

Sarcomatoid neoplasms of the pleura

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Sarcomatoid neoplasms of the pleura (spindle cell morphology)

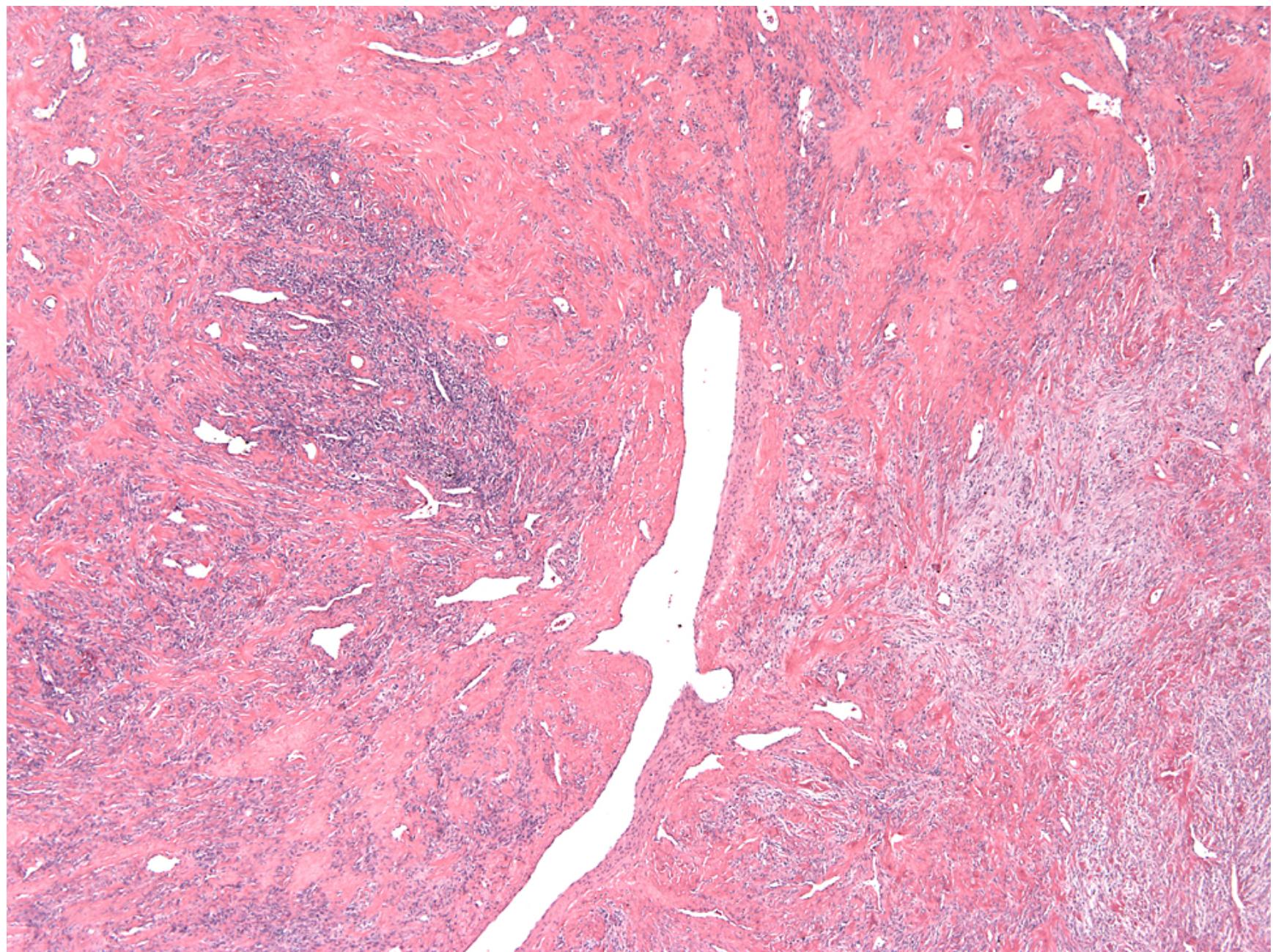
- Sarcomatoid malignant mesothelioma
- Sarcomatoid carcinoma
- Solitary fibrous tumor
- Synovial sarcoma
- Desmoid

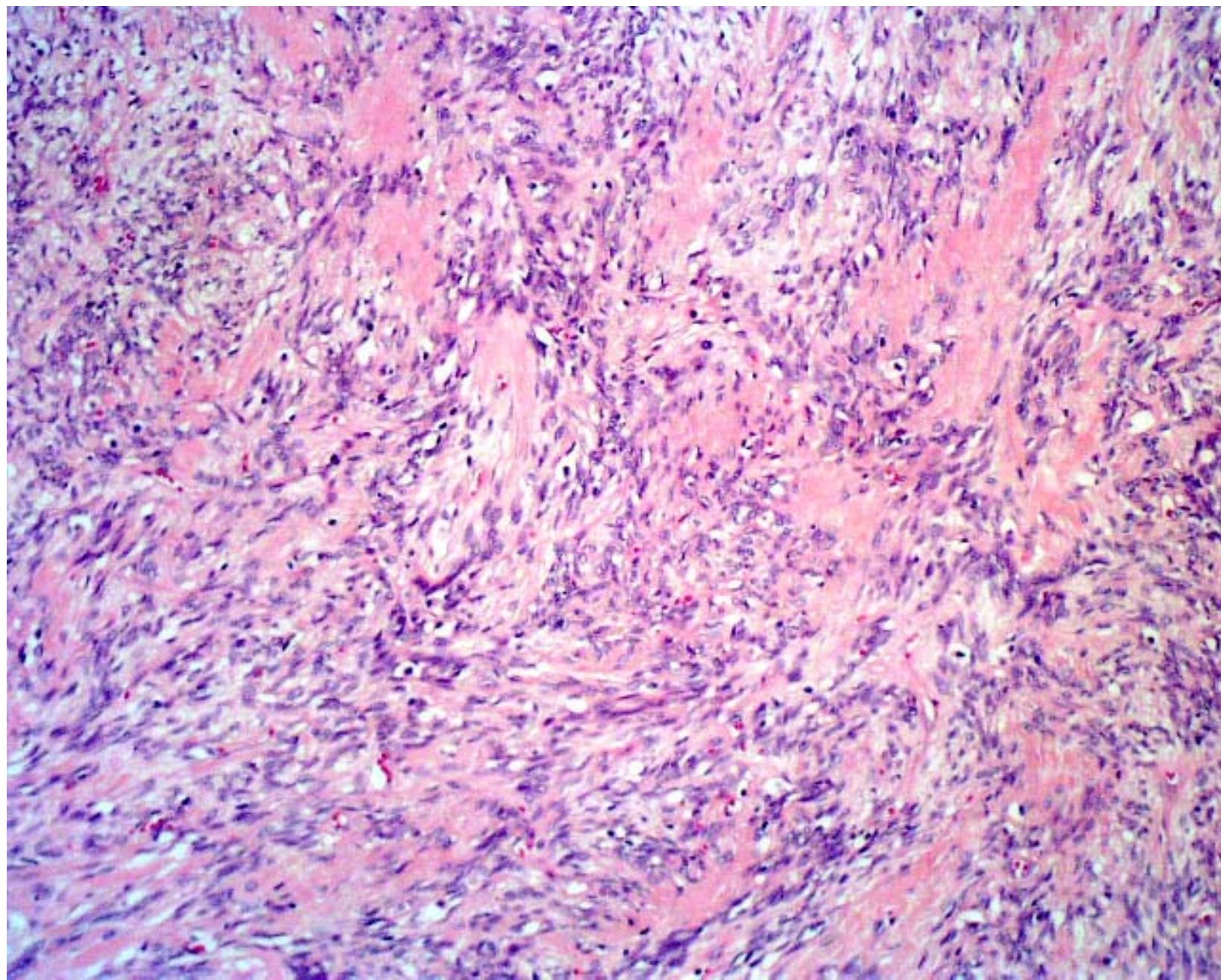


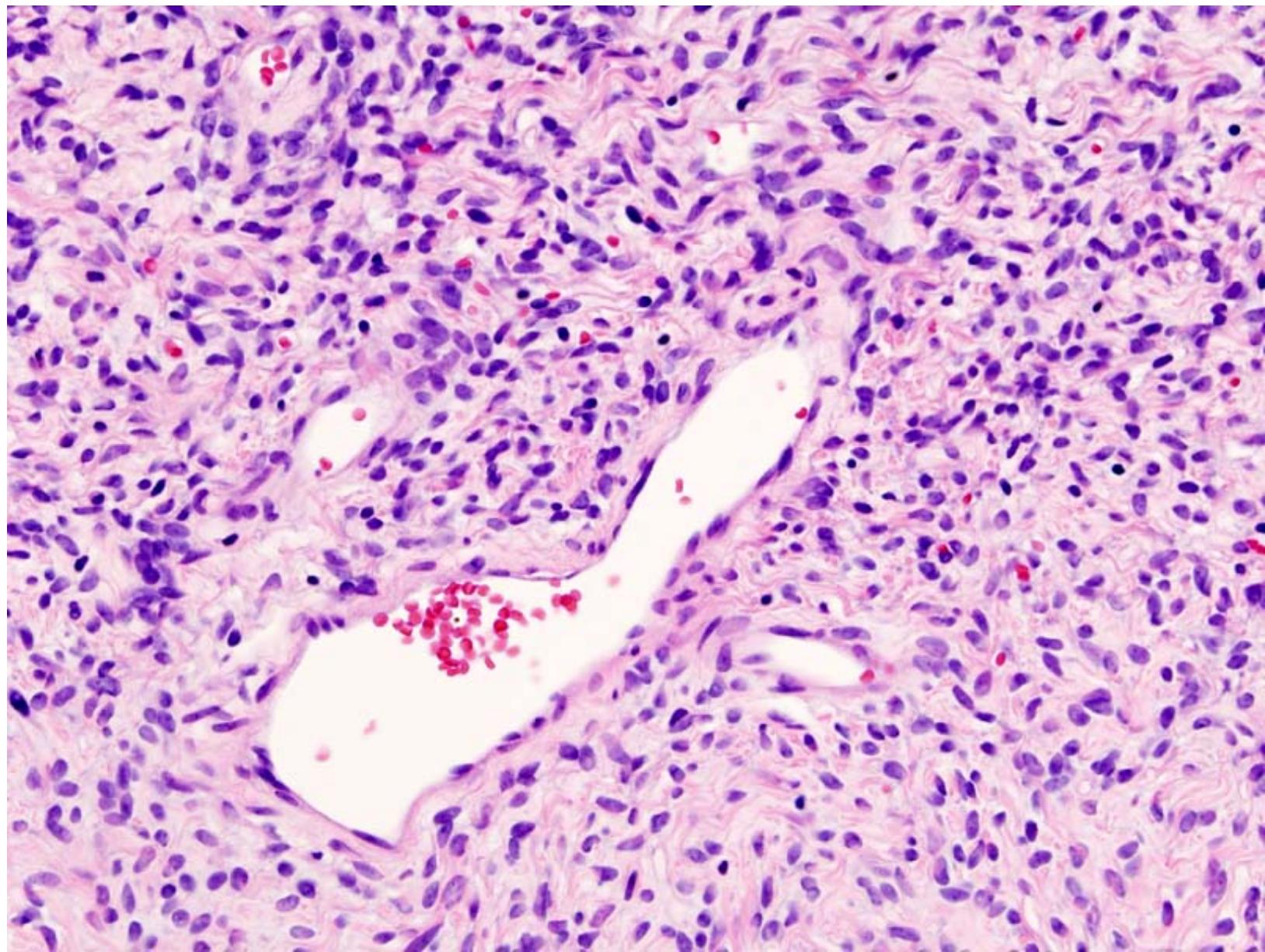
Solitary fibrous tumor

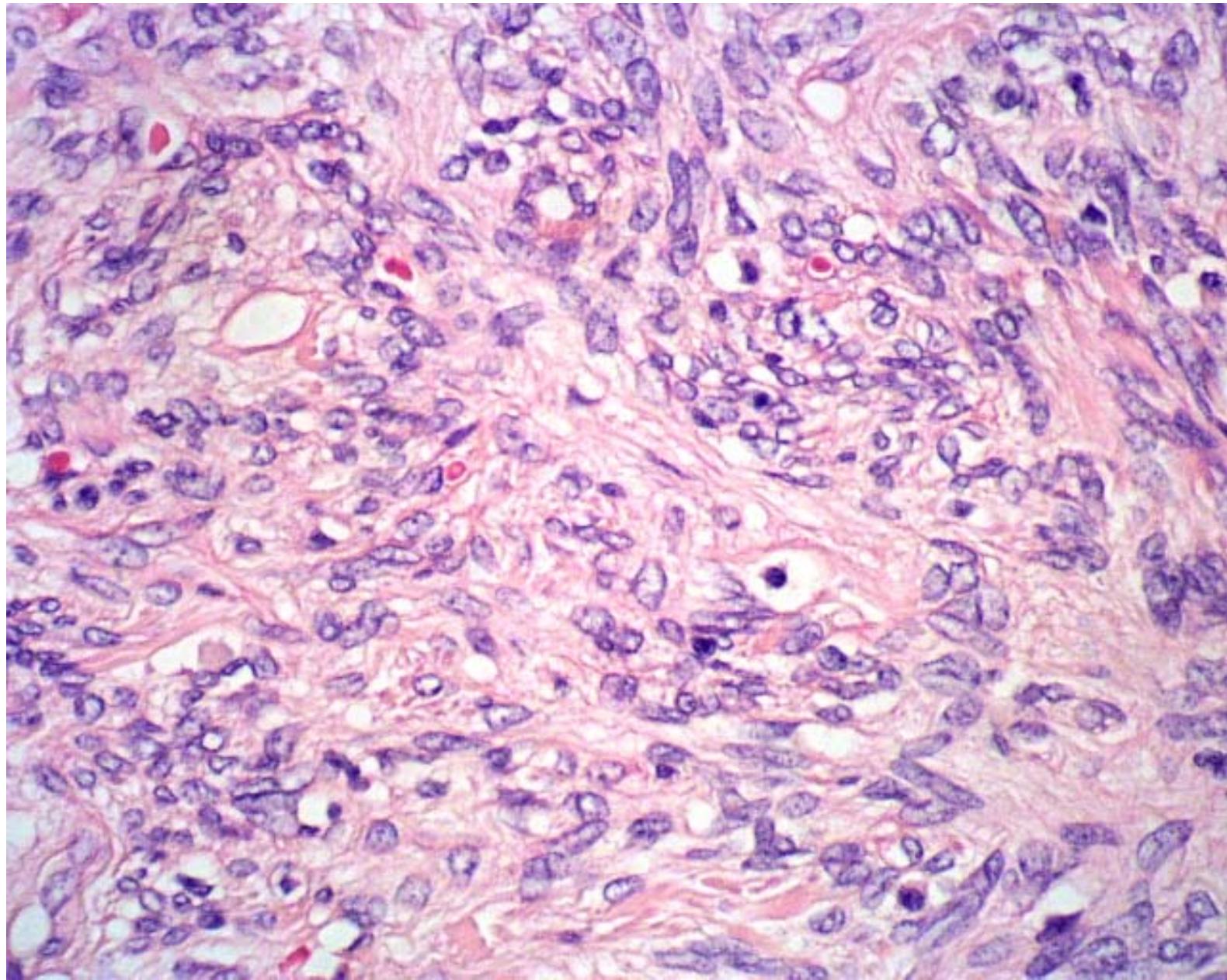
- Well circumscribed mass
- “Patternless pattern”
- Hemangiopericytoma-like pattern
- Spindle shaped to oval “dull” cells often with a fibroblast-like appearance
- Dense wirelike bands of collagen
- IHC: CD34+ (> 95%), BCL2+ en CD99+. S100 -, EMA-, CK-pan -, Beta-Cater





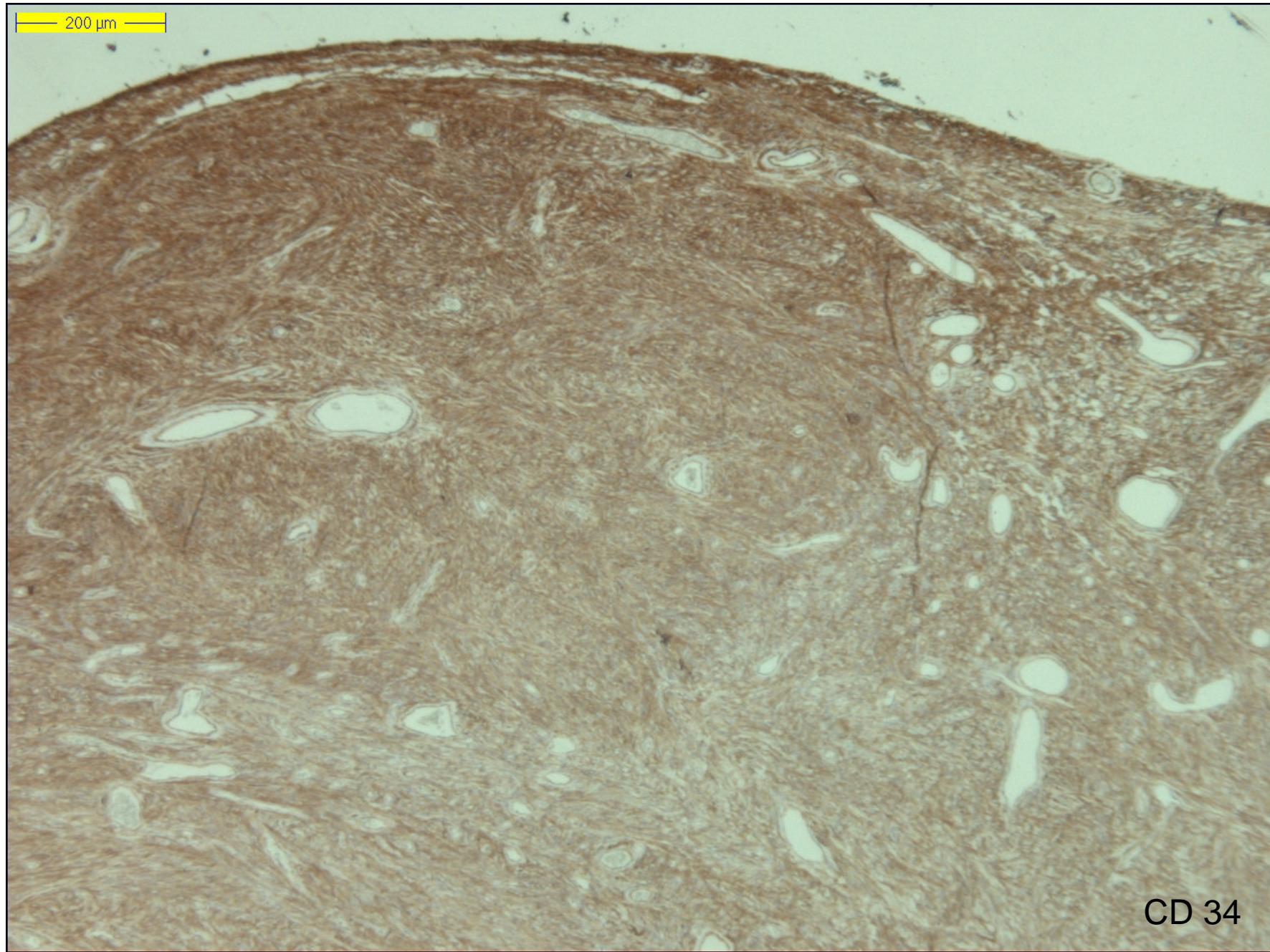






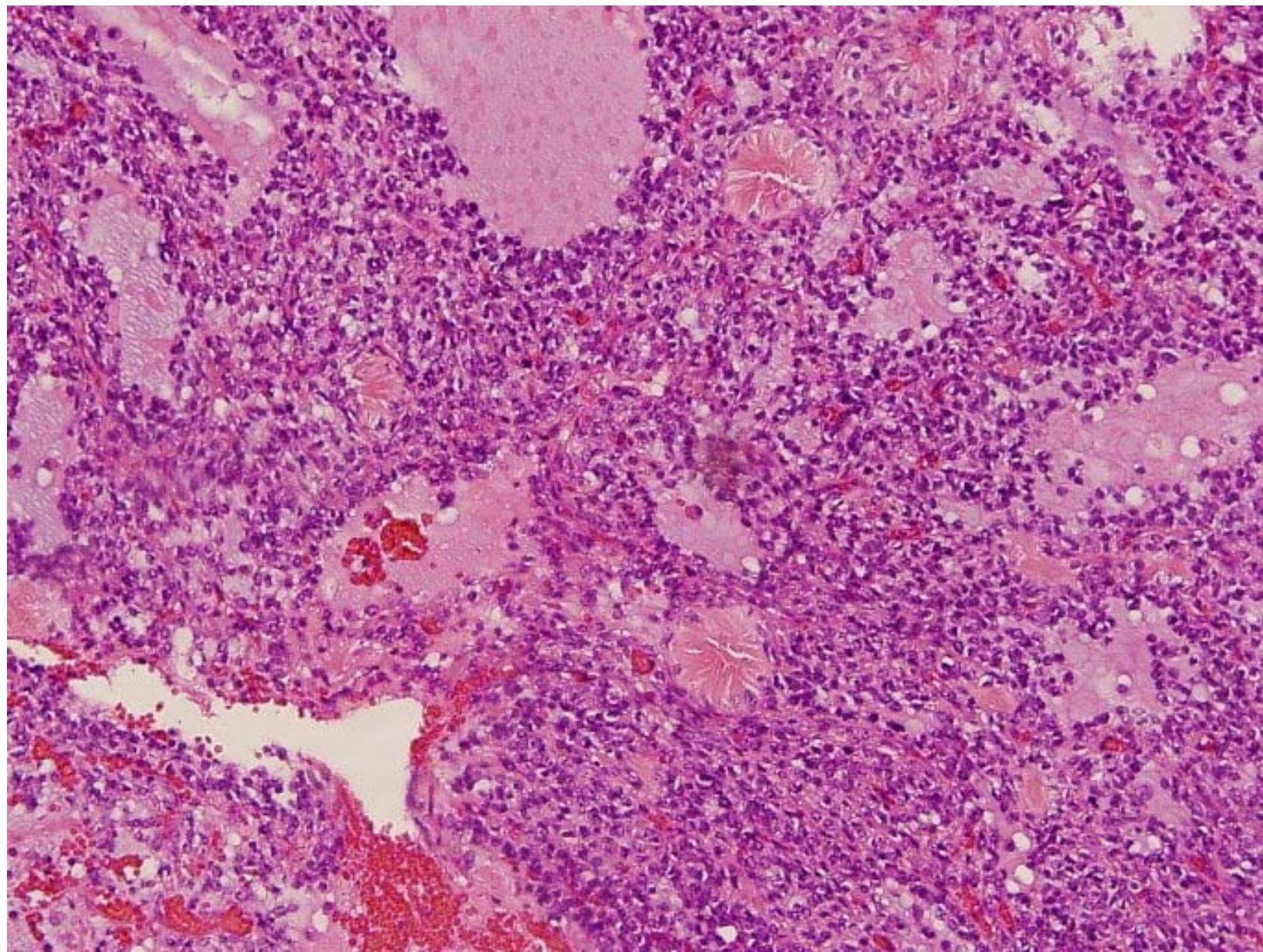
200 μ m

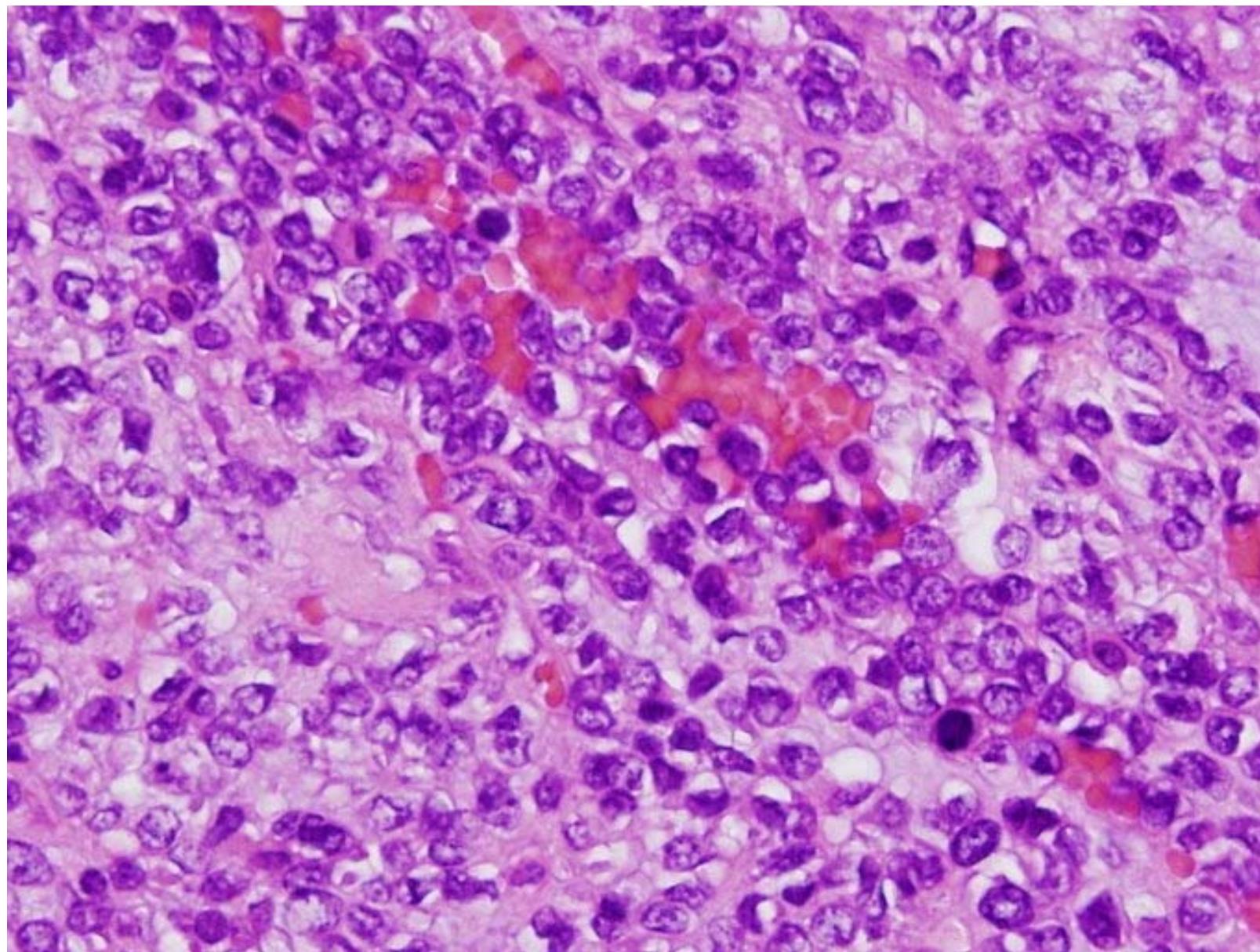
CD 34



Solitary fibrous tumor: malignant morphology

- Increased cellularity
- Pleomorphism, increased nuclear to cytoplasmic ratio, less prominent collagen, hyperchromatic nuclei, prominent nucleoli
- Tumor necrosis
- **>4 mitotic figures per 2mm²**
- High p53 expression (?) (group William Travis)
- Loss of CD34 expression (“dedifferentiation”)
- Biological behavior as a spindle cell sarcoma

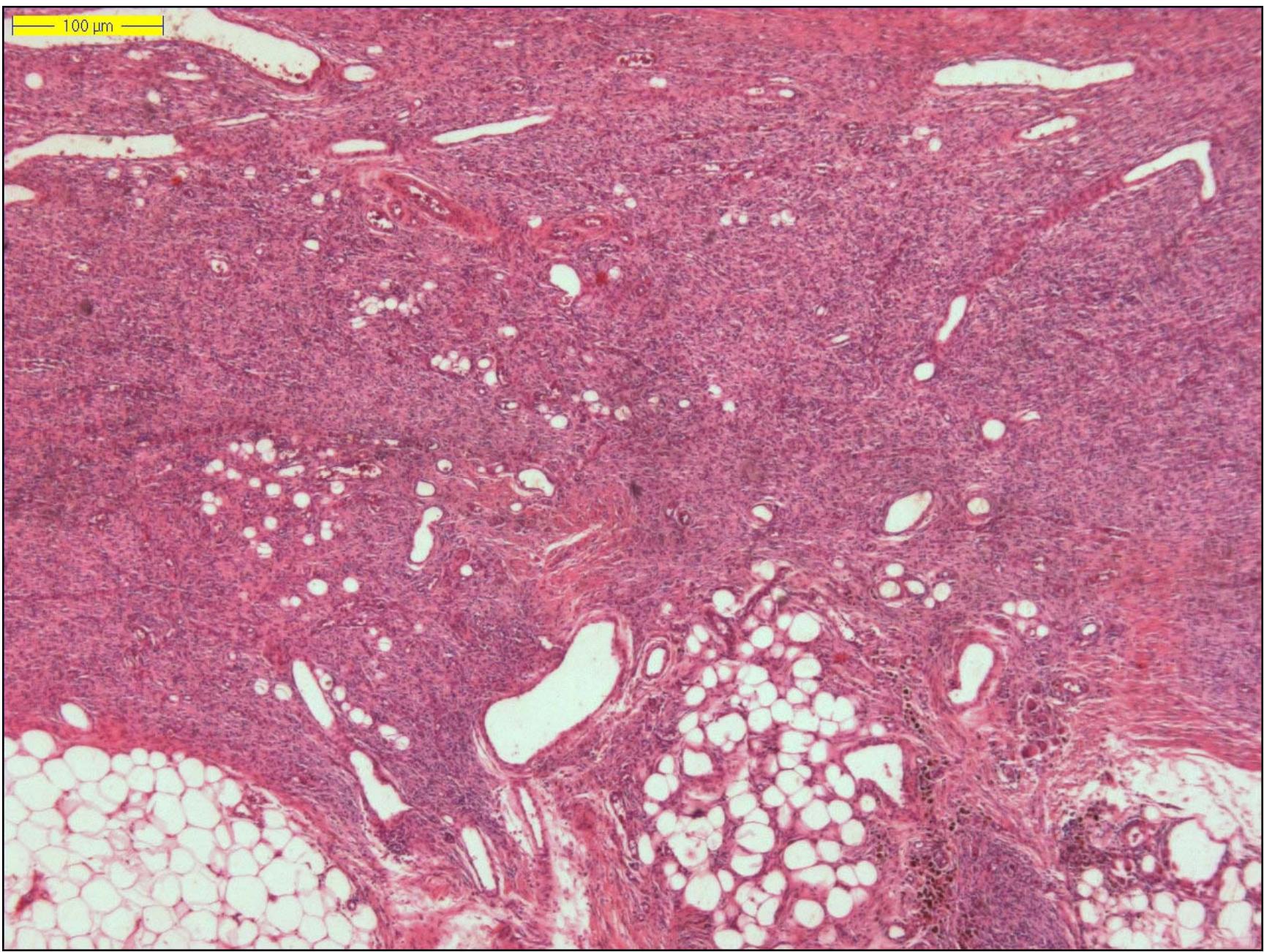




Solitary fibrous tumor: differential diagnosis

- Synovial sarcoma (CD34-, CK-pan/EMA+)
- Leiomyoma/leiomyosarcoma (SMA, desmin+)
- Schwannoma (strong S100+)
- Thymoma (CK-pan +)
- Dermatofibrosarcoma protuberans (DFSP)
(especially in a subcutaneous spindle cell tumor)
(also CD34+)
- Desmoid (Beta-Catenin+)
- Spindle cell rhabdomyosarcoma (young patients!) (desmin+, myogenin+)

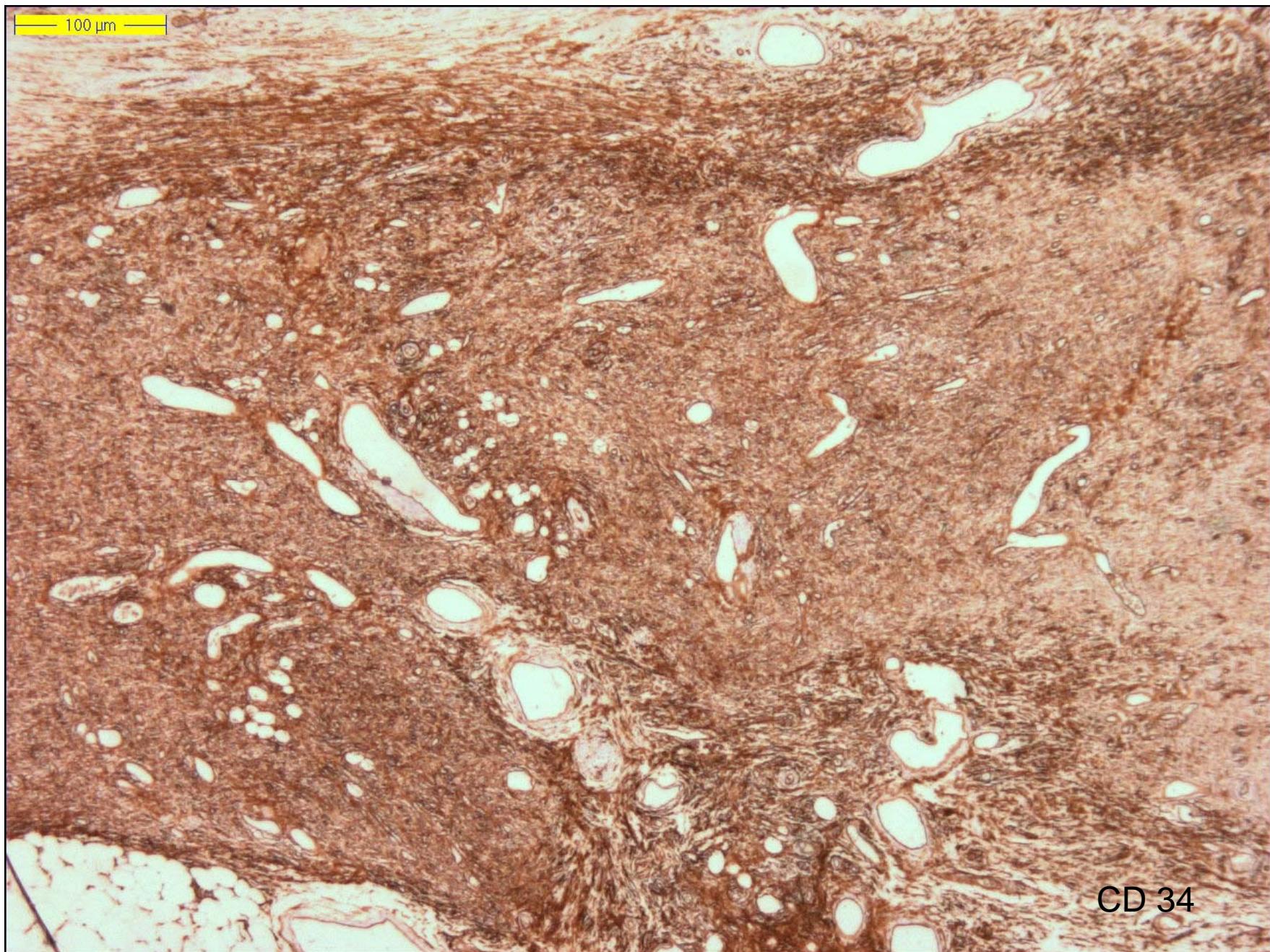


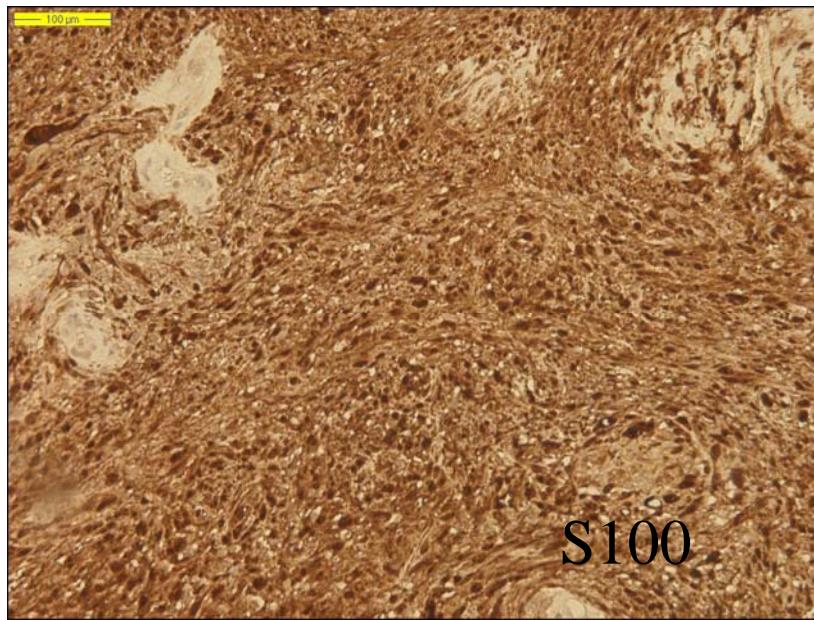
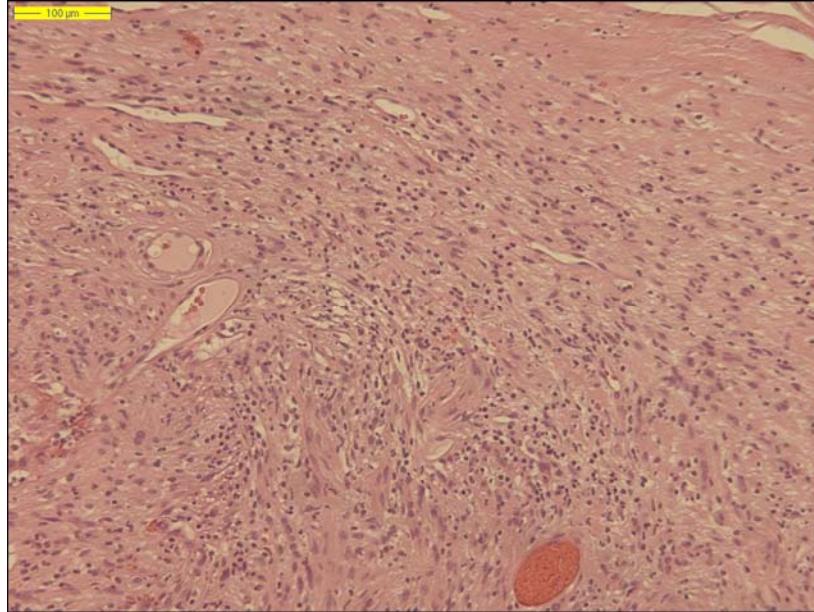


Dermatofibrosarcoma protuberans

100 µm

CD 34

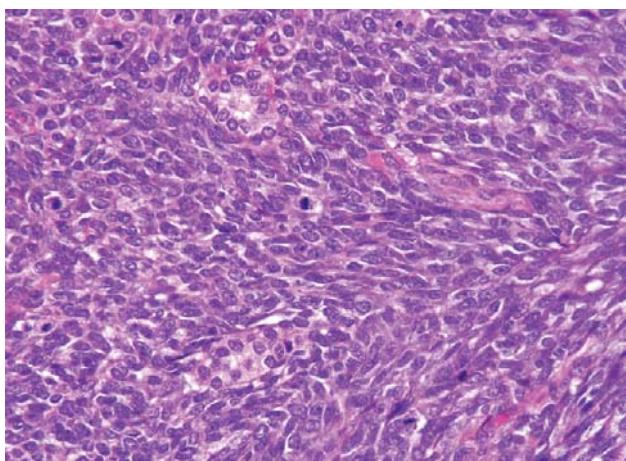
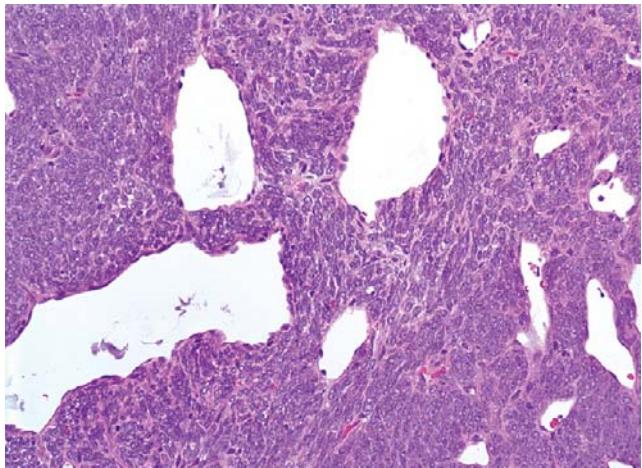
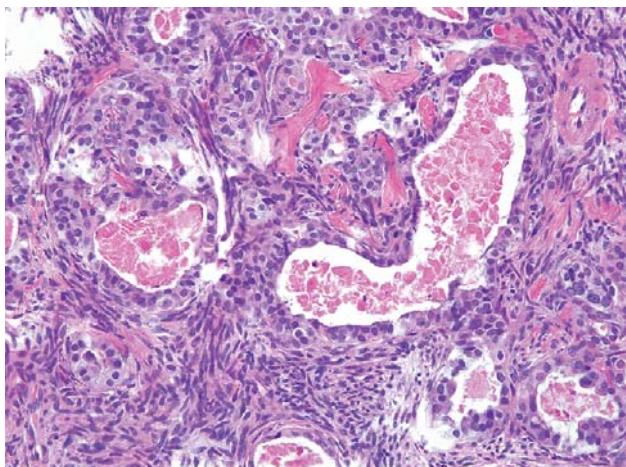
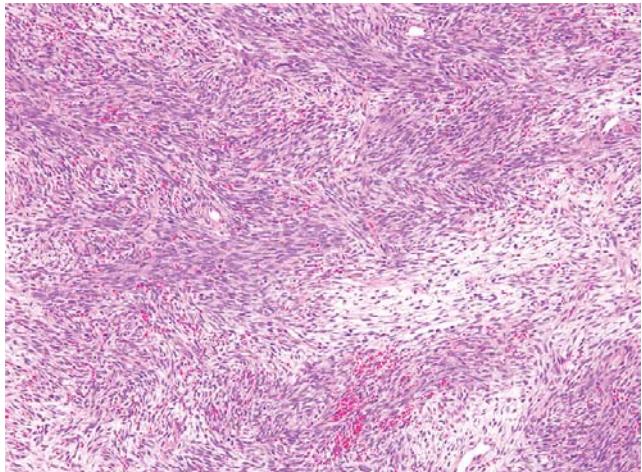




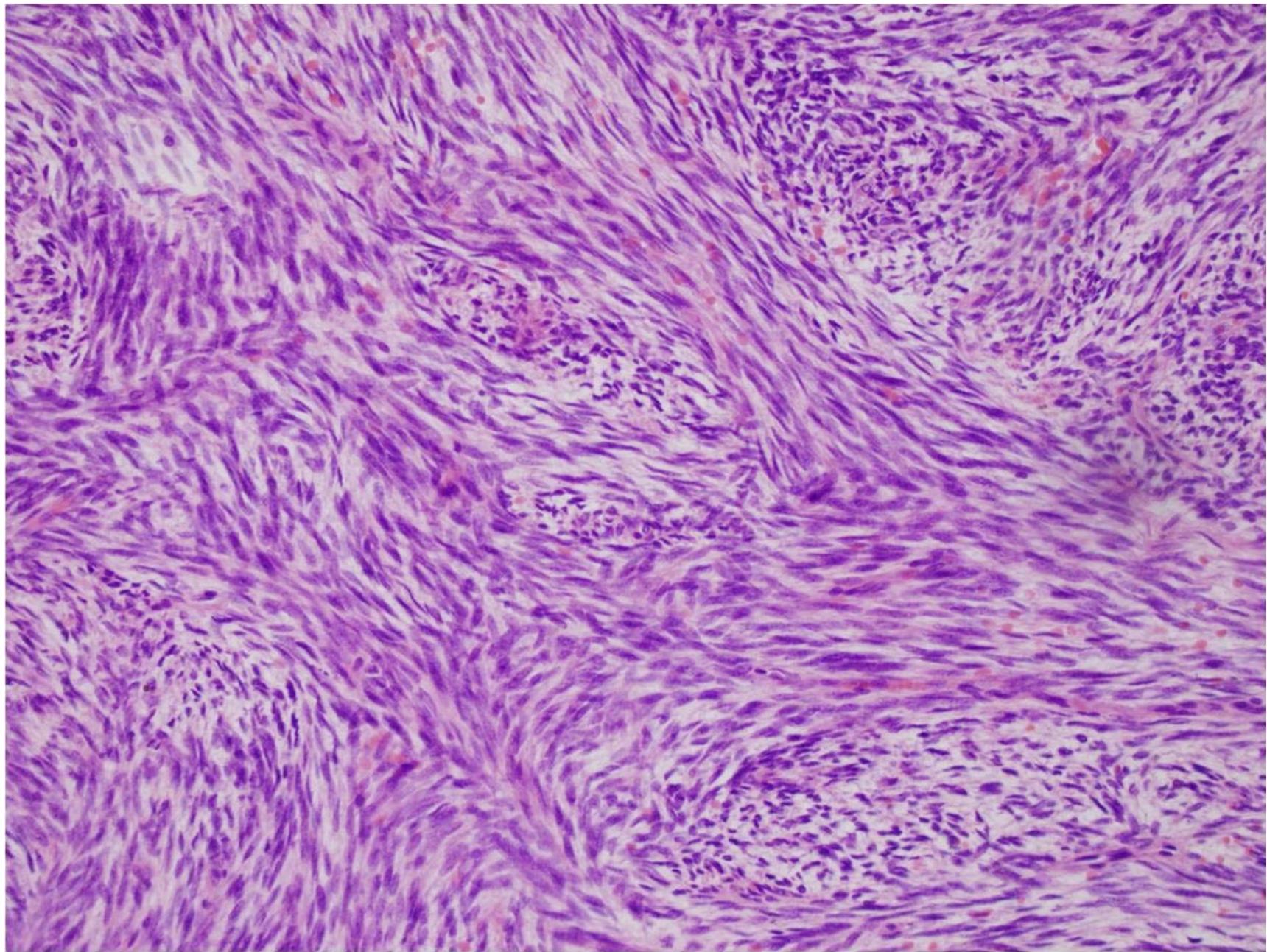
schwannoma

Synovial sarcoma

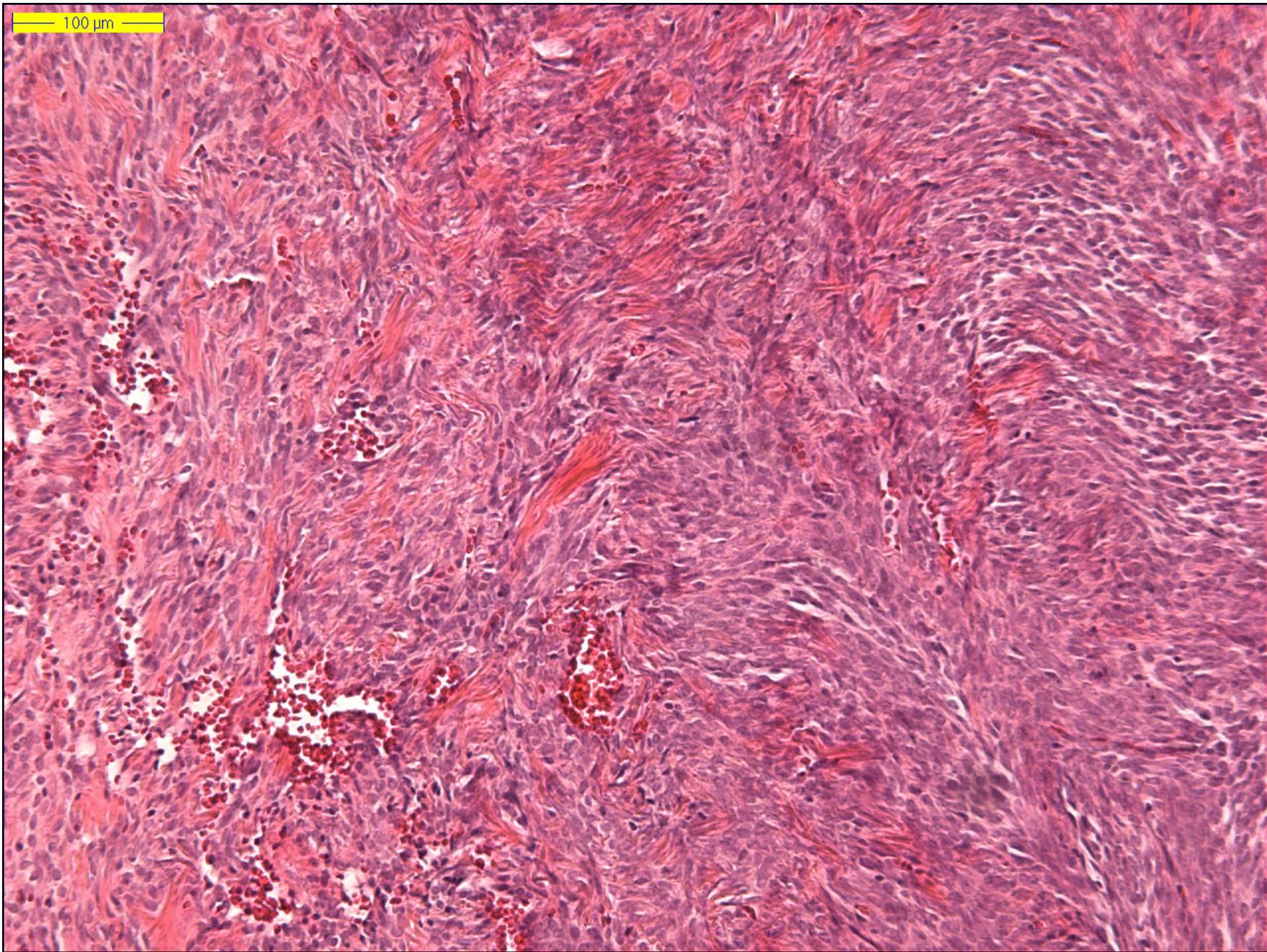
- Younger patients
- Usually localized masses without diffuse pleural thickening
- Monophasic (spindle) or biphasic
- Spindle (neural-like) and/or epithelioid cells
- Hemangiopericytoma-like growth pattern
- Fascicular/herringbone pattern
- Calcifications
- Collagen depositions
- Perivascular condensation of tumor cells
- IHC: CK-pan/EMA+, CD34-, cave S100+
- Molecular: t(X;18)



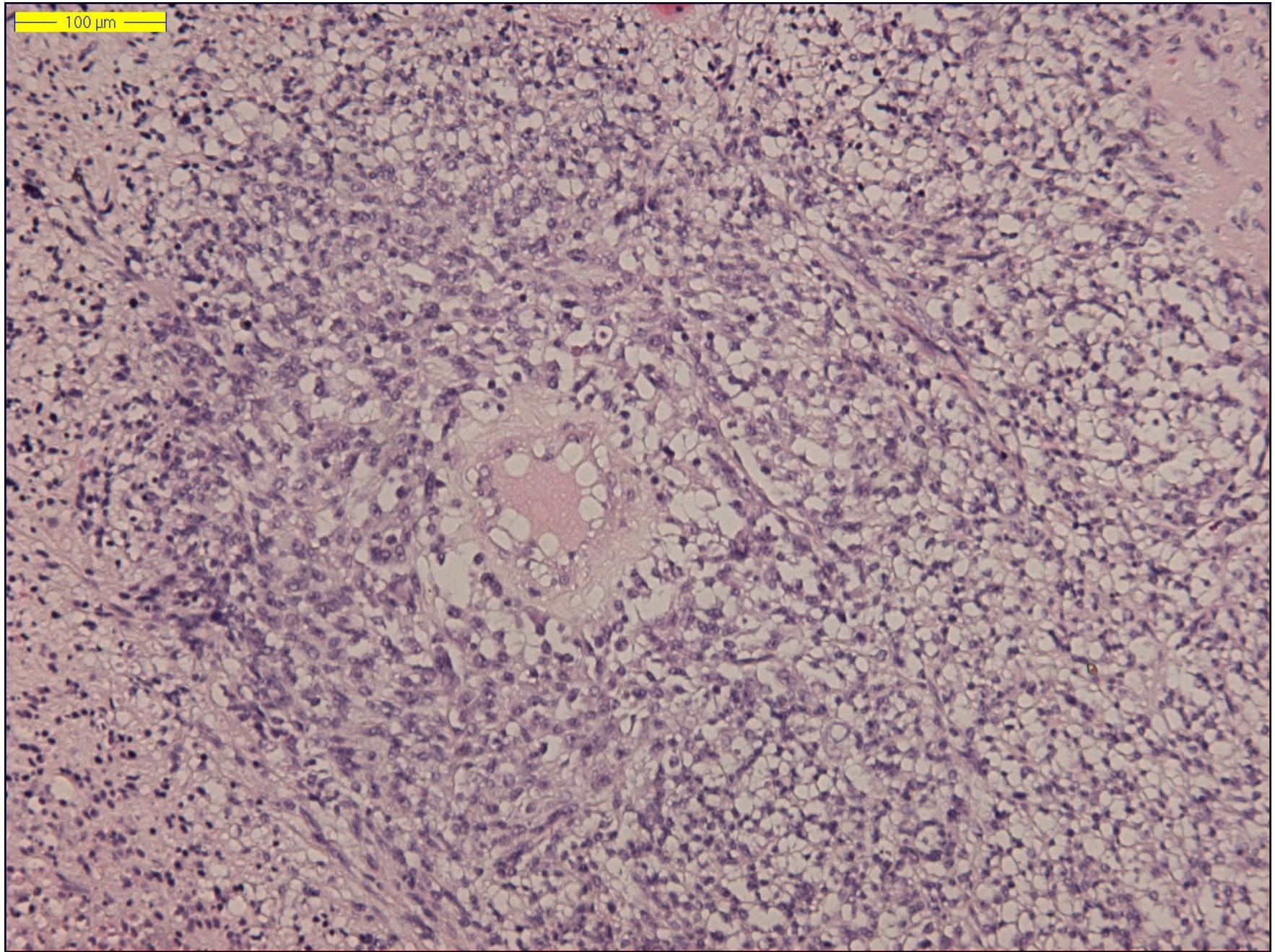
Synovial sarcoma

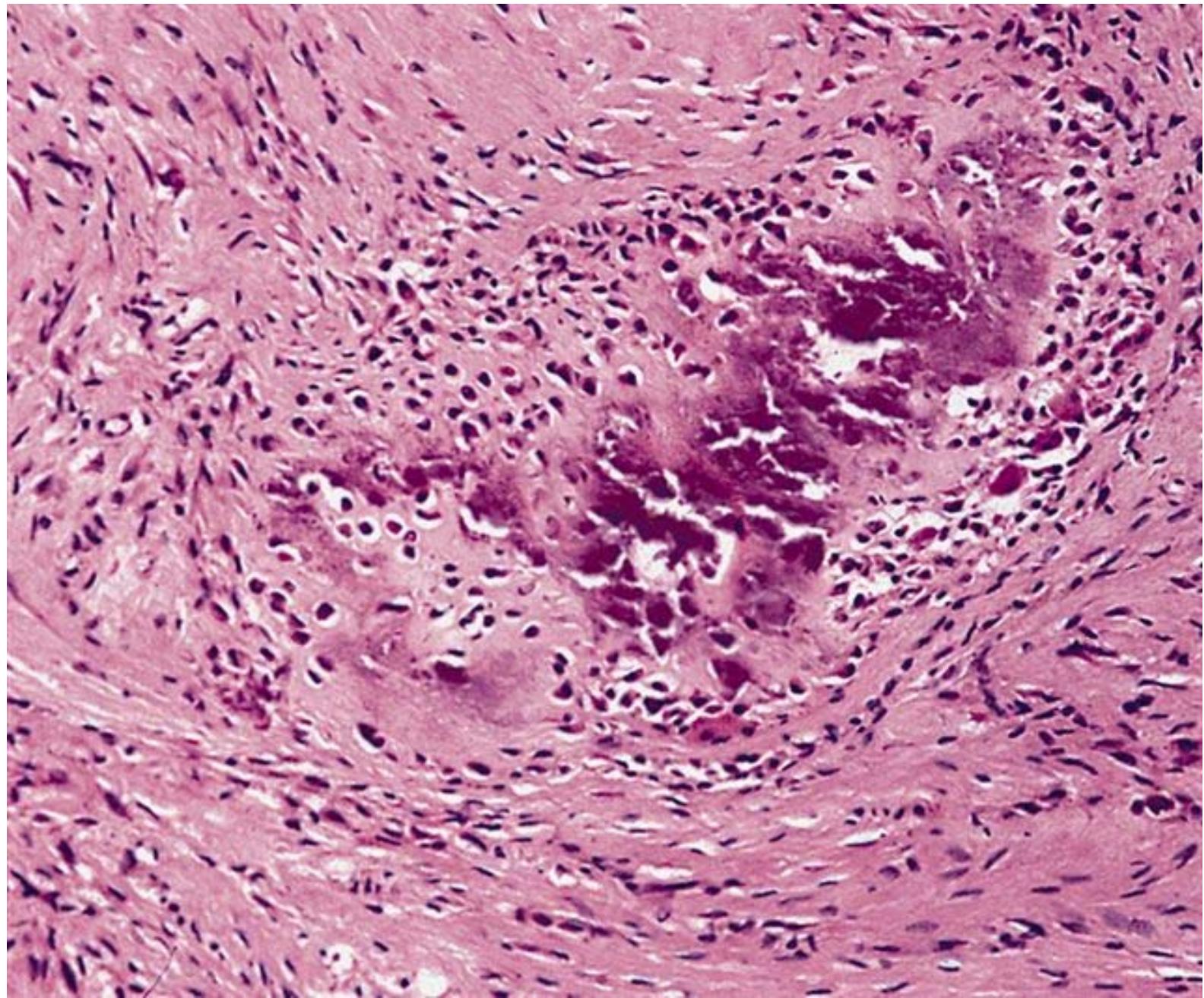


100 μ m



100 µm

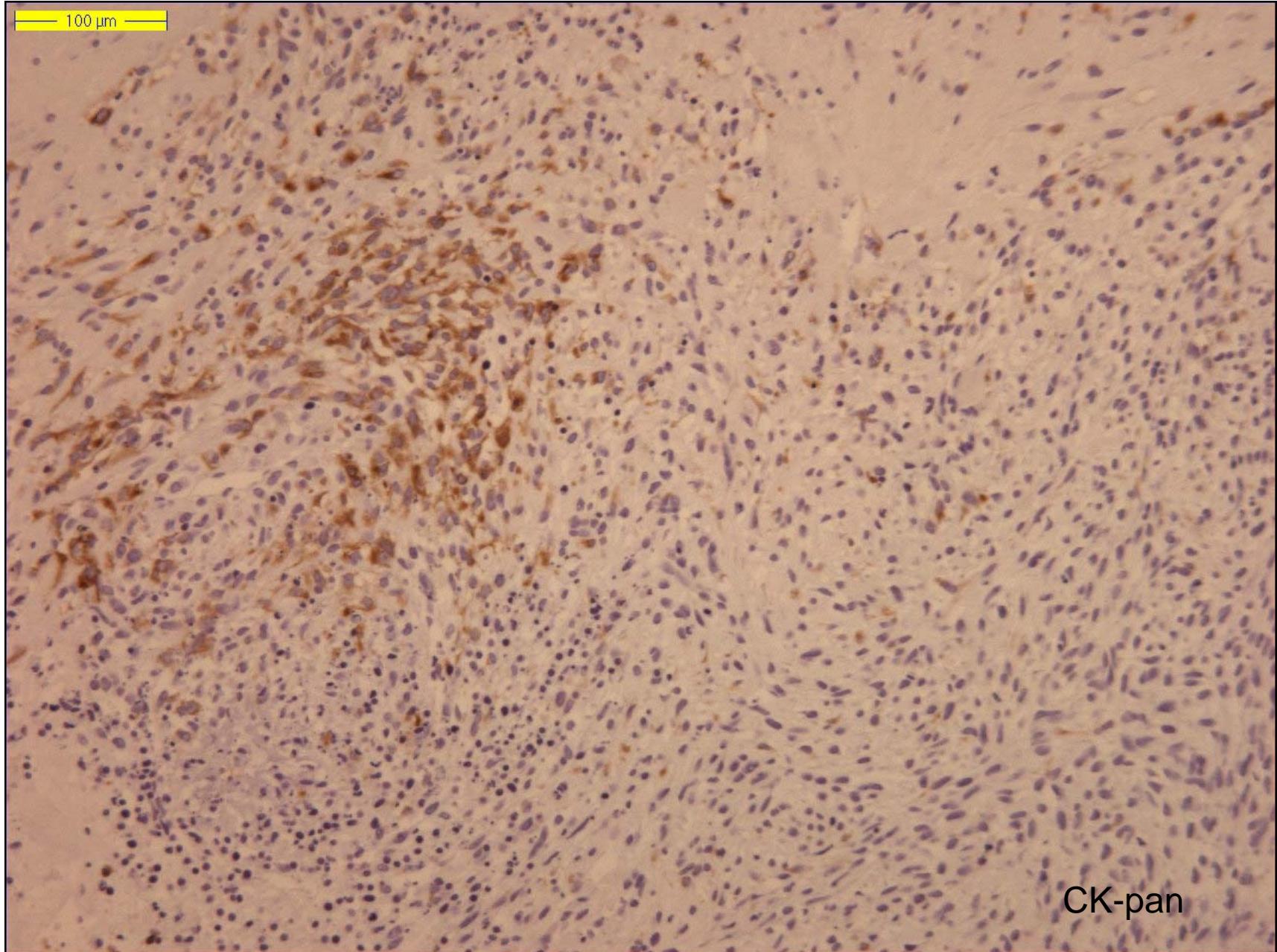




100 µm

EMA

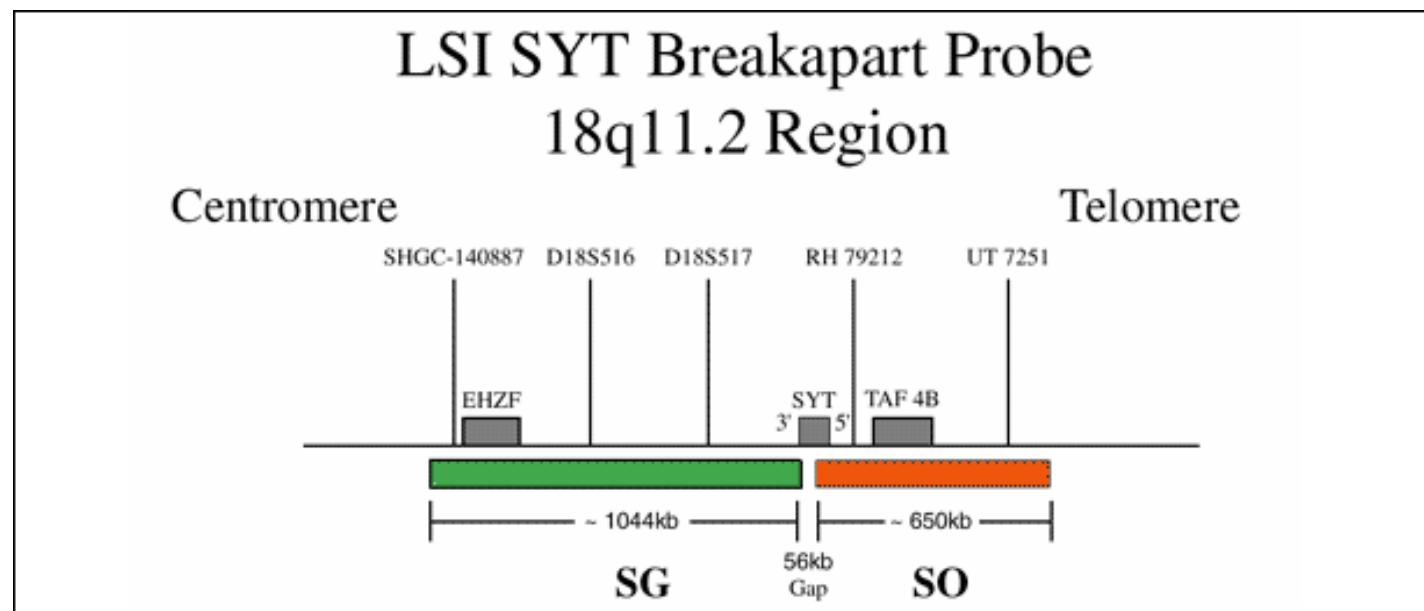
100 µm

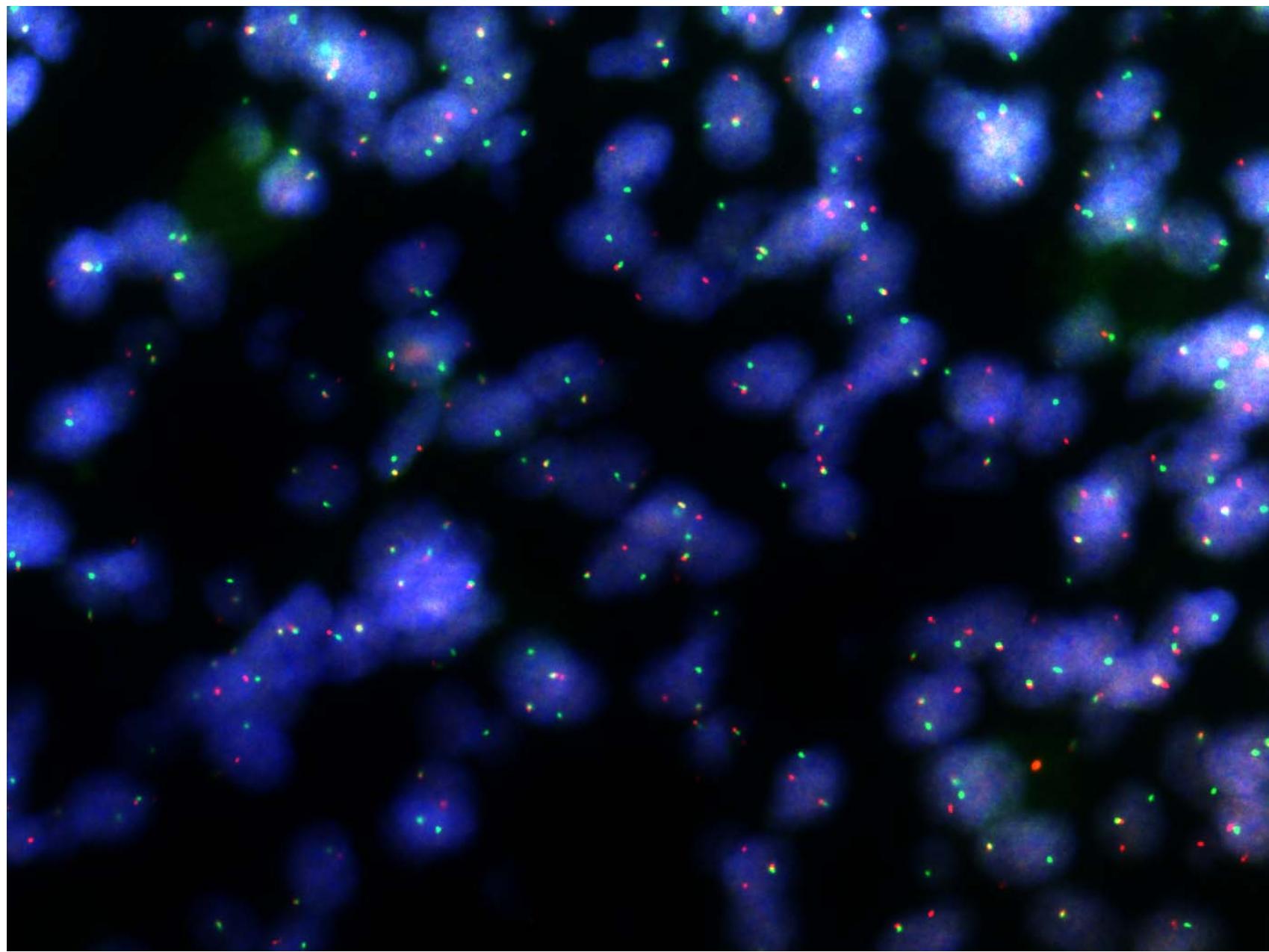


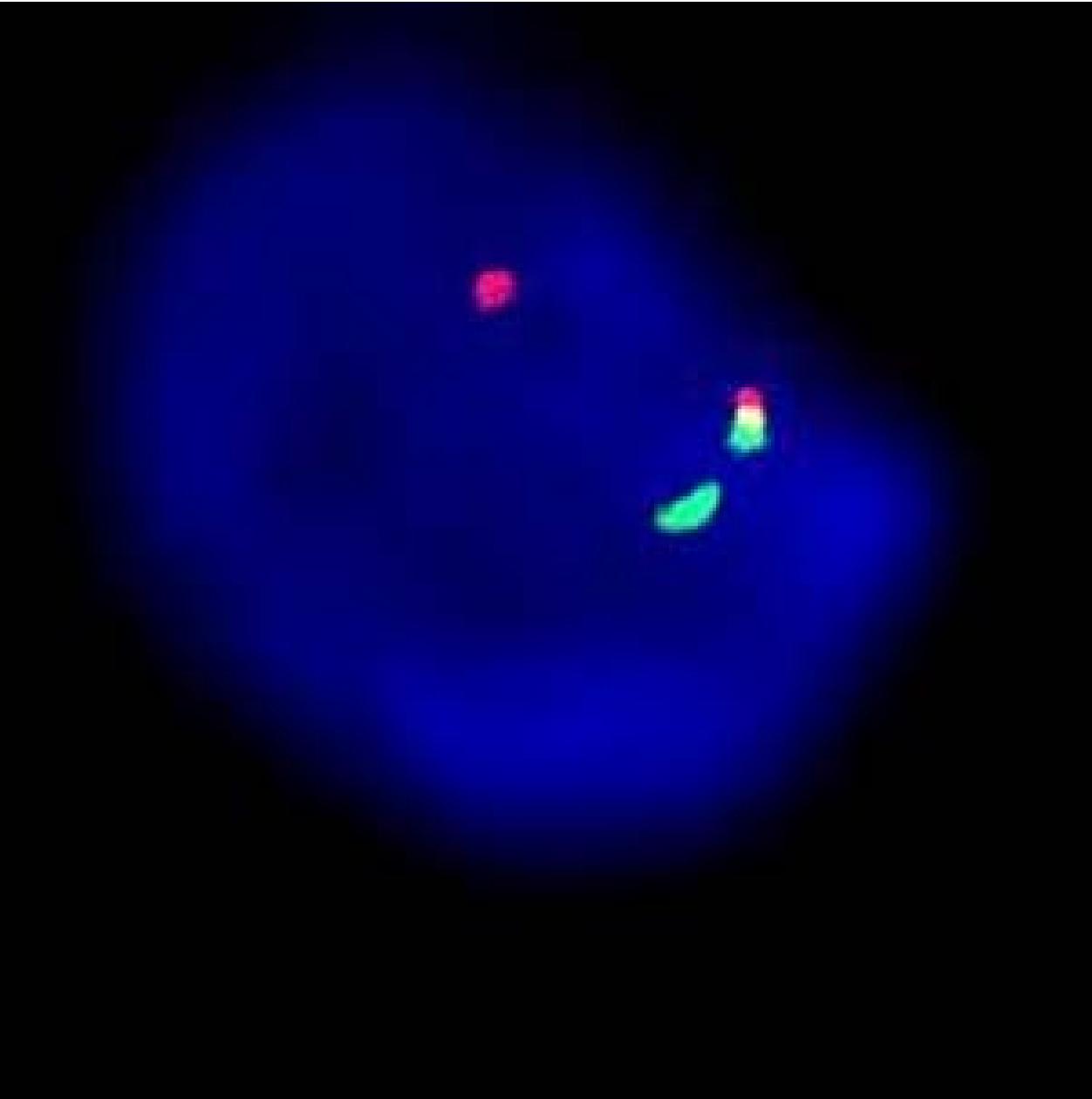
100 μ m

S100

T(X,18) translocation FISH procedure (1)



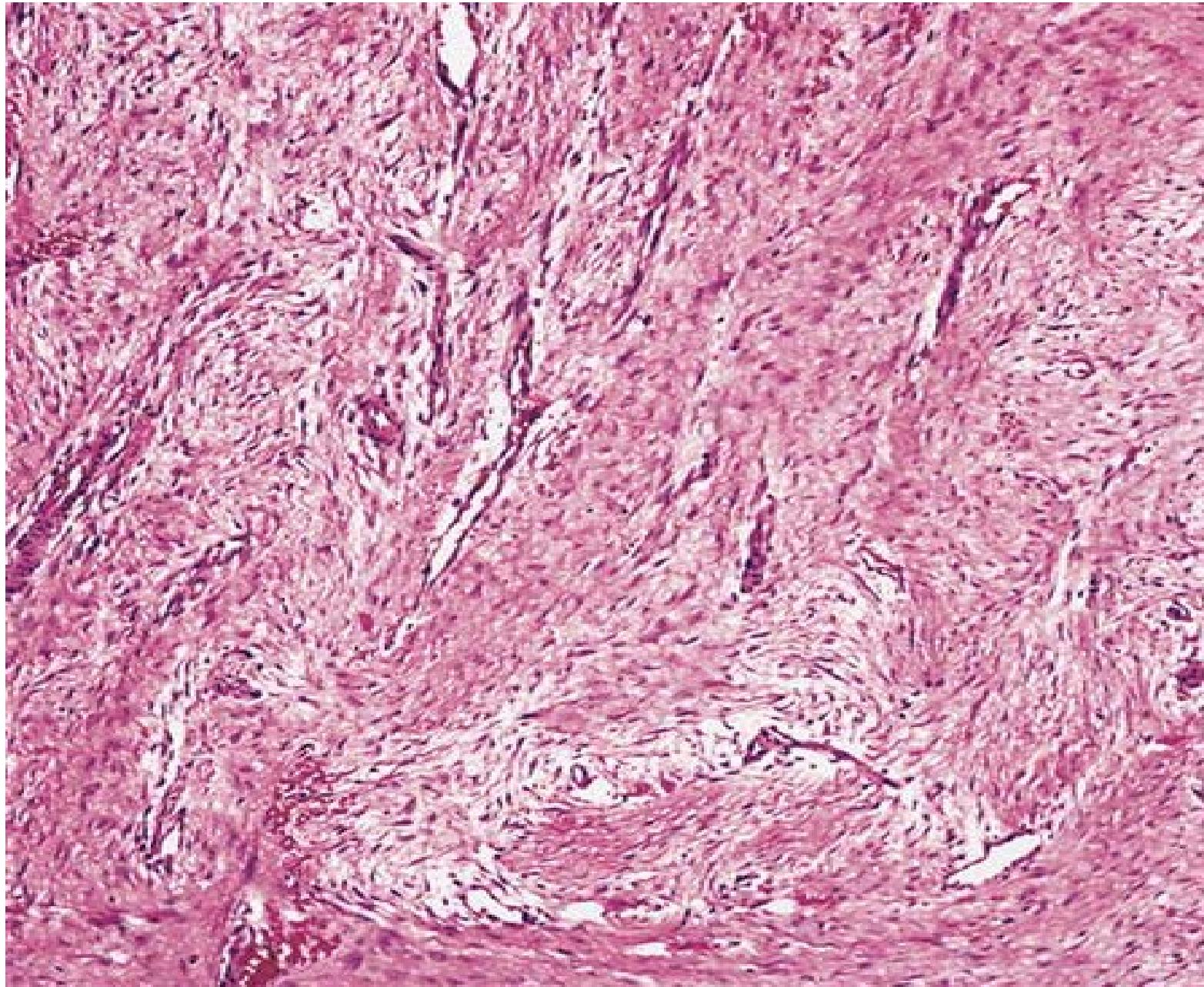




Desmoid fibromatosis

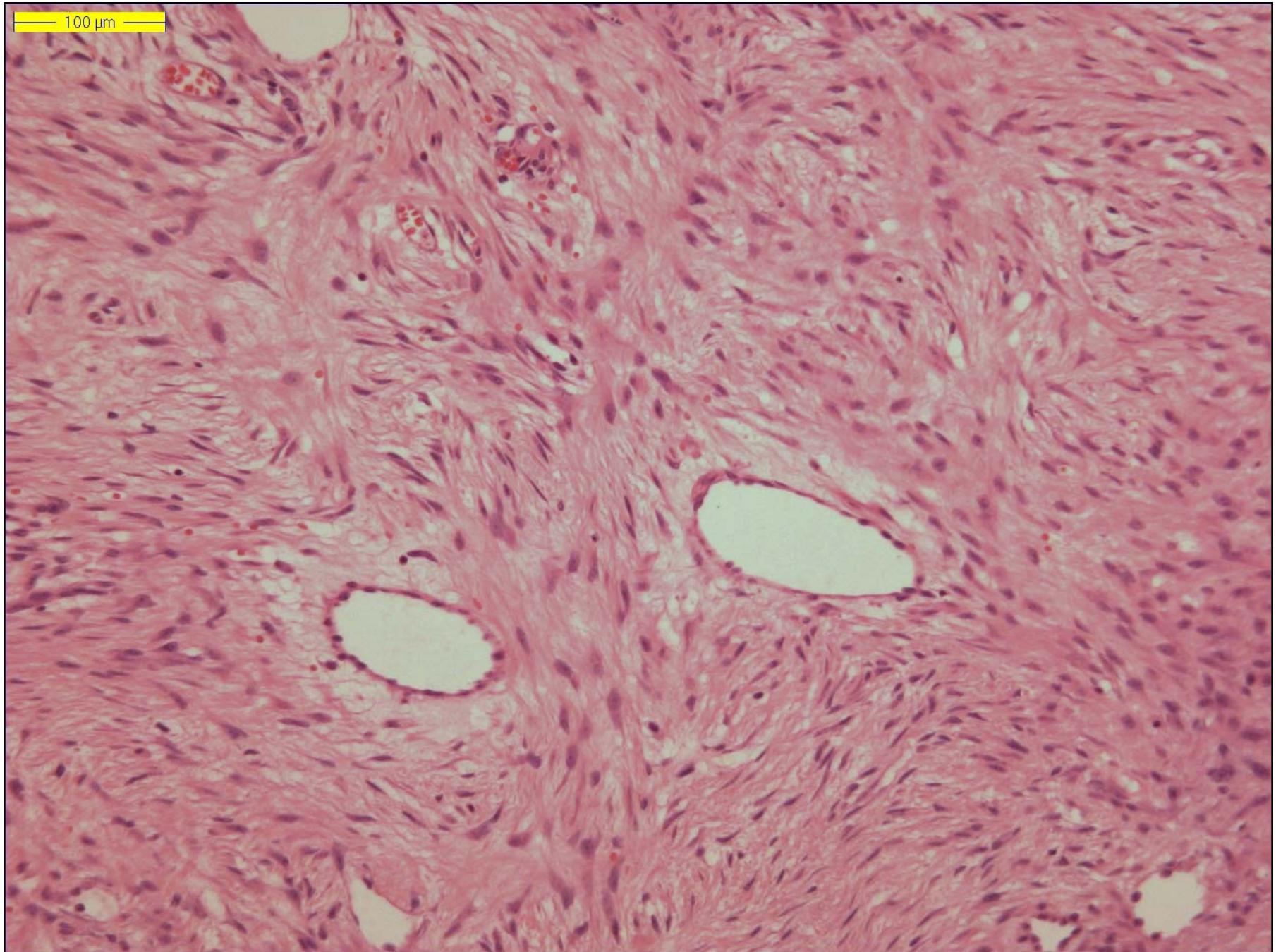
- Poorly circumscribed tumor
- Diffuse infiltration of the fat and striated muscles
- Uniform “pencil-like”spindle cells surrounded by abundant collagen (hyalinization, keloid-like areas), myxoid changes
- Long and dilated vessels
- Inflammatory infiltrate
- IHC: Beta-Catenin + (nuclear)



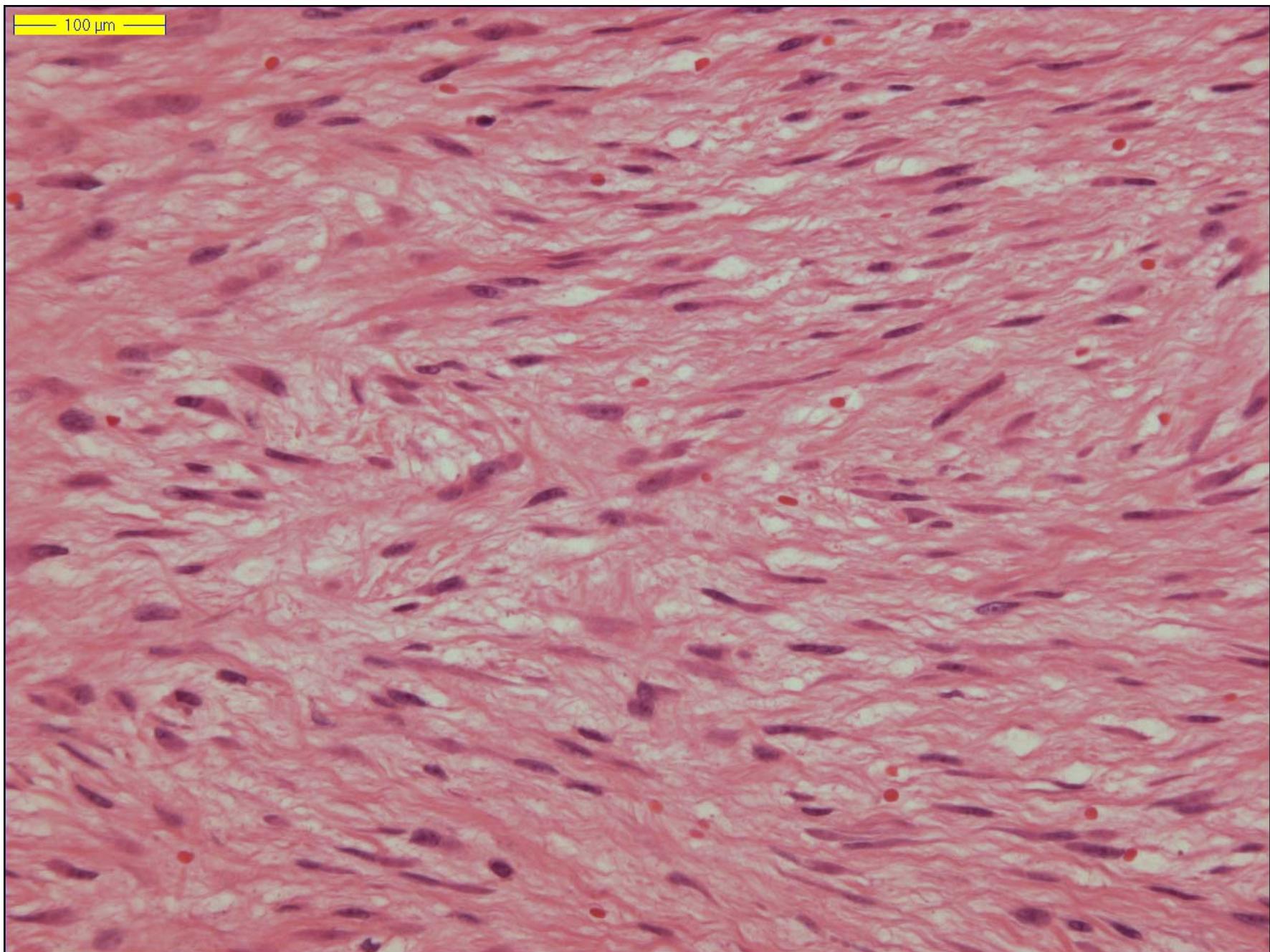


Desmoid fibromatosis

100 µm



100 µm



100 µm

Beta-catenin

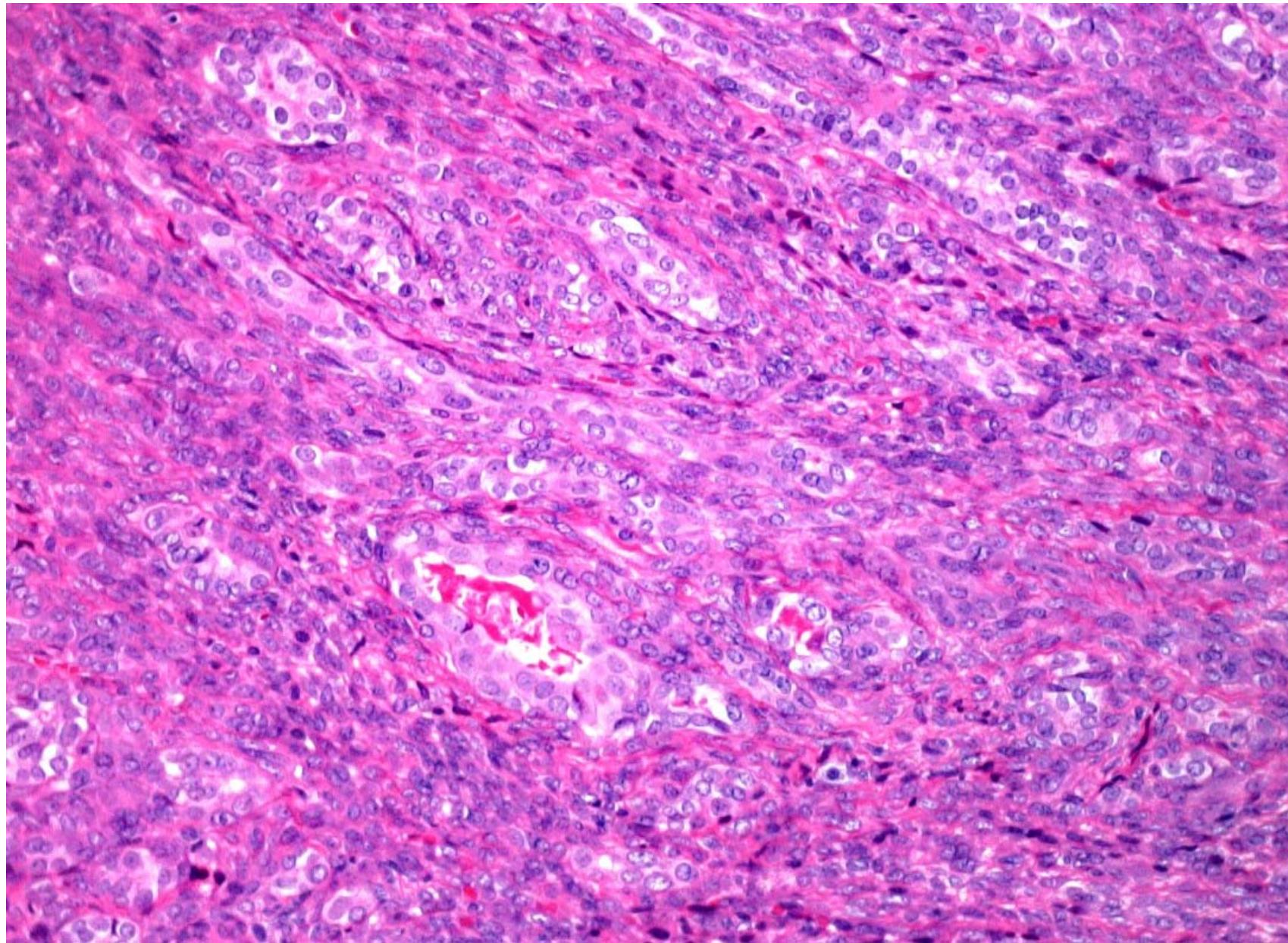
immunohistochemistry

- CD34
- S100
- CK-pan
- EMA
- SMA
- Desmin (myogenin)
- (Beta-Catenin)



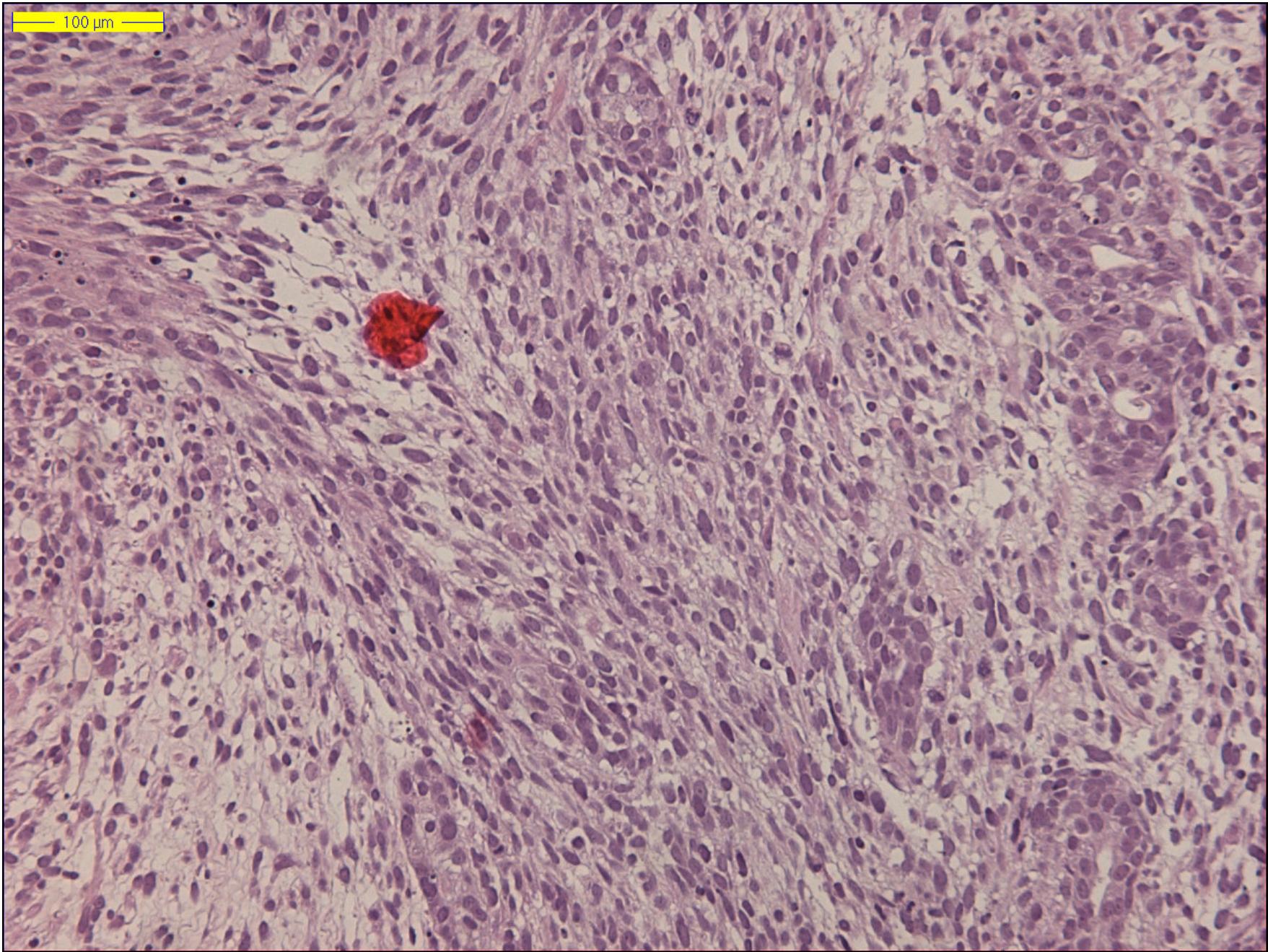
Sarcomatoid neoplasms of the pleura: epithelioid cell morphology

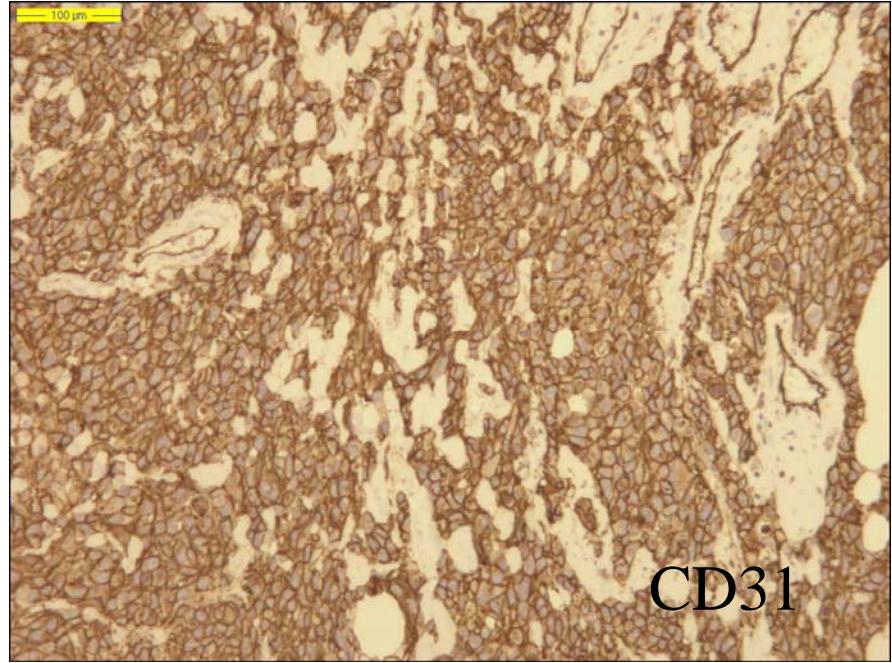
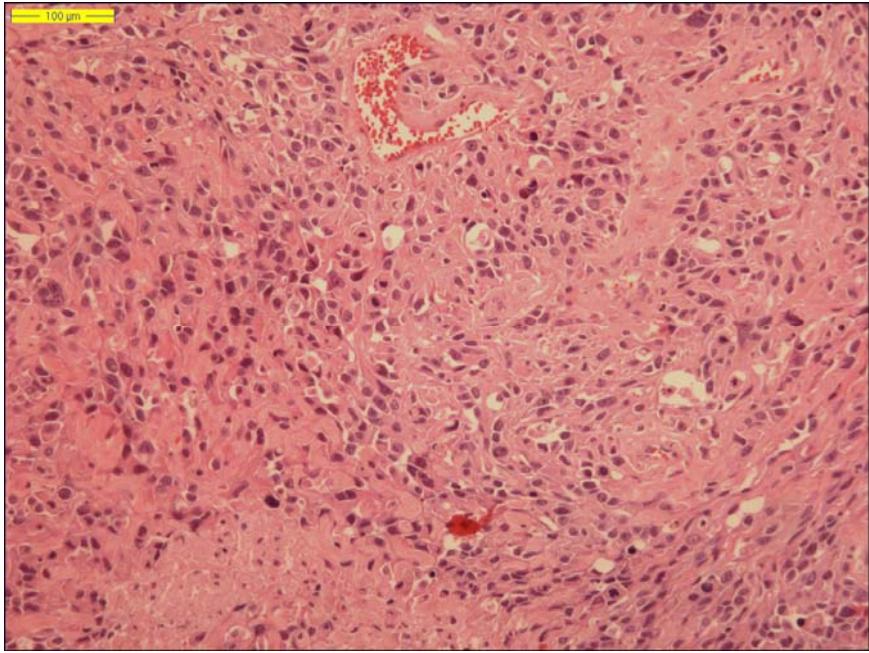
- Biphasic synovial sarcoma (EMA/ CK-pan+, t(X;18))
 - Malignant melanoma (S100, HMB45 and Melan A+)
 - Epithelioid vascular tumor (epithelioid hemangio-endothelioma, epithelioid angiosarcoma) (CD31 and CD34+) (cave CK-pan positivity in angiosarcoma!)
 - Epithelioid sarcoma (CK-pan/EMA+ and CD34+)
- rule out a carcinoma and mesothelioma!!



Biphasic synovial sarcoma

100 μ m





Epithelioid angiosarcoma