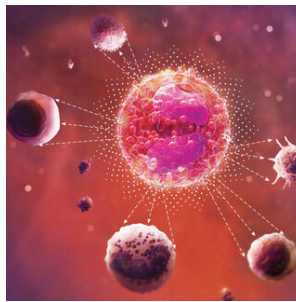
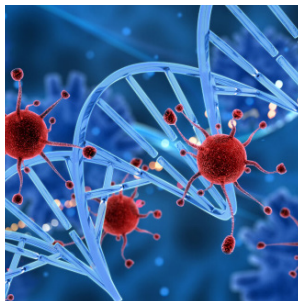
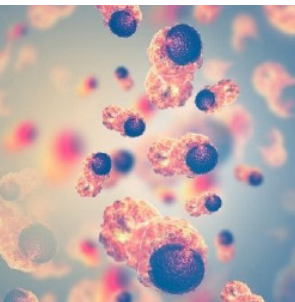

Scientific Tracks & Sessions

October 17, 2022

Surgical Pathology 2022



4th WORLD CONGRESS ON
SURGICAL PATHOLOGY AND
ONCOLOGY RESEARCH

OCTOBER 17, 2022 | WEBINAR

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Cancer biology research autopsy

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National University of Buenos Aires, Argentina

Research autopsies are increasingly being used to investigate the physiopathology mechanisms of Cancer Evolution, metastases and tumour therapies resistance. It is a post-mortem procedure performed on a deceased subject with the primary goal of collecting tissue to support basic and translational research. It is noteworthy, the advantages of using post-mortem tissues over other types of biospecimens, including the large amounts of tissue that can be obtained and the extent of multiregional sampling that is achievable, which is not otherwise possible in living patients. Research autopsy has supported the identification of the clonal origins and modes of spread among metastases and helped in the creation of rare tissue banks and patient-derived model systems. This type of research will be in the future, a cutting-edge procedure and

be part of Precision Medicine.

References

1. Irinotecan, between Journeys and Stories
2. Metastases its Biologics and Impact in Internal Medicine
3. Cancer, with the Mirror on the Past

Biography

Daniel Gandia is a clinical oncologist & medical scientist. He did his postgraduate residency training in internal medicine and clinical oncology in buenos aires, completing his Oncology fellowship program as chief of residents at the university of buenos aires cancer institute.

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Ascending colon stenosis caused by repeated diverticulitis that clinically mimicked advanced colon cancer

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Introduction: We experienced a rare case of right-sided large bowel obstruction (LBO) of the colon caused by chronic diverticulitis, which was challenging to diagnose.

A young male was admitted to our department with a fever, diarrhoea and right-sided lateral abdominal pain for several days. CT showed a thickened ascending colon wall with stenosis and adjacent retroperitoneal inflammation without marked diverticula. The next day, he developed severe abdominal pain and perforation was suspected. We chose the “interval definitive surgery”; at that time, intestinal decompression and laparoscopic drainage. Colonoscopy showed an edematous membrane, but no cancerous lesions or diverticula. Hemi-colectomy was performed after 10 days' nutritional therapy. No postoperative complication occurred. The histopathology showed that the pathogenesis was chronic diverticulitis.

Discussion: There have been few reported cases of right-sided

LBO caused by diverticulitis, but it is important to be aware that benign disease, such as chronic diverticulitis, can cause LBO. Initial conservative therapy and nutritional therapy produced a correct diagnosis and good outcomes.

References

1. Two cases of splenic neoplasms with differing imaging findings that required laparoscopic resection for a definitive diagnosis.
2. The first case of POEMS syndrome with synchronous breast cancer: What are the associated diagnostic challenges?

Biography

Shogo Yoshida is the medical student at Kochi Medical School (KMS), Kochi University (Kochi, Japan). Yoshida gained the first degree in physics at the Ibaraki University (Ibaraki, Japan). After that, he entered KMS in 2017 for second degree in Medicine. Now he is studying under Dr. Kazuhiro Hiyama, the director of Surgery at Atago Hospital.

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PDL1 has cell autonomous functions in mesothelioma and its targeting might be effective beyond its role in the antitumoral immune response

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⁶Temple University, Pennsylvania

Malignant pleural mesothelioma is an aggressive cancer caused by asbestos exposure. All three main histotypes of mesothelioma, including the epithelioid, sarcomatoid and biphasic, have a poor prognosis — often less than two years from diagnosis — despite multimodal therapy, consisting of chemotherapy, surgery (when possible) and radiotherapy. Recently, immunotherapy has been proposed for the first line treatment of pleural mesothelioma. However, in a comparative effectiveness study of the three main randomized clinical trials since 2003, defining first line treatment of pleural mesothelioma, we showed that selection criteria, fragility and censoring patterns of the trials may affect the original conclusions and the proposed nivolumab plus ipilimumab combination does not seem to provide significant improvements (1).

Various precision immunotherapy approaches are directed against the immune checkpoint protein PDL1. We previously showed that in mesothelioma PDL1 is highly expressed, probably as a consequence of a deregulated p53 pathway, which fails to trigger the expression of various microRNAs targeting PDL1 such as mir320a and mir34 (2). We then investigated whether PDL1 could also exert cell autonomous functions beyond its role in the immune checkpoint. Indeed, we found that silencing PDL1 in mesothelioma cell lines reduces cell growth, colony formation, migration rate and the ability to form spheres. Stem cell markers are also consistently reduced upon shRNA-mediated PDL1 silencing. Also, we found that PDL1 is anticorrelated with mir145, another p53 regulated microRNA. Overall, our data reinforce the idea that reactivating p53 potential could be a feasible strategy against

mesothelioma (3) and suggest that targeting PDL1 could decrease mesothelioma malignant features independently of the immune response.

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Biography

Francesca Pentimalli is associate professor of general pathology at the department of medicine & surgery of LUM University, Casamassima, BA, Italy. She obtained her MSc degree in biological sciences and PhD in molecular and cellular genetics at the university of Naples Federico II, Italy, where she also completed the specialization programme in clinical pathology and clinical biochemistry. She authored/co-authored over a hundred peer-review articles in the field of cancer genetics and therapeutics.

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Intestinal ischemia caused by idiopathic mesenteric hematoma: A case report

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The patient was a man in his 80s. He presented to our out-patient department with lower abdominal pain and melena. After a thorough examination, strangulated small bowel obstruction was suspected. There was no history of trauma. He had a surgical history of rectal cancer (laparotomy-22 years earlier), chronic atrial fibrillation and gout. The abdomen was distended and tenderness was observed in the lower abdomen. Laboratory tests showed a mildly elevated inflammatory response and remarkably, PT-INR (28.4) was seriously prolonged. A CT scan of the abdomen revealed ascites effusion, edematous changes in the small intestinal wall and increased mesenteric density, which suggested a hematologic origin. The patient was diagnosed with strangulated small bowel obstruction and emergency surgery was performed. Vitamin K and fresh-frozen plasma were administered preoperatively and the patient underwent laparoscopic surgery.

A hematoma and bloody ascites filled the abdominal cavity and adhesions of the large and small intestine were observed. The adhesive small intestine showed an anaemic change that suggested ischemia and a large hematoma was observed in the pathologic mesentery. After adhesion lysis, the ischemic small intestine was resected and anastomosed. The patient had no serious postoperative complications except for Grade 1 pseudomembranous enteritis and he was discharged on

the 24th postoperative day. Histopathological, the resected specimen showed an intra-mesenteric hematoma and ischemic changes in the perfusion area. Histological examination revealed stasis and haemorrhage from the submucosa to the serosal membrane adhesions. Based on the above, we made a final diagnosis of intestinal ischemia caused by an idiopathic mesenteric hematoma. Retrospectively, the patient was on warfarin for chronic atrial fibrillation and bucolome was added 3 weeks before surgery. Bucolome competitively inhibits cytochrome P450 (CYP)2C9, slowing catabolism of warfarin. Frequent monitoring is recommended when using drugs that potentiate warfarin effects.

Recent Publications

1. Gomez D, Rahman SH, Guillou PJ: Spontaneous mesenteric haematoma: a diagnostic challenge.
2. Yaryura Montero JG, Petersen ML: Spontaneous mesenteric hematoma associated to warfarin with surgical resolution. Rev Fac Cien Med Univ Nac Cordoba

Biography

Taichi Mori obtained his M.D. at Asahikawa Medical University. After that he started surgical residency in Jyuzen Hospital and Atago Hospital.

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A Rare case of bilateral Scrotal swelling – Paratesticular leiomyoma

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The paratesticular region consists of the spermatic cord epididymis vestigial remnants and tunica vaginalis. The vast majority of paratesticular lesions are benign like cystic lesion of the epididymis. (cyst, spermatocytes), Scrotal fluid collection (hydroceles pyoceles) inflammatory lesion (acute and chronic epididymitis), or hernias.

Leiomyoma of the urinary and male genital tract is extremely rare. It is benign soft tissue tumor that can arise from almost Any site within the genitourinary tract containing smooth muscles. A 68 years old gentlemen presented slow growing bilateral Scrotal swelling of 2 years' duration. Clinical examination revealed firm non tender mass palpable separately from testis around 5x4cm in size in right scrotum and around 4x3cm mass in left scrotum. Leiomyoma are benign often bulky tumour that are derived embryologically from mesenchymal cells. Leiomyoma are usually well circumscribed and are surrounded by a gray white fibrous capsule. Cut surface

shows bulges and exhibits whorled pattern. Histologically the tumour consists of smooth muscles cells arranged in interlacing bundles with varying mixture of fibrous often hyalinised connecting tissue.

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Biography

Mrinal Singh Chandrasen has completed his MBBS at the age of 25 years from Pt. Ravi Shankar Shukla University, Raipur, India. He is presently pursuing M.D pathology in SSIMS medical college India. He is member of IAPM.

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