

CASE 017

AUTHORS: Dr. Samriti Arora, Dr. Shivani Sharma, Dr. Shipra Garg, Dr. Praveen Kumar Garg, and Dr. Lata Kini.

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A 31-years-old multiparous female with polymenorrhagia.

CLINICAL HISTORY

A 31 year old female presented with bleeding per vaginum. Biopsy from cervix was done and a diagnosis of poorly differentiated colloid carcinoma (mucinous adenocarcinoma) of cervix was offered based on histomorphological features.

PATHOLOGICAL FINDINGS: We received H& E stained slides and blocks for review and immunohistochemistry which showed a neoplasm arranged in the form of nests with few glands. The tumor cells showed mild to moderate pleomorphism, vesicular chromatin and inconspicuous nucleoli, with scant eosinophilic to clear cytoplasm. Signet ring cells were also present. Dyscohesive tumor cells were seen interspersed within large pools of extracellular mucin. Mitosis was brisk with few atypical forms also observed. No area of necrosis was seen.

IMMUNOHISTOCHEMICAL FINDINGS: Immunohistochemically, the neoplastic cells expressed diffuse and strong positivity for SATB2, CDX2, CK20, MUC-5AC, and focally expressed CK7. Immunoexpression for WT-1 was negative. A final diagnosis of Metastatic poorly differentiated adenocarcinoma with mucin production and signet ring features consistent with colorectal origin was given, as the immunoprofile (CK20+/ CDX2+/ SATB2+) favored a hindgut origin.

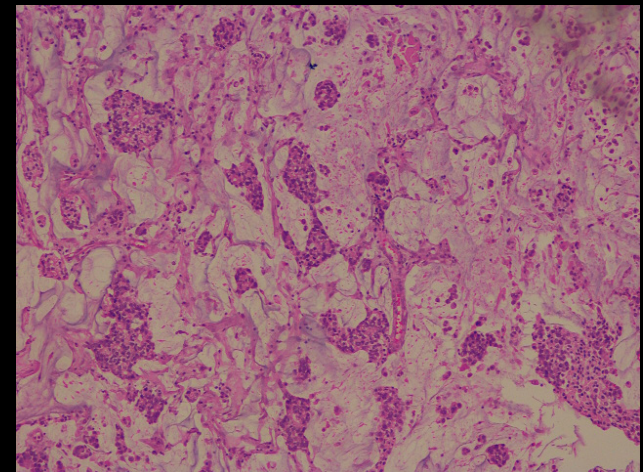


Figure 1