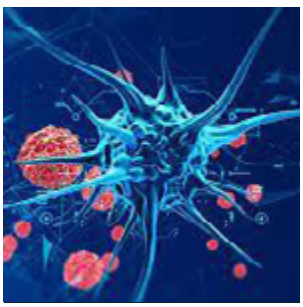
Scientific Tracks & Sessions
May 08, 2023

Surgical Pathology 2023





5th World Congress on

Surgical Pathology and Oncology Research

May 08, 2023 | Webinar

Oncology | Osteosarcoma | Pancreas Tumors | Gynecological Cancer | Orthopedic Pathology

Session Introduction

Title: Osteosarcoma prognosis and survival analysis high grade in the brazilian northeast

Siqueira, André L | Federal University of Paraíba | Brazil

Title: Mass forming pancreatitis in differential diagnosis of pancreas tumors

Halil KIYICI | Hacettepe University | Turkey

Title: High-grade dedifferentiated liposarcoma with heterologous elements (neural and osteoid differentiation) and rhabdomyoblastic-like features in a 37-year-old male

Katrina Jezzela M. Dela Pena | Jose B. Lingad Memorial General Hospital | Phillipines

Title: Is Surgical indication in multiple myeloma a poor prognosis sign? SEER database analysis

Recep Öztürk | Dr. Abdurrahman Yurtaslan Ankara Oncology Training and Research Hospital | Turkey

Title: Wide resection, extracorporeal radiotherapy, ipsilateral vascularized fibula transposition, and internal fixation in a case of tibia diaphyseal Ewing's sarcoma

Recep Öztürk | Dr. Abdurrahman Yurtaslan Ankara Oncology Training and Research Hospital | Turkey

Title: Papillary microcarcinoma of thyroid in resected benign multinodular goitres shows correlation with weight of the specimen

Shamsul Hadia | Peshawar Medical College | Pakistan

Title: General characteristics of benign bone tumors

Recep Öztürk | Dr. Abdurrahman Yurtaslan Ankara Oncology Training and Research Hospital | Turkey

Title: Cancer surgery during COVID increased the patient mortality and the transmission risk to healthcare workers: results from a retrospective cohort study

Roli Purwar | Delhi Technological University | India

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Osteosarcoma prognosis and survival analysis high grade in the brazilian northeast

Siqueira, André L, Leite, J.C.L, Ferreira, M.R.P and Ribeiro, K.S.S
Federal University of Paraíba, Brazil

Bone tumors are responsible for 2% of new cases of neoplasms annually in Brazil. Osteosarcomas are part of the sarcomas that produce immature osteoid tissue, accounting for 10% of diagnoses in children and adolescents, being the most commonly affected. The prognosis is associated with the presence or absence of clinical or histopathological characteristics, such as the presence or absence of pulmonary metastasis. Survival was analyzed using Cox regression, demonstrating which factors influenced death for the population of northeastern Brazil. Is there still room for improvement in osteosarcoma survival?

Recent publications:

1. Henrique Campoy Guedes, victor; Filgueira Leite, Iracema; Carlos de Lacerda Leite, José; Suely Queiroz Silva Ribeiro, Kátia; Sobreira Camurça, Rayssa; Vasconcelos Vieira Siqueira, Viviane; Alexandra Naranjo Espinoza, Veronica; Luís Lopes Gomes de Siqueira, André, Chondrosarcoma of the proximal Humerus in a state philanthropic hospital. Health and society. , v.3, p.286 - 311, 2023.
2. Luís Lopes Gomes de Siqueira, André; Laís Araújo da Silva, Carmem; Cristina Rolim Baggio, Maria Physical activity in the maintenance of the quality of life of elderly people with osteoporosis. Health and society. , v.3, p.806 - 830, 2023
3. Siqueira, André Luís Lopes Gomes de; Leite, I. F.; Portela, l. E. D.; Espindola, v. M. L. B. Tratamento Conservador da Escoliose Idiopática do adolescent: Revision Integrative da literature. Revista fisio&terapia. , v.27, p.26 - 26, 2023

Biography

André Siqueira, graduated in Medicine from the Federal University of Paraíba (2006). Medical Residency General Hospital of Fortaleza 2007-2010. SBOT Member. Medical residency Musculoskeletal Oncology 2012-2014. ABOO, SLATME and ISOLS member. Master's in health Decision Models from the Federal University of Paraíba. Currently PhD student in Decision Models in Health at UFPB. Areas of interest: Bone cancer, biostatistics, logistic regression in Health and Medical Education.

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Mass forming pancreatitis in differential diagnosis of pancreas tumors

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The differential diagnosis of pancreatic tumors includes many neoplasms as well as non-neoplastic masses. Among the non-neoplastic masses that enter the differential diagnosis, reactive-inflammatory masses occupy an important place. As is known, in the absence of neoplasia, the treatment changes completely. Therefore, before any surgical intervention, it is necessary to determine whether the mass is a malignant neoplasia. However, unfortunately, this distinction cannot be made certainly by using diagnostic methods other than pathological diagnosis today.

This presented case is a good example of the diagnostic inadequacy:

A 74 years old male patient, with a former diagnosis of pancreas cancer was applied to hospital. His biochemical laboratory tests revealed elevation of serum GGT, ALT and AST levels. Serum CA19-9 and Ig G4 levels were in normal limits. Abdominal USG revealed a 3x2 cm mass in the pancreas. Endoscopic USG showed lobular parenchymal architecture, mild dilatation of pancreatic duct and the solid mass compressing common bile duct. Then fine needle aspiration biopsy was taken revealing a diagnosis of chronic pancreatitis without evidence of any malignancy or Ig G4 (+) plasma cell infiltration. Due to continuing suspicion of malignancy, PET CT was also performed, revealing the same solid lesion with increased FDG update. Due to persistent malignancy suspicion, surgical operation was planned.

Pathologic examination of total pancreatectomy specimen did not reveal any malignant neoplasia at all.

At the location where radiologically suspicious solid mass was described, microscopic evaluation just revealed lymphocyte infiltration mixed with neutrophil leukocytes, proliferation of young connective tissue, endothelial swollen capillary proliferation and mild edema (Figure). Although all pancreatic parenchyma was examined, it was not found to be malignant or benign neoplasia.

This case is a good example of how currently available non-invasive diagnostic methods, including PET CT, are still insufficient to exactly distinguish malignant neoplasia from the inflammatory reactions. In many more cases, such as this one, unnecessary surgical operations continue to be performed, some of which are radical. Of course, in case of suspicion of malignancy, these surgical procedures remain necessary. Our hope in this regard is that in the future, non-invasive diagnostic methods will be further developed, and unnecessary surgical interventions will be minimized as in our case. In particular, we expect that PET CT devices and software will be further developed and radiological evaluations will become more specific by time.

Recent publications:

1. Abdominal actinomycosis mimicking acute appendicitis
2. Castleman's Disease in a patient with chronic cervical lymphadenopathy: A case report

Biography

Halil Kiyici, a doctor, and he attend many international conferences and have published many articles in journals.

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High-grade dedifferentiated liposarcoma with heterologous elements (neural and osteoid differentiation) and rhabdomyoblastic-like features in a 37-year-old male: a case report and review of literature

Katrina Jezzela M Dela Pena and Azenith May H Rafanan
Jose B. Lingad Memorial General Hospital, Phillipines

To report the least common type of liposarcoma, dedifferentiated liposarcoma of the extremities of a 37-year-old man diagnosed by wide excision biopsy and a panel of immunohistochemistry staining and review related literature of this disease entity.

Clinical Features: The patient had a 5-month history of progressively enlarging right axillary mass with an initial biopsy result of spindle cell neoplasm with epithelioid features.

Methods: Review all the data that include the patient's history, radiographic, histopathologic and immunohistochemically findings.

Results and Conclusions: Wide excision biopsy was done which yielded slides showing neoplastic cells in sheets and nests in a fibromyxoid stroma with areas of osteoid formation. The individual neoplastic cells are pleomorphic, exhibiting ample to scant cytoplasm with no distinct cell margins with large round to oval nuclei with marked atypia, prominent nuclei, multivacoulated cells with indented nuclei and prominent nucleoli identified as lipoblasts, large pleomorphic cells with abundant tapered eosinophilic cytoplasm, and spindle shaped cells with large nuclei. No evidence of lymphovascular invasion. All lines of resection are negative for the tumor. Immunohistochemistry (IHC) staining with CD99 and Murine Double Minute 2 (MDM2) shows a positive reactivity to the tumor. Cytokeratin (CK) and S100, Myogenin, MYO-D1 showed no reactivity. Ki67 shows a proliferative index of 60-65%, a high proliferative index. The histomorphologic and immunohistochemical (IHC) features were compatible with High-Grade Dedifferentiated Liposarcoma with Heterologous elements (neural and osteoid differentiation) and rhabdomyoblastic features. Patient then underwent 35 cycles of radiation therapy and 6 cycles of chemotherapy. Patient has no tumor recurrence upon follow up. Dedifferentiated Liposarcoma poses a diagnostic challenge, its Morphological differentiation can be difficult as it can mimic benign or other malignant lesions which differ in treatment and prognosis.

Biography

David J has completed his/her PhD at the age of 25 years from Duke University, USA. He/she is the director/professor of Duke University, USA. He/she has over 200 publications that have been cited over 200 times, and his/her publication H-index is 20 and has been serving as an editorial board member of reputed Journals.

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Is surgical indication in multiple myeloma a poor prognosis sign? SEER database analysis

Recep Öztürk
Dr. Abdurrahman Yurtaslan Ankara Oncology Training and Research Hospital, Turkey

Aim: This study aims to investigate demographic data, survival rates, and the relationship of these rates with surgery in a large case series including multiple myeloma (MM) patients.

Method: MM cases were analyzed retrospectively using the latest version of the SEER database published in November 2019. This version covers January 1975 to December 2017. Patients were classified according to gender, age, and race/ethnicity. Tumors were classified according to their localization, grade, year of diagnosis, and follow-up results.

Results: There were 60239 patients diagnosed with Plasma Cell Myeloma. While 670 patients (1.2%) were operated on, 43976 patients (76.7%) did not indicate operation, and 12670 patients (22.1%) could not be operated on despite the recommendation. The mean survival was 62 months in those without an indication for surgery, and 42 months in patients with an indication but could not be operated on, and the difference was significant(p=0.001). The mean survival was 58 months in the operated patients, and 42 months in the patients who could not be operated on despite the indication, and the difference was significant (p=0.001). There was no difference between those who did not indicate surgery and those who were operated on with an indication(p=0.243).

Conclusion: In multiple myeloma, the best prognosis is in the group of patients who received medical treatments without any indication for operation, while an indication for operation indicates a worse prognosis. A worse prognosis should be expected in patients who do not accept the operation or who cannot be operated on compared to the operated patients.

Recent publications:

1. Distribution and evaluation of bone and soft tissue tumors operated in a tertiary care center (2019) - 52 citations
2. Epidemiology, incidence, and survival of synovial sarcoma subtypes: SEER database analysis (2020) – 40 citations
3. Outcomes of planned marginal and wide resection of sarcomas associated with major vascular structures in extremities (2022)

Biography

Recep Öztürk has completed his PhD at the age of 25 years from Gazi University, Turkey. He is the associate professor of health Science University, Dr. Abdurrahman Yurtaslan Ankara Oncology Training and Research Hospital, Turkey. He has over 150 publications that have been cited over 250 times, and has been serving as an editorial board member of reputed Journals.

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Wide resection, extracorporeal radiotherapy, ipsilateral vascularized fibula transposition, and internal fixation in a case of tibia diaphyseal Ewing's sarcoma

Recep Öztürk
Dr. Abdurrahman Yurtaslan Ankara Oncology Training and Research Hospital, Turkey

A 24-year-old female patient was referred to our hospital with the diagnosis of Ewing's sarcoma localized in the left distal tibia. Neoadjuvant chemotherapy (CT) was completed for the patient who had localized disease. En-bloc resection of the tumor segment in the diaphyseal tibia, intraoperative extracorporeal radiotherapy, and then re-implantation of the segment after clearing the tumor was performed. Transfer of the ipsilateral pedicled fibula to the medulla of the irradiated segment was performed. As far as we know, the simultaneous application of extracorporeal radiotherapy and re-implantation method after resection of the tibial tumoral segment and the transfer of the ipsilateral fibula with its pedicle has not been previously reported in the literature. In this case, this new technique was accompanied by a satisfactory result.

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Cancer surgery during COVID increased the patient mortality and the transmission risk to healthcare workers: results from a retrospective cohort study

Roli Purwar
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Background: India encountered two waves of COVID-19 pandemic with variability in its characteristics and severity. Concerns were raised over the safety of treatment, and higher morbidity was predicted for oncological surgery. The present study was conducted to evaluate and compare the rate of morbidity and mortality in patients undergoing curative surgery for cancer before and during the COVID-19 pandemic.

Method: The prospectively obtained clinical data of 1576 patients treated between April 2019 and May 2021 was reviewed; of these, 959 patients were operated before COVID-19 and 617 during the pandemic. The data on complications, deaths, confirmed or suspected COVID-19 cases, and COVID-19 infection among health workers (HCW) was extracted.

Results: A 35% fall in number of surgeries was seen during the COVID period; significant fall was seen in genital and esophageal cancer. There was no difference in postoperative complication; however, the postoperative mortality was significantly higher. A total of 71 patients had COVID-19, of which 62 were preoperative and 9 postoperative, while 30/38 healthcare workers contracted COVID-19, of which 7 had the infection twice and 3 were infected after two doses of vaccination; there was no mortality in healthcare workers.

Conclusion: The present study demonstrates higher mortality rates after surgery in cancer patients, with no significant change in morbidity rates. A substantial proportion of HCWs were also infected though there was no mortality among this group. The results suggest higher mortality in cancer patients despite following the guidelines and protocols.

Recent publications:

1. Experimental Methods of Superabsorbent Polymers: Characterization.
2. Effect of post-treatment methods and nanoparticles on the conformation of silk fibroin and their impact on electrical properties.

Biography

Roli Purwar is currently employed at Delhi Technological University, Bawana, Delhi, India. I have attended many conferences and published many articles in journals.

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