#15#

Revisiones (todas) * Reviews (all)**

Neuroendocrine tumors.

Agosto - Septiembre 2013 / August - September 2013

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[1]

TÍTULO / TITLE: - Clinicopathological characteristics and outcome of patients with small cell neuroendocrine carcinoma of the uterine cervix: case series and literature review.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Eur J Gynaecol Oncol. 2013;34(4):307-10.

AUTORES / AUTHORS: - Wang Y; Mei K; Xiang MF; Li JM; Xie RM

INSTITUCIÓN / INSTITUTION: - Department of Medical Oncology, Sichuan Cancer Hospital, Chengdu, Sichuan, China.

RESUMEN / SUMMARY: - OBJECTIVE: To analyze the clinicopathological data of 13 cases of small cell neuroendocrine carcinoma (SCNEC) of the uterine cervix who received treatment at this medical institutions over the past five years with patient survival as the primary endpoint. MATERIALS AND METHODS: The clinicopathologic data of 13 cases were reviewed. Immunohistochemistry was performed using antibodies against synaptophysin and chromogranin A and Ki-67. Survival was analyzed using the Kaplan-Meier method and log-rank tests. RESULTS: The median age of these patients was 37 years (range 21-62). Immunohistochemistry showed that the positive rate of synaptophysin and chromogranin A was 100% (13/13) and 69.23% (9/13), respectively. The median survival of patients with early-Stage I-II SCNEC of the uterine cervix (17.5 months) was significantly higher than that of patients with advanced stage SCNEC of the uterine cervix (four months) ($p < 0.05$). There was no local recurrence in all 13 patients. Five patients died of distant metastasis in less than six months.

CONCLUSION: SCNEC of the uterine cervix is a highly-malignant disease and early-stage patients showed significantly longer survival compared to late-stage patients. Early diagnosis and prompt combination treatment may improve the outcome of patients with SCNEC of the uterine cervix.

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[2]

TÍTULO / TITLE: - Successful treatment of pheochromocytoma in a patient with hemodialysis: a case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Ren Fail. 2013 Sep 2.

●● Enlace al texto completo (gratuito o de pago) 3109/0886022X.2013.828307

AUTORES / AUTHORS: - Suzuki H; Abe M; Tahira K; Ito M; Takashima H; Baba S; Okada K; Soma M

INSTITUCIÓN / INSTITUTION: - Division of Nephrology, Hypertension and Endocrinology, Department of Internal Medicine, Nihon University School of Medicine , Tokyo , Japan and.

RESUMEN / SUMMARY: - Abstract Pheochromocytoma in a patient with end-stage renal disease is considered rare. A 40-year-old man who had undergone renal transplantation in childhood and had been on hemodialysis (HD) for the last 6 years suddenly developed paroxysmal palpitations and hypertension. His plasma catecholamine (CA) level was increased and a right adrenal mass was found on magnetic resonance imaging. He was diagnosed with pheochromocytoma, and right adrenalectomy was conducted after pretreatment with CA blockade and volume expansion. The surgery was conducted safely, his symptoms resolved, and his plasma CA level decreased to the normal range. Since paroxysmal hypertension is a common symptom in patients with HD, careful attention is needed to diagnose pheochromocytoma.

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[3]

TÍTULO / TITLE: - Diagnostic role of Gallium-68 DOTATOC and Gallium-68 DOTATATE PET in patients with neuroendocrine tumors: a meta-analysis.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Acta Radiol. 2013 Aug 8.

●● Enlace al texto completo (gratuito o de pago) 1177/0284185113496679

AUTORES / AUTHORS: - Yang J; Kan Y; Ge BH; Yuan L; Li C; Zhao W

INSTITUCIÓN / INSTITUTION: - Department of Nuclear Medicine, Beijing Friendship Hospital of Capital Medical University, Beijing, PR China.

RESUMEN / SUMMARY: - BACKGROUND: Gallium-68 somatostatin receptor positron emission tomography (PET) has been used in the diagnosis of neuroendocrine tumors

(NETs). The compounds often used in molecular imaging of NETs with PET are 68Ga-DOTATOC, 68Ga-DOTATATE, and 68Ga-DOTANOC. There is varying affinity to different somatostatin receptors. PURPOSE: To systematically review and perform a meta-analysis of published data regarding the diagnostic role of 68Ga-DOTATOC and 68Ga-DOTATATE PET in the diagnosis of NETs. MATERIAL AND METHODS: A comprehensive literature search of studies published through 30 April 2013 regarding 68Ga-DOTATOC and 68Ga-DOTATATE PET in the diagnosis of NETs was performed using the PubMed/MEDLINE, Embase, and Scopus databases. Pooled sensitivity and specificity of 68Ga-DOTATOC and 68Ga-DOTATATE PET in the diagnosis of NETs were calculated. The area under the receiver-operating characteristic (ROC) curve was calculated to measure the accuracy of 68Ga-DOTATOC and 68Ga-DOTATATE PET in the diagnosis of NETs. RESULTS: Ten studies comprising 416 patients with NETs were included in this meta-analysis. The pooled sensitivity of 68Ga-DOTATOC and 68Ga-DOTATATE PET in the diagnosis of NETs calculated on a per-patient-based analysis was 93% (95% confidence interval [CI] 89-96%) and 96% (95% CI 91-99%). The pooled specificity of 68Ga-DOTATOC and 68Ga-DOTATATE PET in diagnosing NETs was 85% (95% CI 74-93%) and 100% (95% CI 82-100%). The area under the ROC curve of 68Ga-DOTATOC and 68Ga-DOTATATE PET was 0.96 and 0.98, respectively, on a per-patient-based analysis. CONCLUSION: The molecular imaging agents 68Ga-DOTATOC and 68Ga-DOTATATE demonstrated high sensitivity and specificity in the diagnosis of NETs on PET scan. Although both are accurate tools in the diagnosis of NETs, 68Ga-DOTATATE PET may be more sensitive and specific than 68Ga-DOTATOC PET scan.

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[4]

TÍTULO / TITLE: - Is laparoscopic approach for pancreatic insulinomas safe? Results of a systematic review and meta-analysis.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J Surg Res. 2013 Aug 19. pii: S0022-4804(13)00724-5. doi: 10.1016/j.jss.2013.07.051.

●● Enlace al texto completo (gratuito o de pago) 1016/j.jss.2013.07.051

AUTORES / AUTHORS: - Su AP; Ke NW; Zhang Y; Liu XB; Hu WM; Tian BL; Zhang ZD

INSTITUCIÓN / INSTITUTION: - Department of Hepatobiliopancreatic Surgery, West China Hospital, Sichuan University, Chengdu, Sichuan Province, China.

RESUMEN / SUMMARY: - BACKGROUND: No consensus exists as to whether laparoscopic treatment for pancreatic insulinomas (PIs) is safe and feasible. The aim of this meta-analysis was to assess the feasibility, safety, and potential benefits of laparoscopic approach (LA) for PIs. The abovementioned approach is also compared with open surgery. METHODS: A systematic literature search (MEDLINE, EMBASE, Cochrane Library, Science Citation Index, and Ovid journals) was performed to identify relevant articles. Articles that compare the use of LA and open approach to treat PI published

on or before April 30, 2013, were included in the meta-analysis. The evaluated end points were operative outcomes, postoperative recovery, and postoperative complications. RESULTS: Seven observational clinical studies that recruited a total of 452 patients were included. The rates of conversion from LA to open surgery ranged from 0%-41.3%. The meta-analysis revealed that LA for PIs is associated with reduced length of hospital stay (weighted mean difference, -5.64; 95% confidence interval [CI], -7.11 to -4.16; P < 0.00001). No significant difference was observed between LA and open surgery in terms of operation time (weighted mean difference, 2.57; 95% CI, -10.91 to 16.05; P = 0.71), postoperative mortality, overall morbidity (odds ratio [OR], 0.64; 95% CI, 0.35-1.17; P = 0.14], incidence of pancreatic fistula (OR, 0.86; 95% CI, 0.51-1.44; P = 0.56), and recurrence of hyperglycemia (OR, 1.81; 95% CI, 0.41-7.95; P = 0.43). CONCLUSIONS: Laparoscopic treatment for PIs is a safe and feasible approach associated with reduction in length of hospital stay and comparable rates of postoperative complications in relation with open surgery.

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[5]

TÍTULO / TITLE: - Malignant insulinoma: Recommendations for characterisation and treatment.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Ann Endocrinol (Paris). 2013 Aug 27. pii: S0003-4266(13)00107-8. doi: 10.1016/j.ando.2013.07.001.

●● Enlace al texto completo (gratuito o de pago) 1016/j.ando.2013.07.001

AUTORES / AUTHORS: - Baudin E; Caron P; Lombard-Bohas C; Tabarin A; Mitry E; Reznick Y; Taieb D; Pattou F; Goudet P; Vezzosi D; Scoazec JY; Cadiot G; Borson-Chazot F; Do Cao C

INSTITUCIÓN / INSTITUTION: - Service de medecine nucleaire et d'oncologie endocrinienne, institut Gustave-Roussy, 94800 Villejuif, France.

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[6]

TÍTULO / TITLE: - Pancreatic neuroendocrine tumor with ectopic adrenocorticotropin production: a case report and review of literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Anticancer Res. 2013 Sep;33(9):4001-5.

AUTORES / AUTHORS: - Patel FB; Khagi S; Daly KP; Lechan RM; Ummaritchot V; Saif MW

INSTITUCIÓN / INSTITUTION: - Department of Medicine and Cancer Center, Tufts Medical Center, 800 Washington Street Box 245, Boston, MA 02111, U.S.A. wsaif@tuftsmedicalcenter.org.

RESUMEN / SUMMARY: - Pancreatic neuroendocrine tumors (p-NETs) entail a vast array of tumors, which can vary from benign neoplastic growths to rapidly aggressive

malignancies. Such is the case with ectopic adrenocorticotropic hormone (ACTH)-producing p-NETs. These tumors have been found to be quite aggressive and a challenge to treat, especially due to the occurrence of metastatic disease even after resection of the primary tumor. We discuss the case of a 44-year-old female who initially presented with vague, non-specific symptoms, in which a malignant p-NET was found to be the cause of her clinical presentation. Although resection of the pancreatic mass was performed, the patient presented again with metastatic disease to the liver.

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[7]

TÍTULO / TITLE: - A merkel-cell carcinoma metastatic to the tonsil: a case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J Oral Maxillofac Surg. 2013 Oct;71(10):1812.e1-6. doi: 10.1016/j.joms.2013.06.196. Epub 2013 Aug 1.

●● Enlace al texto completo (gratuito o de pago) 1016/j.joms.2013.06.196

AUTORES / AUTHORS: - Vasileiadis I; Sofopoulos M; Arnogiannaki N; Georgopoulos S

INSTITUCIÓN / INSTITUTION: - Resident Doctor, Department of Otolaryngology/Head and Neck Surgery, Venizeleio-Pananeio General Hospital, Herakleion, Greece. Electronic address: j.vasileiadis@yahoo.gr.

RESUMEN / SUMMARY: - Metastatic tumors to the palatine tonsils are extremely rare, with nearly 100 cases reported. Only 3 cases of Merkel cell carcinoma of the skin metastasizing to the palatine tonsil have been reported. We present the interesting case of a 61-year-old man with an enlargement of the left palatine tonsil that caused a moderate narrowing of the oropharynx. Three years previously he had been treated for Merkel cell carcinoma (MCC) on skin of his left shoulder. A tonsillectomy followed by palatoplasty was performed. Immunohistochemical staining demonstrated a pronounced reaction for cytokeratin 20, chromogranin, and CD56 histodiagnostic markers. Immunohistochemical studies are useful diagnostic tools in the establishment of the diagnosis of MCC. Treatment includes wide local surgical excision of the tumor, radiotherapy, and chemotherapy. Considering the aggressiveness of MCC, an early diagnosis is critical to enable the choice of adequate therapy at an early stage.

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[8]

TÍTULO / TITLE: - Neuroendocrine carcinoma of the extrahepatic bile duct: case report and literature review.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - World J Gastroenterol. 2013 Jul 28;19(28):4616-23. doi: 10.3748/wjg.v19.i28.4616.

●● Enlace al texto completo (gratuito o de pago) 3748/wjg.v19.i28.4616

AUTORES / AUTHORS: - Sasatomi E; Nalesnik MA; Marsh JW

INSTITUCIÓN / INSTITUTION: - Department of Pathology, University of Pittsburgh Medical Center, Pittsburgh, PA 15213, United States. sasatomie@upmc.edu

RESUMEN / SUMMARY: - Neuroendocrine carcinoma (NEC) of the extrahepatic bile duct is rare, and only 22 cases have been reported. Only two of these were large-cell NEC (LCNEC); the vast majority were small-cell NEC. Here, we report a third case of LCNEC of the extrahepatic bile duct. A 76-year-old male presented to a local hospital with painless jaundice. Imaging studies revealed a tumor at the hepatic hilum. The patient underwent right hepatic lobectomy, bile duct resection, and cholecystectomy. The resection specimen showed a 5.0-cm invasive neoplasm involving the hilar bile ducts and surrounding soft tissue. Histologically, the tumor consisted of nests of medium to large cells with little intervening stroma. The tumor invaded a large portal vein branch. All four excised lymph nodes were positive for metastasis, and metastatic deposits were also present in the gallbladder wall. The tumor was diffusely positive for synaptophysin and focally positive for chromogranin A. Approximately 70%-80% of the tumor cells were positive for Ki-67, indicating strong proliferative activity. A diagnosis of LCNEC was made. A few bile ducts within and adjacent to the invasive tumor showed dysplasia of the intestinal phenotype and were focally positive for synaptophysin and chromogranin A, suggesting that the dysplastic intestinal-type epithelium played a precursor role in this case. A postoperative computer tomography scan revealed rapid enlargement of the abdominal and retroperitoneal lymph nodes. The patient died 21 d after the operation. NEC of the bile duct is an aggressive neoplasm, and its biological characteristics remain to be better defined.

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[9]

TÍTULO / TITLE: - Large cell neuroendocrine carcinoma of the submandibular gland: Case report and literature review.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Auris Nasus Larynx. 2013 Aug 13. pii: S0385-8146(13)00158-2. doi: 10.1016/j.anl.2013.07.010.

●● Enlace al texto completo (gratuito o de pago) 1016/j.anl.2013.07.010

AUTORES / AUTHORS: - Yamamoto N; Minami S; Kidoguchi M; Shindo A; Tokumaru Y; Fujii M

INSTITUCIÓN / INSTITUTION: - Department of Otolaryngology, National Tokyo Medical Center, Japan. Electronic address: nobukoy@a2.keio.jp.

RESUMEN / SUMMARY: - Large cell neuroendocrine carcinoma (LCNEC) of the salivary gland is extremely rare. We report on a case of LCNEC in the submandibular gland. A 58-year-old male had a four-month history of an enlarging mass in his left submandibular region. He underwent lymph node resection and metastasis of LCNEC was suspected. Magnetic resonance imaging of the neck showed a solid submandibular

gland tumor with marginal blurring. Positron-emission tomography and upper gastrointestinal endoscopy showed no evidence of malignancy other than in the left submandibular gland. He underwent left submandibular gland resection and left upper neck dissection. The final diagnosis was LCNEC of the submandibular gland; surgical margin was negative. Fourteen months later he is free of tumors. This is the first report of LCNEC of the submandibular gland. LCNEC of the salivary gland shows high-grade malignancy like that of the lung. According to past reports, two of four patients died despite multidisciplinary treatments. There are no standard treatments for LCNEC of the salivary glands. More studies are needed to define prognostic factors and establish therapeutic methods.

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[10]

TÍTULO / TITLE: - Giant merkel cell carcinoma of the lower limb: case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J Cutan Med Surg. 2013 Oct 1;17(5):351-5.

AUTORES / AUTHORS: - Marchesi A; Camillo Parodi P; Brioschi M; Sileo G; Marchesi M; Vaienti L

RESUMEN / SUMMARY: - Background:Merkel cell carcinoma (MCC) is a rare cutaneous neuroendocrine malignancy that usually grows rapidly at the head and neck. Giant forms at the lower limbs are rarely reported and usually affect patients in the eighth decade or older.Methods:We report the case of a 60-year-old man who presented with a giant MCC on his right thigh. We managed this case by applying the 2012 updated guidelines and reviewed all cases of giant MCC of the lower limbs reported in the literature.Results:At the 4-month follow-up, the patient showed complete remission.Conclusion:Giant forms of MCC are still treated as typical cases of MCC, when these patients show a very poor prognosis. In young and adult people, such as our case, wide surgical excisions, sentinel lymph node biopsy in clinically negative node cases, radiotherapy of the regional drain area, and a strict follow-up should be routinely performed to improve patients' survival.

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[11]

TÍTULO / TITLE: - Giant neurilemmoma of the vagus nerve: a case report and review of literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J Indian Med Assoc. 2012 Dec;110(12):926-8.

AUTORES / AUTHORS: - Dhull AK; Kaushal V; Atri R; Dhankhar R; Kataria SP

INSTITUCIÓN / INSTITUTION: - Department of Radiation Oncology, PGIMS, Rohtak 124001.

RESUMEN / SUMMARY: - Cervical vagal neurilemmomas are rare, usually asymptomatic, slow-growing tumours and defined as a benign, encapsulated neoplasm that arises in the nerve fibre. Magnetic resonant imaging (MRI) plays a central role in diagnosing vagal nerve neoplasm and in fact, provides important pre-operative information useful in planning optimal surgical treatment. A rare case of giant neurilemmoma is presented with a large swelling in the right side of the neck associated with breathlessness and paroxysmal cough. X-ray chest revealed large homogenous opacity in apical area of the right lung extending into the lower neck. MRI revealed a large 6 x 8 x 13 cm soft tissue, well defined mass with lobulated contours on the right side of the neck. The mass was pushing sternomastoid muscle anteriorly and carotid artery was pushed anteromedially. The mass was abutting the brachial plexus and compressing internal jugular vein. The mass was extending into the mediastinum up to the level of carina. The mass was also pushing the vessels in superior mediastinum towards left and was compressing the veins. Tumour was extending posterior to trachea and pushing trachea anteriorly and towards left and also compressing it. There was also erosion of adjacent anterior aspect of the right upper ribs. Subclavian artery was also encased by the mass. Multiple enlarged lymph nodes were seen in right cervical area. A provisional diagnosis of malignant schwannoma of right vagus nerve was made. Cytology from the fine needle aspirate of the right lower Cervical region of the swelling revealed features of neurilemmoma. Complete surgical resection is the treatment of choice with excellent prognosis, as the tumour was benign, and recurrence is nearly unknown, so it is possible and indeed recommended to preserve nerve integrity with careful dissection.

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[12]

TÍTULO / TITLE: - Pheochromocytoma - review and biochemical workup.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - S D Med. 2013 Jul;66(7):267, 269-70.

AUTORES / AUTHORS: - Miller RA; Ohrt DW

INSTITUCIÓN / INSTITUTION: - Sanford School of Medicine, University of South Dakota, USA.

RESUMEN / SUMMARY: - A commonly received question in the clinical laboratory is as follows: what is the best test for pheochromocytoma? A widely variable presentation and potentially catastrophic consequence make this a feared neoplasm despite its infrequent encounter. Because various biochemical testing modalities are available, test selection is often confusing. This selection process can be made easier through a better understanding of catecholamine producing neoplasms. The aim of this article is to provide a review of catecholamine producing neoplasms and give recommendations on appropriate test selection.

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[13]

TÍTULO / TITLE: - Misdiagnosed case of bronchial carcinoid presenting with refractory dyspnoea and wheeze: a rare case report and review of literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Malays J Med Sci. 2013 May;20(3):78-82.

AUTORES / AUTHORS: - Santra A; Dutta P; Pothal S; Manjhi R

INSTITUCIÓN / INSTITUTION: - Department of Pulmonary Medicine, Veer Surendra Sai Medical College and Hospital, P.O. +P.S. Burla, Odisha, India, Pin-768017.

RESUMEN / SUMMARY: - A 59-year-old male smoker presented with persistent wheezing and occasional coughing that had been ongoing for two years and had been unsuccessfully treated with an inhalational beta2 agonist, an anticholinergic and an inhalational steroid in the last year. On clinical examination, a left-sided wheeze was detected. The initial chest X-ray was normal. A computed tomography (CT) scan of thorax demonstrated a mass lesion in the left main bronchus. On subsequent bronchoscopy, an endobronchial polypoid mass was detected in the left main bronchus, completely occluding the bronchial lumen. A biopsy taken from the mass revealed features of bronchial carcinoid. Bronchial carcinoid can present uncommonly with wheezes, resulting in misdiagnosis as bronchial asthma or chronic obstructive pulmonary disease (COPD). If an asthma or COPD patient does not respond to conventional therapy, a CT scan and subsequent bronchoscopy is warranted.

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[14]

TÍTULO / TITLE: - Primary carcinoid tumour of the kidney: a review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Adv Urol. 2013;2013:579396. doi: 10.1155/2013/579396. Epub 2013 Aug 13.

●● Enlace al texto completo (gratuito o de pago) 1155/2013/579396

AUTORES / AUTHORS: - Omiyale AO; Venyo AK

INSTITUCIÓN / INSTITUTION: - Department of ENT Surgery, North Manchester General Hospital, Delaunays Road, Manchester, UK.

RESUMEN / SUMMARY: - Context. Primary renal carcinoid tumours are rare. Their pathogenesis is unknown and the clinical presentation is similar to other renal tumours thus posing diagnostic dilemmas for clinicians. Objectives. To review the literature for case reports of primary renal carcinoids. Methods. Literature was extensively searched for case reports for primary renal carcinoids. Reports of metastatic carcinoids to the kidneys were excluded. Results. Approximately less than 90 cases of primary carcinoid tumours of the kidney have been reported in the literature. A total of 29 cases of primary renal carcinoids were reviewed. The mean age of presentation was 48 years (range 29-75) with both right kidney (48.3%) and left kidney (44.8%) being equally affected. 28.6% of the cases reviewed were diagnosed as an incidental finding. The mean followup time was 20 months with 73.1% of patients

without evidence of disease after surgical treatment (radical or partial nephrectomy). Primary carcinoid tumours of the kidney are often well differentiated tumours. They are often misdiagnosed because of their rarity and similar presentation with other renal tumours. Conclusions. Primary carcinoid tumours of the kidney are rare tumours with an indolent course with frequent metastasis. Metastatic work up and followup is required in their management.

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[15]

TÍTULO / TITLE: - Gangliocytic paraganglioma of the appendix with features suggestive of malignancy, a rare case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Int J Clin Exp Pathol. 2013 Aug 15;6(9):1948-52.

AUTORES / AUTHORS: - Abdelbaqi MQ; Tahmasbi M; Ghayouri M

INSTITUCIÓN / INSTITUTION: - Department of Anatomic Pathology, H. Lee Moffitt Cancer Center and Research Institution Tampa, Florida ; Department of Pathology and Cell Biology, University of South Florida Tampa, Florida, USA.

RESUMEN / SUMMARY: - We report a case of appendicial paraganglioma in a 40 year old female who presented with acute appendicitis and underwent laparoscopic appendectomy. To the best of our knowledge this is the first reported case of appendicial gangliocytic paraganglioma with features suggestive of malignancy in the modern literature. Van Eeden S. et al. reported the first case of appendicial paraganglioma in a 47 year old man who also presented with acute appendicitis. The appendectomy specimen showed a distended appendix with thickened wall, and a 1.3 cm mucosal based yellow lesion. Microscopically this lesion was centered in the submucosa and consisted of three different cell types: (a) epithelioid cells with pale eosinophilic finely granular cytoplasm containing bland oval nucleus with stippled chromatin, that form solid nests lying in a trabecular pattern and in formations reminiscent of 'Zellballen' as seen in paragangliomas (b) second type cells have large vesicular nuclei with prominent nucleoli and abundant cytoplasm that are scattered singly, (c) third type cells with bland elongated nuclei form broad fascicle and envelop the epithelioid and ganglion cells. Immunohistochemical analysis showed the epithelioid cell nests immunoreactive for synaptophysin and the ganglion-like cells and spindle Schwann cells to be immunoreactive for S100 protein, whereas all three cells populations were negative for CAM5.2 and Pancytokeratin. We do believe that an accurate diagnosis of Gangliocytic paraganglioma (GP) of the appendix was rendered, detailed microscopic examination of doubled hematoxylin and eosinophil stained sections as well as the immunohistochemical phenotype of the three components have been undertaken to confirm the diagnosis of GP.

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[16]

TÍTULO / TITLE: - Hepatic pseudocystic metastasis of well-differentiated ileal neuroendocrine tumor: a case report with review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Diagn Pathol. 2013 Sep 13;8(1):148.

●● Enlace al texto completo (gratuito o de pago) 1186/1746-1596-8-148

AUTORES / AUTHORS: - Fiori S; Del Gobbo A; Gaudioso G; Caccamo L; Massironi S; Cavalcoli F; Bosari S; Ferrero S

RESUMEN / SUMMARY: - Imaging appearance of cyst-like changes is most frequently described in primary neuroendocrine lesions, especially pancreatic NETs.The imaging finding of a pseudocystic lesion of the liver puts in differential diagnosis many pathologies such as infectious diseases, simple biliary cysts up to biliary cystadenomas and eventually to primary or metastatic malignancies.Primary or metastatic hepatic malignancies with pseudocystic aspects are rare, and a pseudocystic aspect is reported only after neo-adjuvant treatment.Liver metastasis of untreated neuroendocrine tumors are usually solid and, to our knowledge, only two cases of neuroendocrine cystic hepatic metastases of ileal atypical carcinoids have been reported so far.We present a case of a 67 years old man with synchronous finding of an untreated hepatic pseudocystic lesion and an ileal mass histologically diagnosed as a well differentiated (G1) neuroendocrine tumor.Virtual slides: The virtual slides for this article can be found here: diagnosticpathology.diagnomx.eu/vs/1443883503102967.

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[17]

TÍTULO / TITLE: - Hypercortisolaemia due to ectopic adrenocorticotropic hormone secretion by a nasal paraganglioma: a case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - BMC Res Notes. 2013 Aug 19;6:331. doi: 10.1186/1756-0500-6-331.

●● Enlace al texto completo (gratuito o de pago) 1186/1756-0500-6-331

AUTORES / AUTHORS: - Thomas T; Zender S; Terkamp C; Jaeckel E; Manns MP

INSTITUCIÓN / INSTITUTION: - Department of Gastroenterology, Hepatology and Endocrinology, Hannover Medical School, Hannover, Germany. thomas.theodoros@mh-hannover.de

RESUMEN / SUMMARY: - BACKGROUND: Adrenocorticotropic hormone-producing extraadrenal paragangliomas are extremely rare. We present a case of severe hypercortisolemia due to ectopic adrenocorticotropic hormone secretion by a nasal paraganglioma. CASE PRESENTATION: A 70-year-old Caucasian woman, was emergently admitted to our department with supraventricular tachycardia, oedema of face and extremities and hypertensive crisis. Initial laboratory evaluation revealed severe hypokalemia and hyperglycemia without ketoacidosis, although no diabetes mellitus was previously known. Computed tomography revealed a large tumor obliterating the left paranasal sinus and a left-sided adrenal mass. After cardiovascular

stabilisation, a thorough hormonal assessment was performed revealing marked adrenocorticotropic hormone-dependent hypercortisolism. Due to the presence of a cardiac pacemaker magnetic resonance imaging of the hypophysis was not possible. [68Ga-DOTA]-TATE-Positron-Emission-Tomography was performed, showing somatostatin-receptor expression of the paranasal lesion but not of the adrenal lesion or the hypophysis. The paranasal tumor was resected and found to be an adrenocorticotropic hormone-producing paraganglioma of low-proliferative rate. Postoperatively the patient became normokaliaemic, normoglycemic and normotensive without further need for medication. Genetic testing showed no mutation of the succinatdehydrogenase subunit B- and D genes, thus excluding hereditary paragangliosis. CONCLUSION: Detection of the adrenocorticotropic hormone source in Cushing's syndrome can prove extremely challenging, especially when commonly used imaging modalities are unavailable or inconclusive. The present case was further complicated by the simultaneous detection of two tumorous lesions of initially unclear biochemical behaviour. In such cases, novel diagnostic tools - such as somatostatin-receptor imaging - can prove useful in localising hormonally active neuroendocrine tissue. The clinical aspects of the case are discussed and relevant literature is reviewed.
