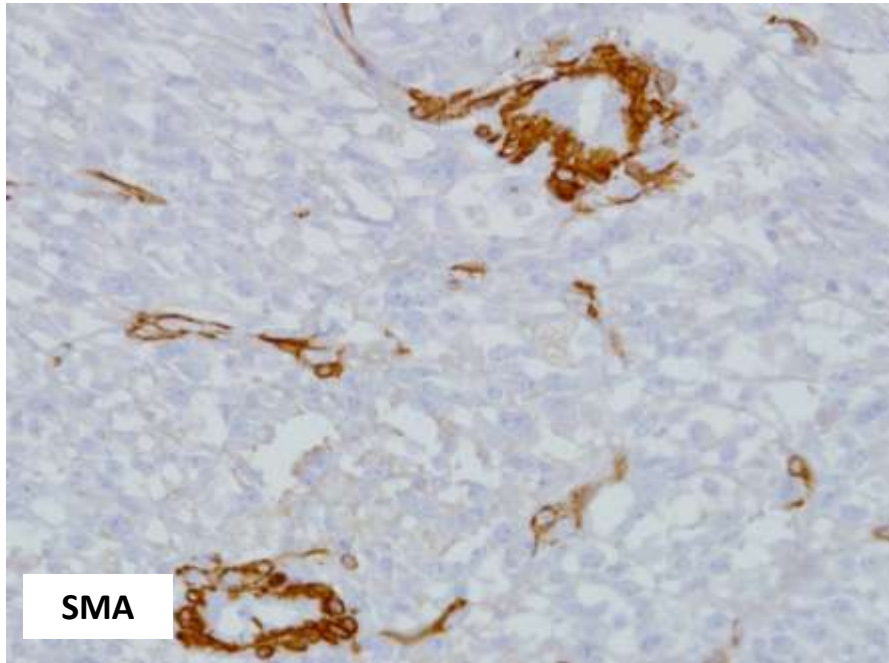
- 1- Leiomiosarcoma, variante mixoide?
- 2- Leiomioma variante mixoide?
- 3- Sarcoma del Estroma Endometrial, variante mixoide?
- 4- Carcinosarcoma?
- 5- Neoplasia fusocelular de Alto Grado.



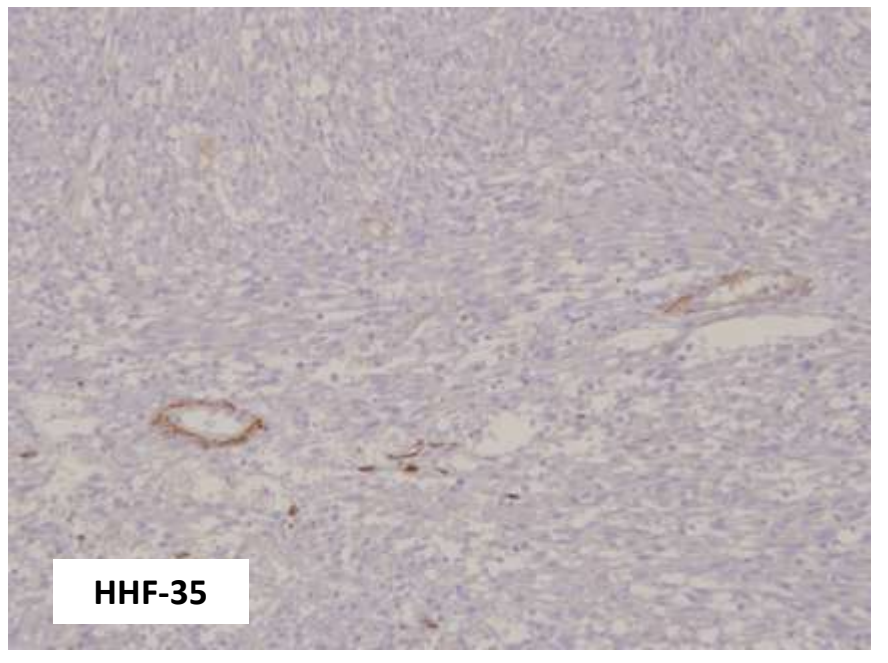
Cks



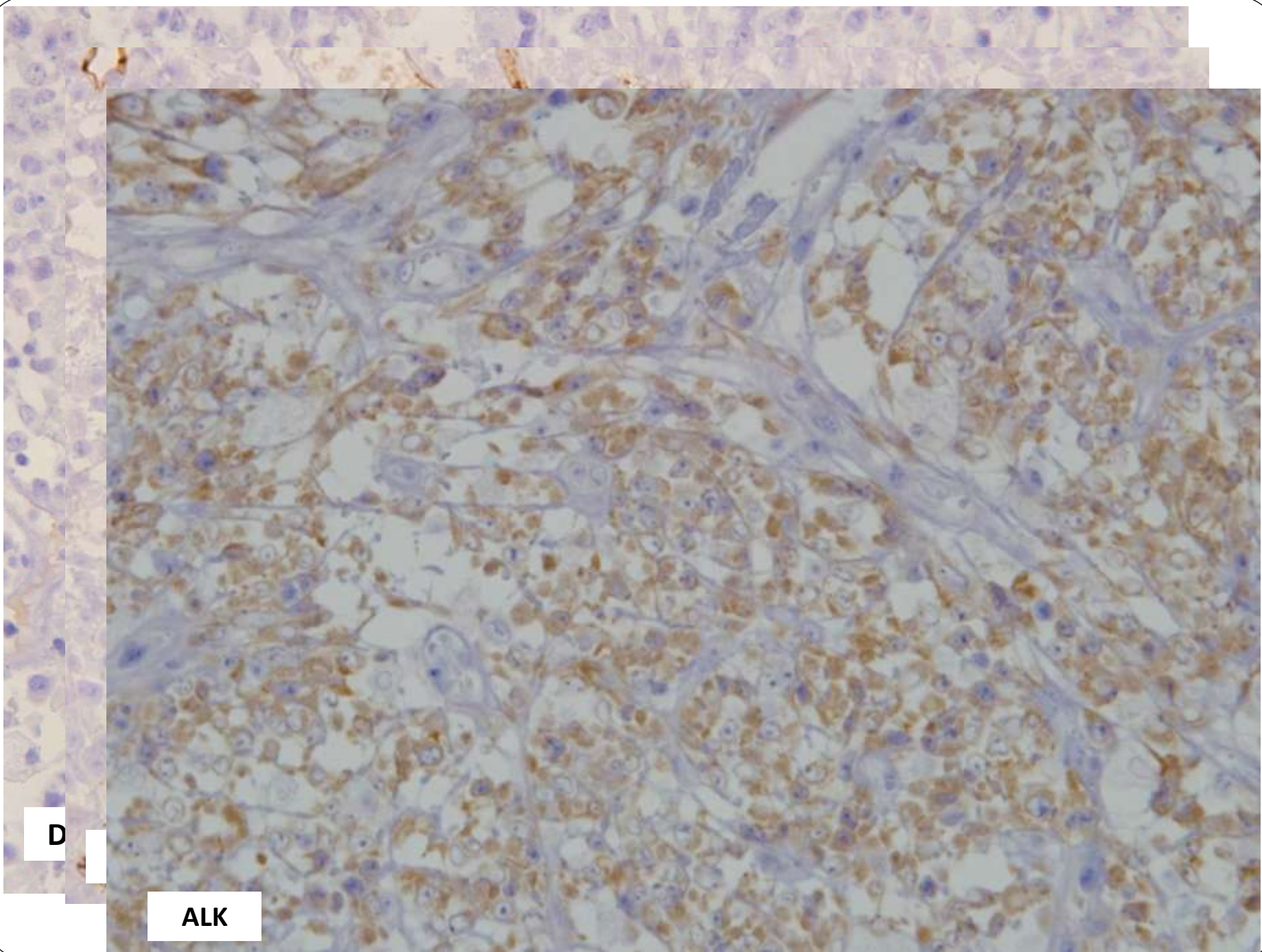
pS-100



SMA



HHF-35



D

ALK

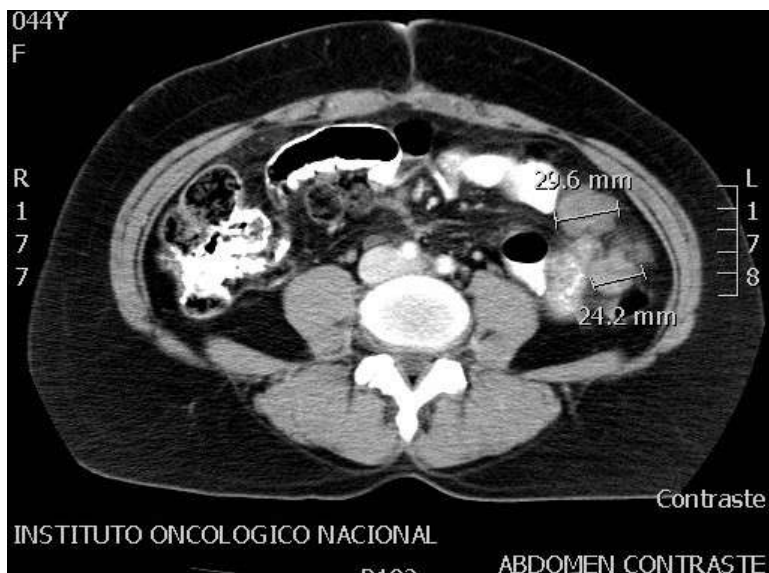
Tumor Miofibroblástico Inflamatorio

- Tumor descrito en pulmón (condición pseudoinflamatoria reparativa)
- Neoplasia infrecuente que afecta a niños y adultos jóvenes, ligera preferencia por el sexo femenino.
- Denominaciones:
 - Pseudotumor Inflamatorio
 - Granuloma de células plasmáticas
 - Fibrosarcoma Inflamatorio (1990)
 - Hamartoma omental- mesenterico mixoide
- Rearreglo clonal en 2p \Rightarrow Neoplasia
- Sitios anatómicos: abdomino-pélvico, pulmón y retroperitoneo.
- **Potencial biológico intermedio:** recurre local (10-25%)y rara vez metastatiza (<5%).

Tumor Miofibroblástico Inflamatorio

- Características microscópicas:
 - Proliferación miofibroblástica, estroma mixoide e infiltrado linfoplasmacitario.
- Patrones:
 - Patrón vascular/mixoide
 - Patrón fusocelular compactas
 - Patrón fibromatosis-like.
- Pueden expresar SMA, desmina y Cks.
- ALK protein

Tomografía Computada



Tumor Miofibroblástico Inflamatorio

Inflammatory Myofibroblastic Tumor

Comparison of Clinicopathologic, Histologic, and Immunohistochemical Features Including ALK Expression in Atypical and Aggressive Cases

Cheryl M. Coffin, MD, Jason L. Hornick, MD, PhD,†
and Christopher D. M. Fletcher, MD, FRCPath†*

From the *Department of Pathology, Division of Pediatric Pathology, University of Utah School of Medicine, Primary Children's Medical Center, Salt Lake City, UT; and †Department of Pathology, Brigham, Women's Hospital, Harvard Medical School, Boston, MA.

Aberración del ALK (50-75%)

Metástasis con apariencia blanda o recurrencias con C. H. Atípicas
Características Histológicas Atípicas: necrosis, hiper celularidad y
células ganglion-like, mitosis atípicas.

No se han encontrado características clínicas, histológicas,
citogenéticas o moleculares que predigan la recurrencia o el riesgo
de metástasis...

Tumor Miofibroblástico Inflamatorio

Inflammatory Myofibroblastic Tumor of the Uterus *A Clinicopathologic Study of 6 Cases Emphasizing Distinction From Aggressive Mesenchymal Tumors*

Joseph T. Rabban, MD, MPH, Charles J. Zaloudek, MD,* Kris M. Shekitka, MD,†
and Fattaneh A. Tavassoli, MD‡*

From the *Department of Anatomic Pathology, University of California, San Francisco, CA; †Department of Gynecologic and Breast Pathology, Armed Forces Institute of Pathology, Washington, DC; and ‡Department of Pathology, Yale University School of Medicine, New Haven, CT.

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Case Report

Invasive inflammatory pseudotumor of uterine cervix: A case report

Fatih Gücer^{a,*}, Semsi Altaner^b, Naciye Mülayim^a, Özlem Yapicier^c

^a*Anadolu Sağlık Merkezi, Department of Obstetrics and Gynecology, Anadolu Caddesi No: 1, Çayırova Mevkii, 41420 Gebze-Kocaeli, Turkey*

^b*Department of Pathology, Trakya University, Edirne, Turkey*

^c*Anadolu Sağlık Merkezi, Department of Pathology, Gebze, Kocaeli, Turkey*

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GRACIAS

