

Keynote Forum May 08, 2023

Surgical Pathology 2023



5th World Congress on

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Rani Kanthan University of Saskatchewan, Saskatoon, Saskatchewan, Canada

Gall bladder lesions: The expected and the unexpected

Removal of the gallbladder is usually a simple uncomplicated procedure done laparoscopically commonly for pain (biliary colic) with or without stones within the gallbladder. This is the commonest surgical pathology specimen in the laboratory and on pathological examination usually reveals the presence of acute or chronic inflammatory changes related to the calculi. Occasionally, the gallbladder is removed due to the radiological image finding of a mass lesion in the gall bladder. Such lesions can be the expected lesions of an exaggerated adenomyomatous type hyperplasia or some unexpected finding of a biliary related mass such an epithelial polyp that may be benign or malignant. Adenomyomatous hyperplasia with florid cystic hyperplastic Rokitansky sinuses mimicking a neoplasm will be discussed.

Unusual causes of gallbladder polyp - such as a tubulopapillary neoplasm will be shared. This is an uncommon tumor that is characterized by a dominant tubulopapillary growth pattern with distinct clinic pathological and immunohistochemically features. Accurate histological identification of these tumors is the cornerstone to determine appropriate treatment strategies as they have an overall favorable outcome even in the presence of associated invasive carcinoma. Details regarding their immunohistochemical properties together with their molecular profile will be deliberated. Complete evaluation of the gall bladder will be discussed in this context with the evaluation for biliary intraepithelial neoplasia which could be focal or multifocal. The oncological progression to carcinoma will be explored in their pathological context. Many cases of gall bladder carcinoma are usually discovered in the late advanced stage of their disease. This session will conclude with the clinical discussion of prototype cases of gall bladder carcinoma with an emphasis of techniques and tips for improved surgical pathology practice including patient education strategies for improved outcomes when these unexpected lesions are encountered.

Recent Publication

1. Retinoid receptors are expressed in mouse and human lungs, DOI: 10.1002/ar.24921

2. Pneumatosis cystoides intestinalis and hyperganglionosis -Cause or Effect? A review, DOI: 10.1016/j.prp.2020.152879

3.Non-Traumatic Rupture of Splenic Metastases as the First Presentation of Clinically Occult Disseminated Primary Lung Cancer, DOI: 10.47829/AJSCCR.2020.2402

Biography

Rani Kanthan is a consultant Anatomical pathologist in the Dept. of Pathology and Laboratory Medicine at the University of Saskatchewan with a focused interest in surgical oncology including breast and gastrointestinal tract. She has published 135 peer reviewed manuscripts that are indexed in PubMed /Google scholar and serves as an editorial board member in various journals. She is an active medical educator and continues to participate and present at various national and international meetings with more than 150 conference abstract presentations to her credit.

rani.kanthan@saskhealthauthority.ca



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Selliah Kanthan

University of Saskatchewan, Saskatoon, Saskatchewan, Canada

Anal Canal -The orphaned lesions -A Surgical Oncological perspective

The distal end of the gastrointestinal tract -the anal canal often gets overlooked and lives under the shadow of colorectal carcinoma which remains the third most common cancer worldwide. Despite advanced diagnostics and therapeutics, accurate recognition of anal canal lesions both clinically and pathologically is fraught with difficulty and remains a diagnostic challenge due to their uncommon yet often complicated clinical presentations. This is further compounded due to the complex anatomy of this region wherein two mucosal surfaces meet to form the anus externally which is predominantly subject to skin related lesions while the inner anal canal gives rise to unusual pathological neoplasms.

This orphaned region of the gastrointestinal tract has many benign lesions including hemorrhoids [piles], fissures and fistulae that are well known as these are often extremely painful lesions. Through a series of clinical cases uncommon and unusual surgical aspects of these cases will be discussed together with their diagnostic pitfalls. Paget's disease of the anus will be discussed from its historical perspectives to our current understanding of this uncommon disease. This will then be followed by a journey through the neoplastic lesions of the anal canal with special references to the unusual anal adenocarcinomas and the unique subset of signet ring cell adenocarcinoma. These lesions are often discovered at a late stage as advanced disease as they are relatively asymptomatic and clinically silent in the early stage of the disease. Current proposed oncological management of these lesions under the umbrella of multidisciplinary tumor board rounds and its usefulness will be discussed. This session will conclude with clinical discussion of prototype cases with an emphasis of techniques and tips for improved surgical practice including patient education strategies for improved outcomes of these unique orphaned lesions.

Recent Publication

1. Hyperganglionosis in Pneumatosis Cystoides Intestinalis- A Clinicopathological Review in Adults, DOI:10.33425/2639-9334.1053

2. Mixed epithelial endocrine neoplasms of the colon and rectum – An evolution over time: A systematic review, DOI: 10.3748/wjg.v26.i34.5181

3. Pneumatosis cystoides intestinalis and hyperganglionosis -Cause or Effect? A review, DOI: 10.1016/j.prp.2020.152879

Biography

Selliah Kanthan is a Professor in the Division of General Surgery at the University of Saskatchewan. He is a general surgery consultant with a focused interest in colorectal surgery. He has published more than 80 peer-reviewed manuscripts that are indexed in PubMed /Google scholar and serves as an editorial board member in various journals. He is an active clinician teacher and continues to participate and present at various national and international meetings with more than 125 conference abstract presentations to his credi.

s.kanthan@usask.ca