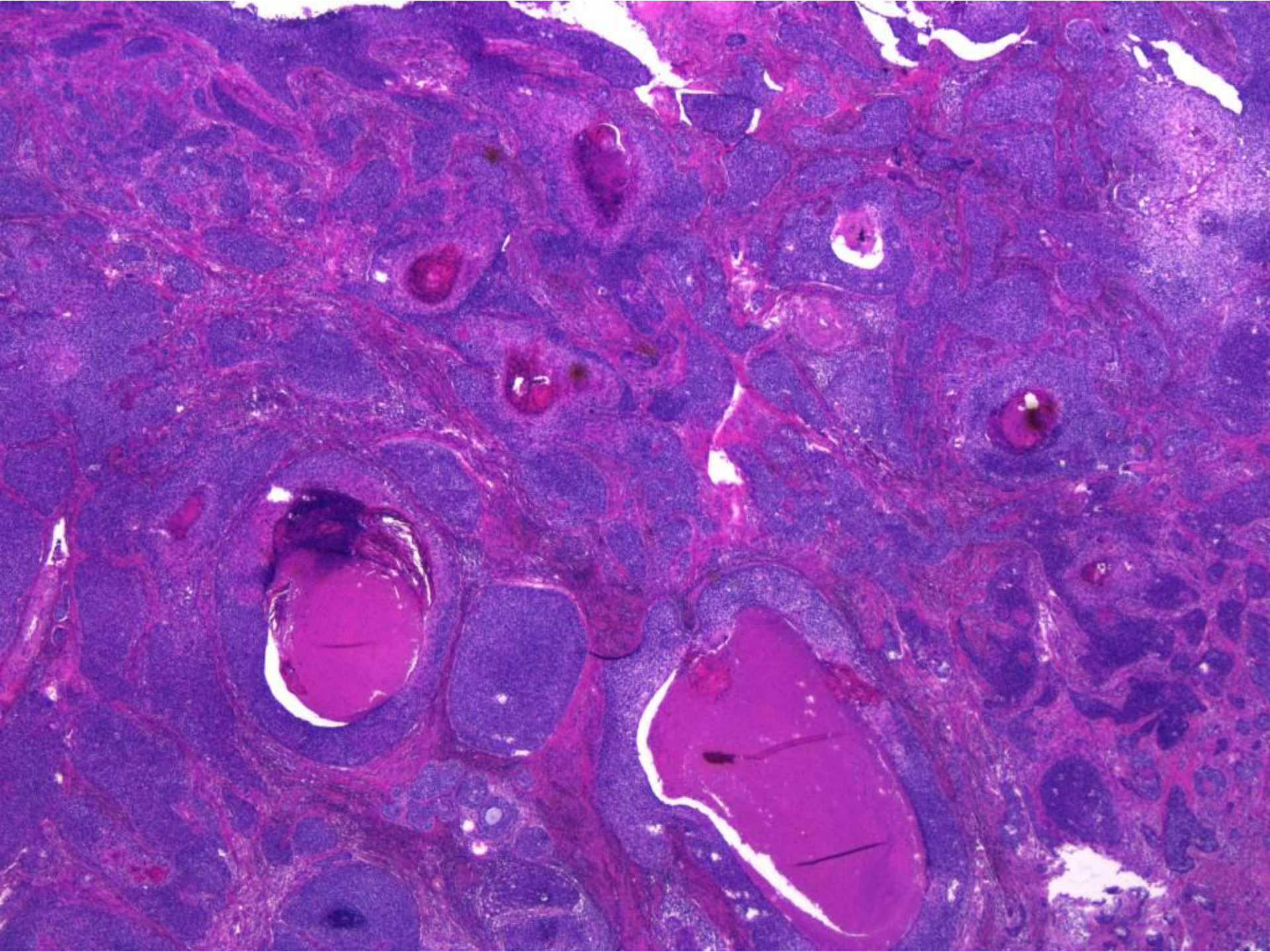
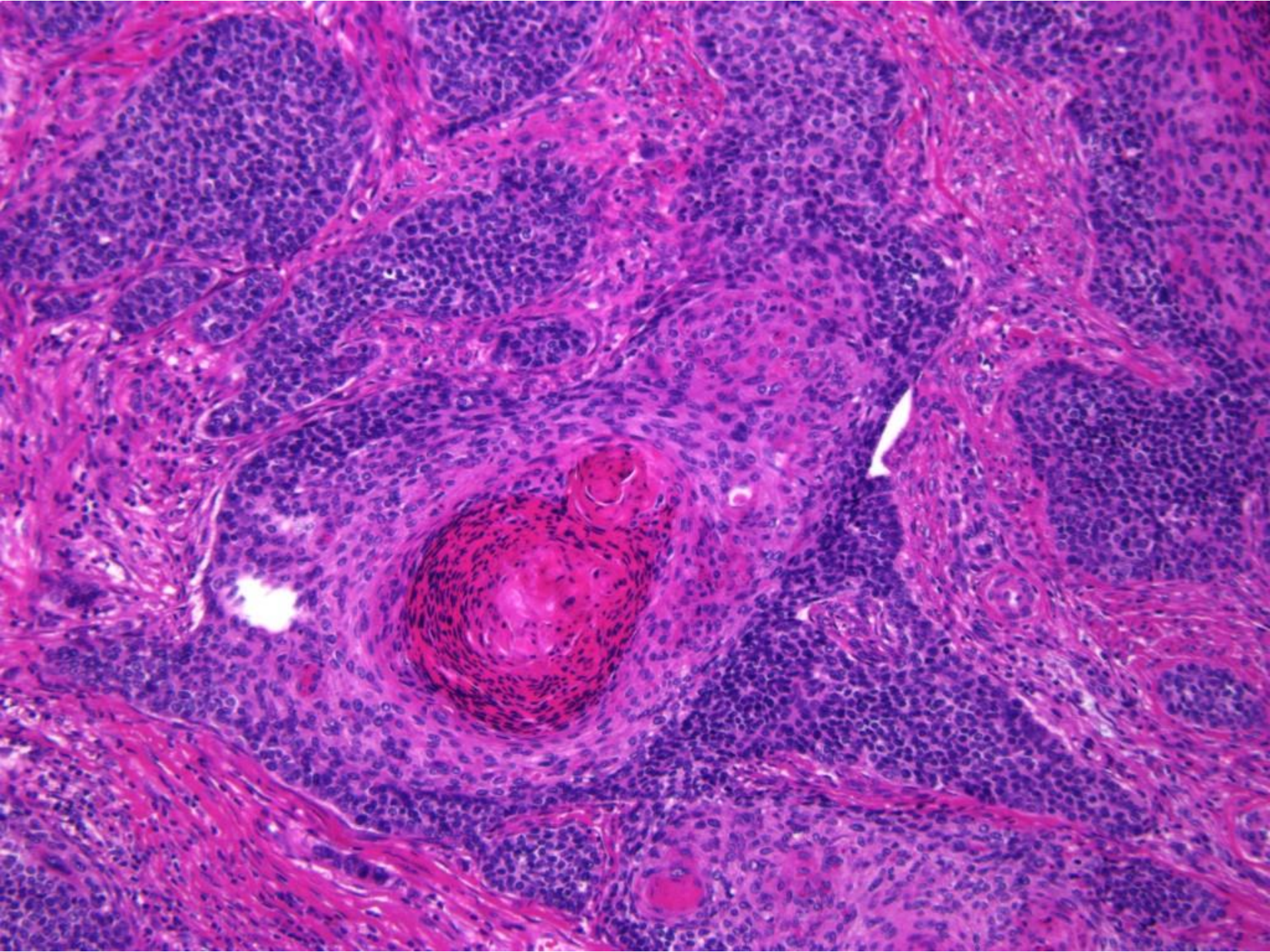
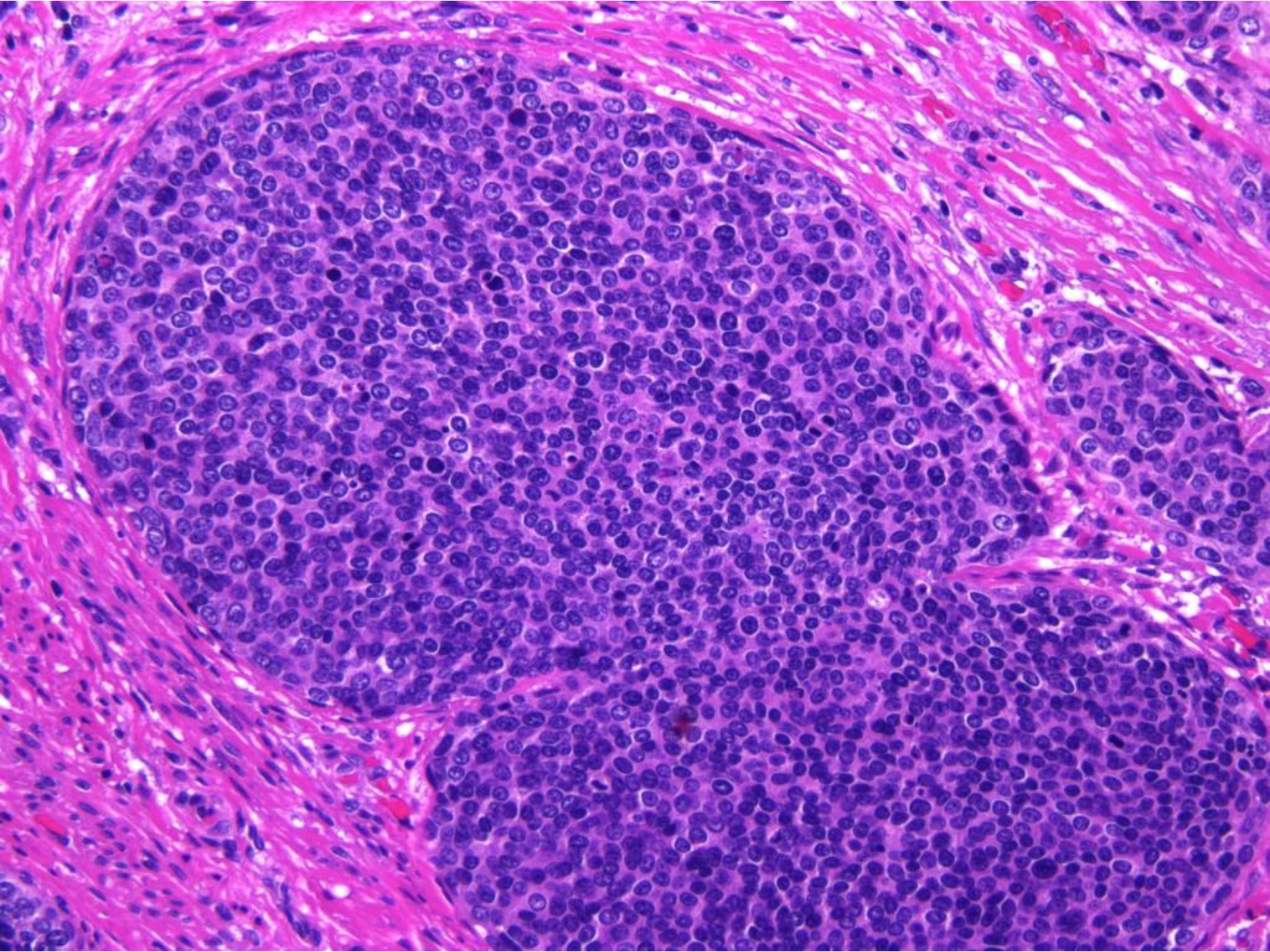
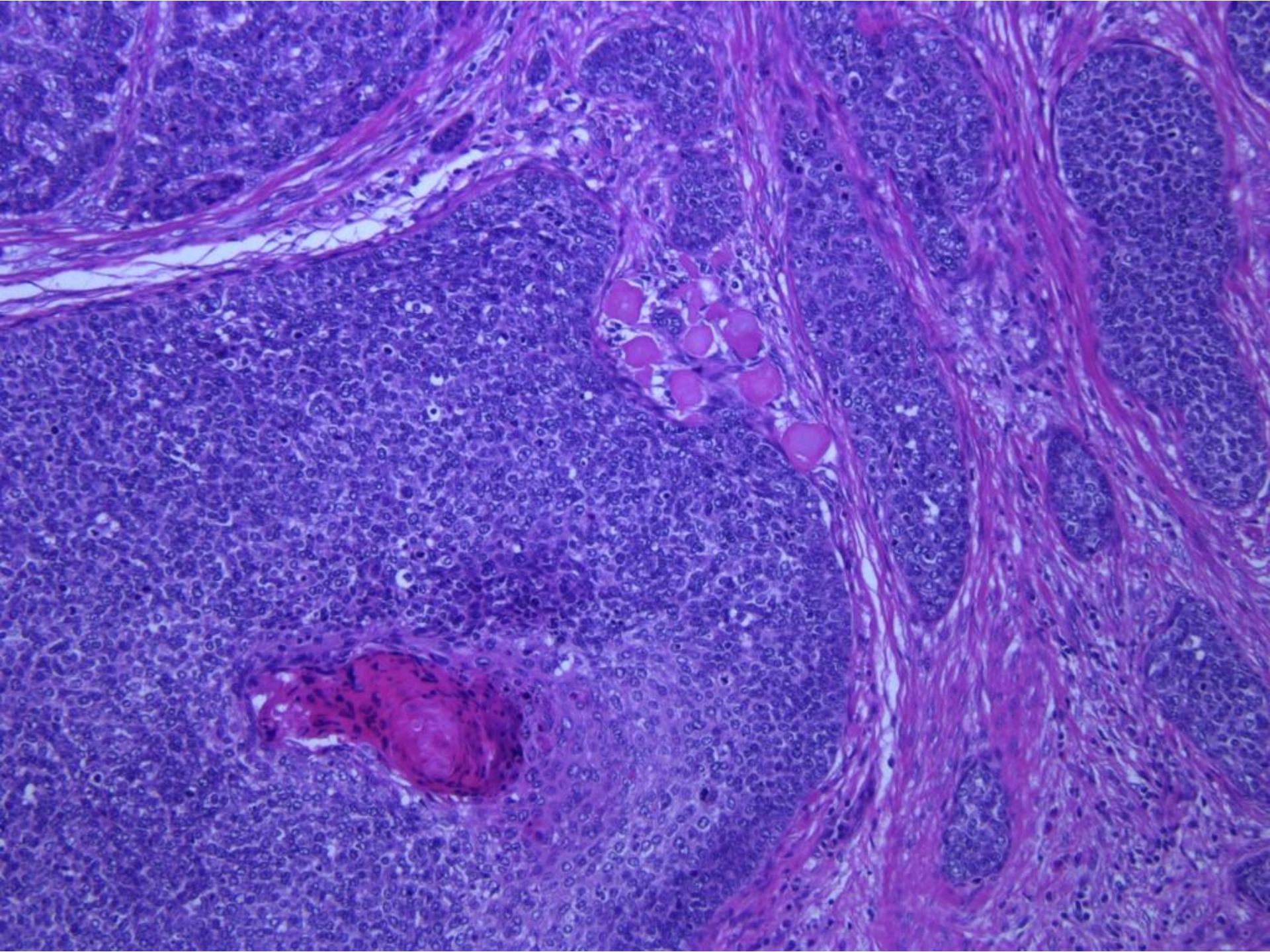
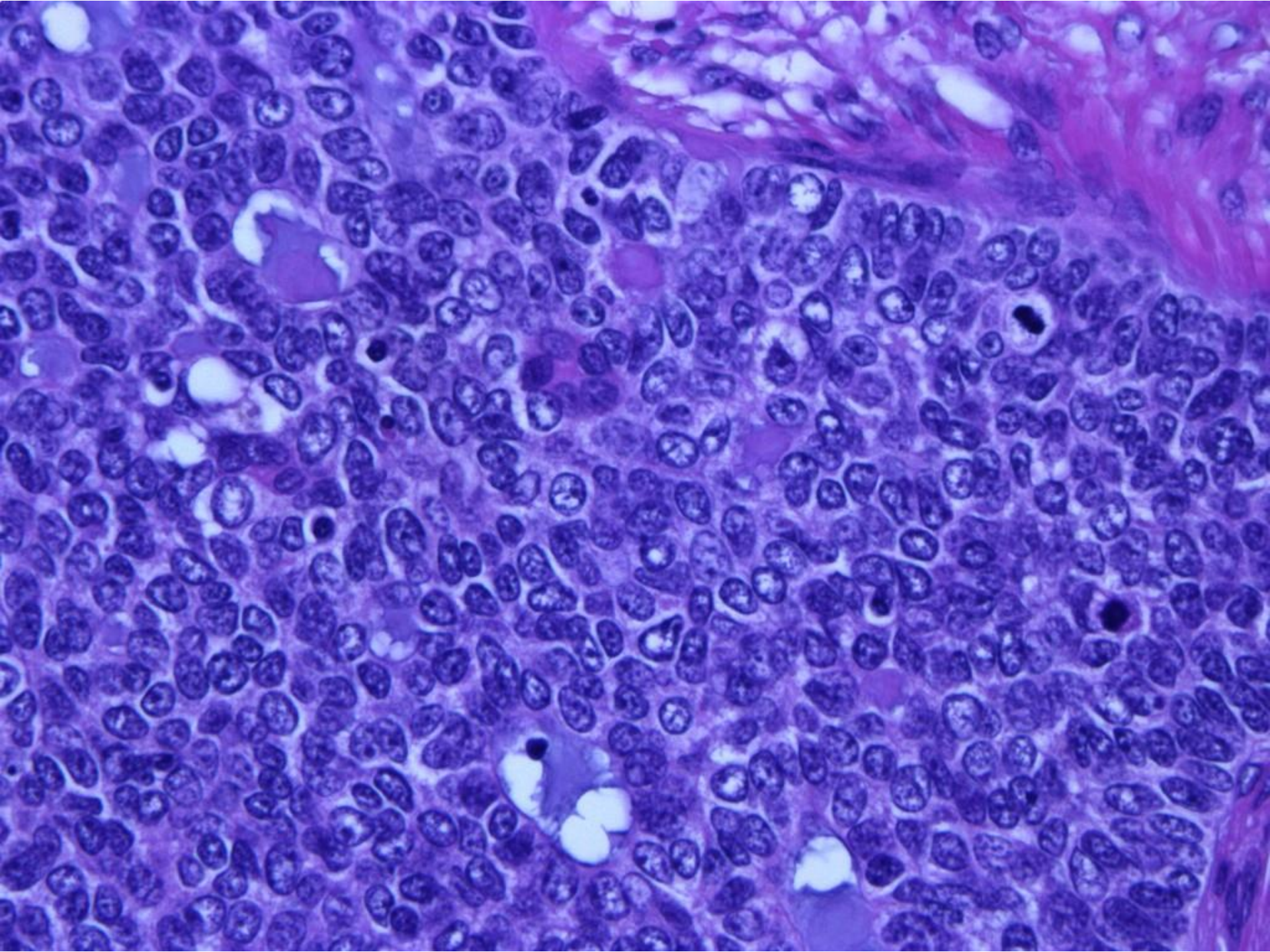
円錐切除標本

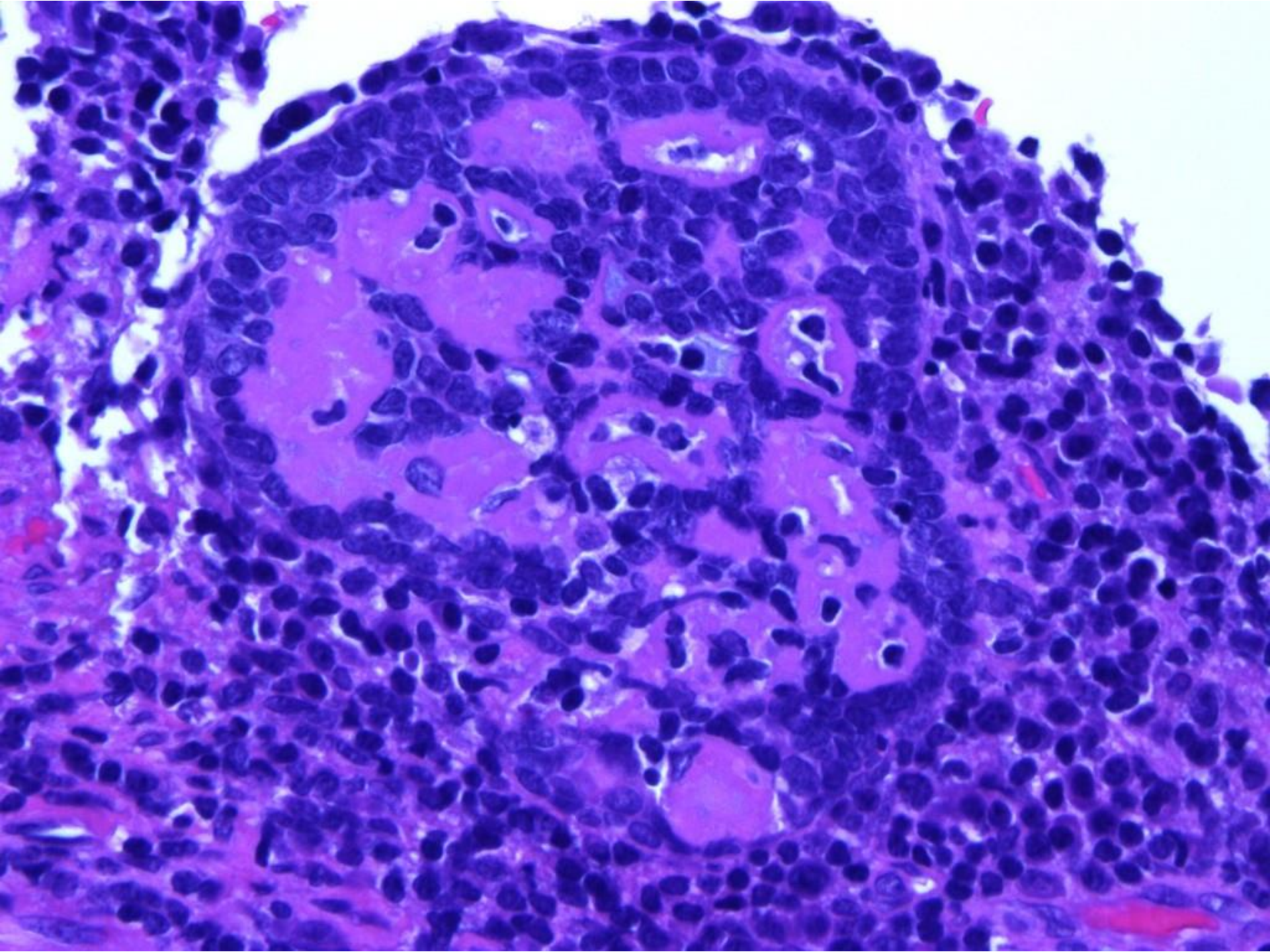


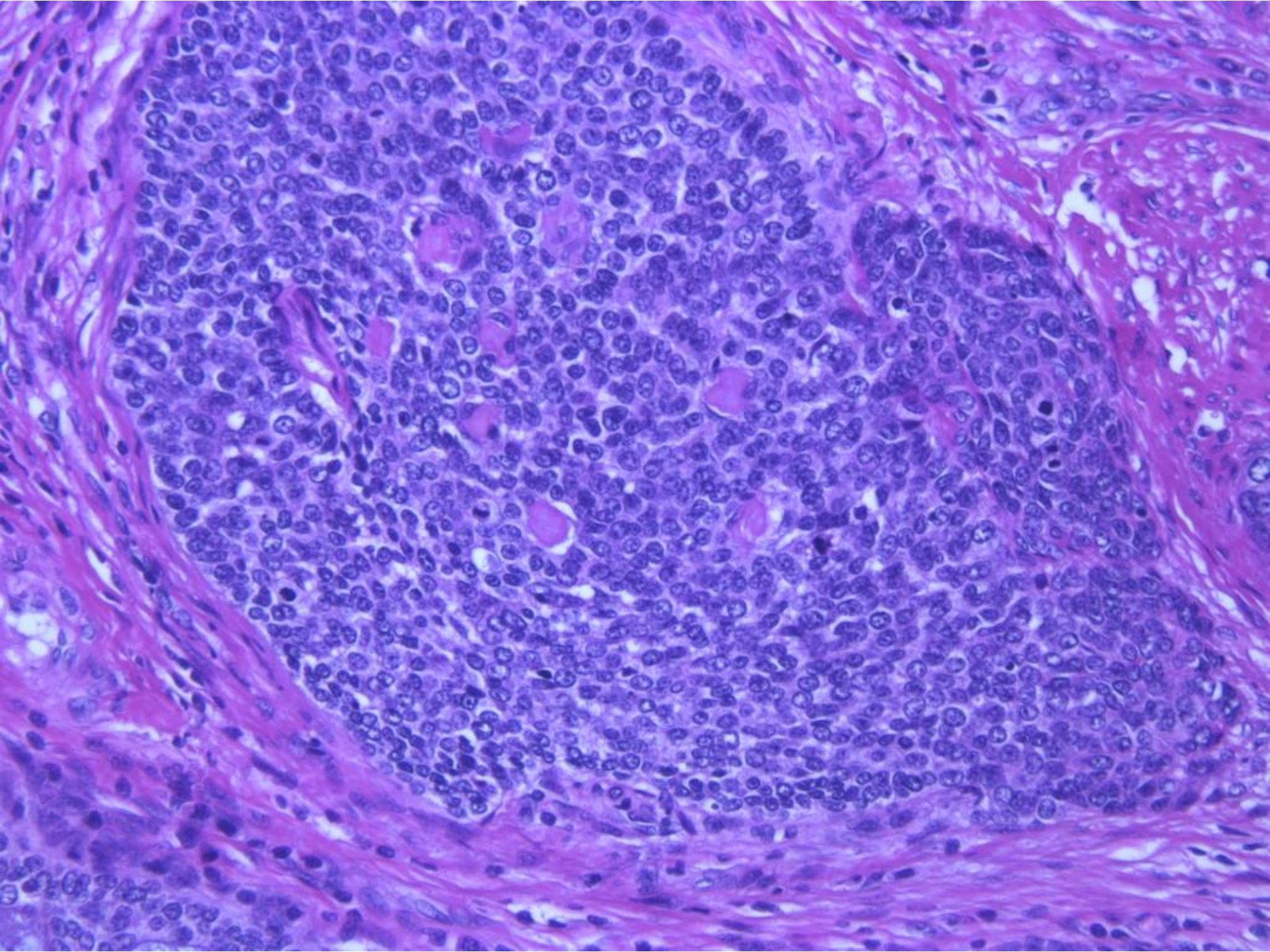


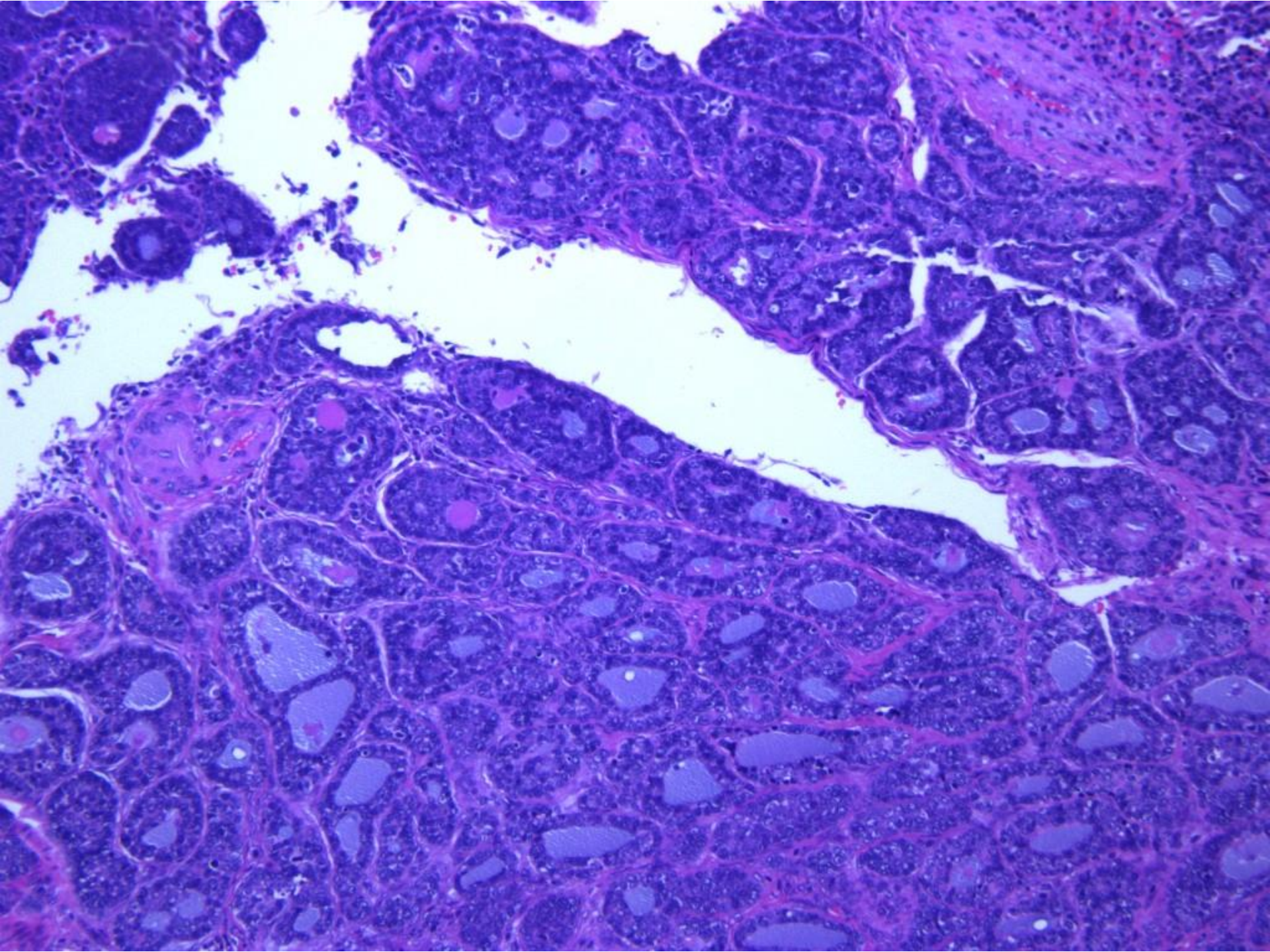


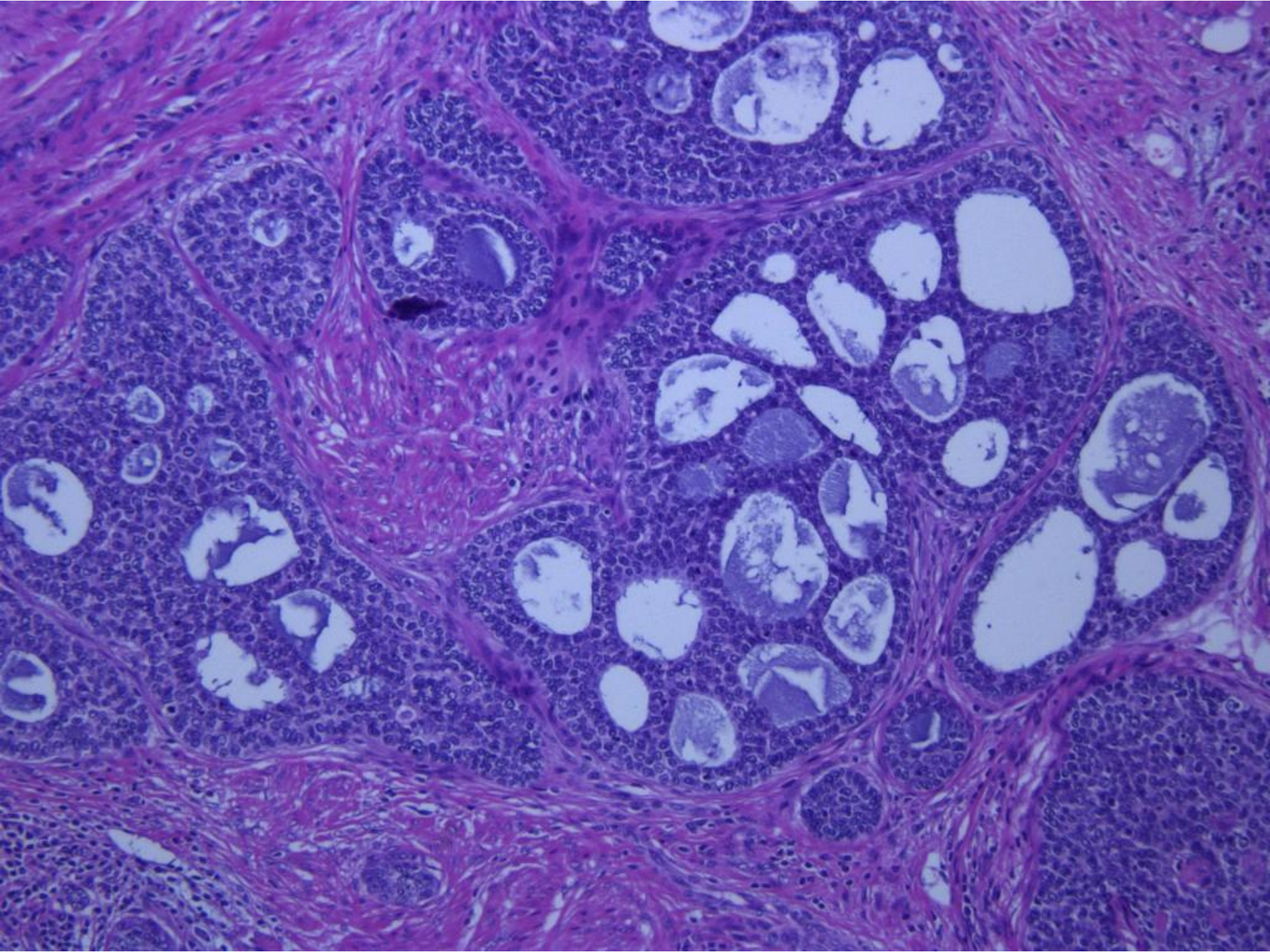


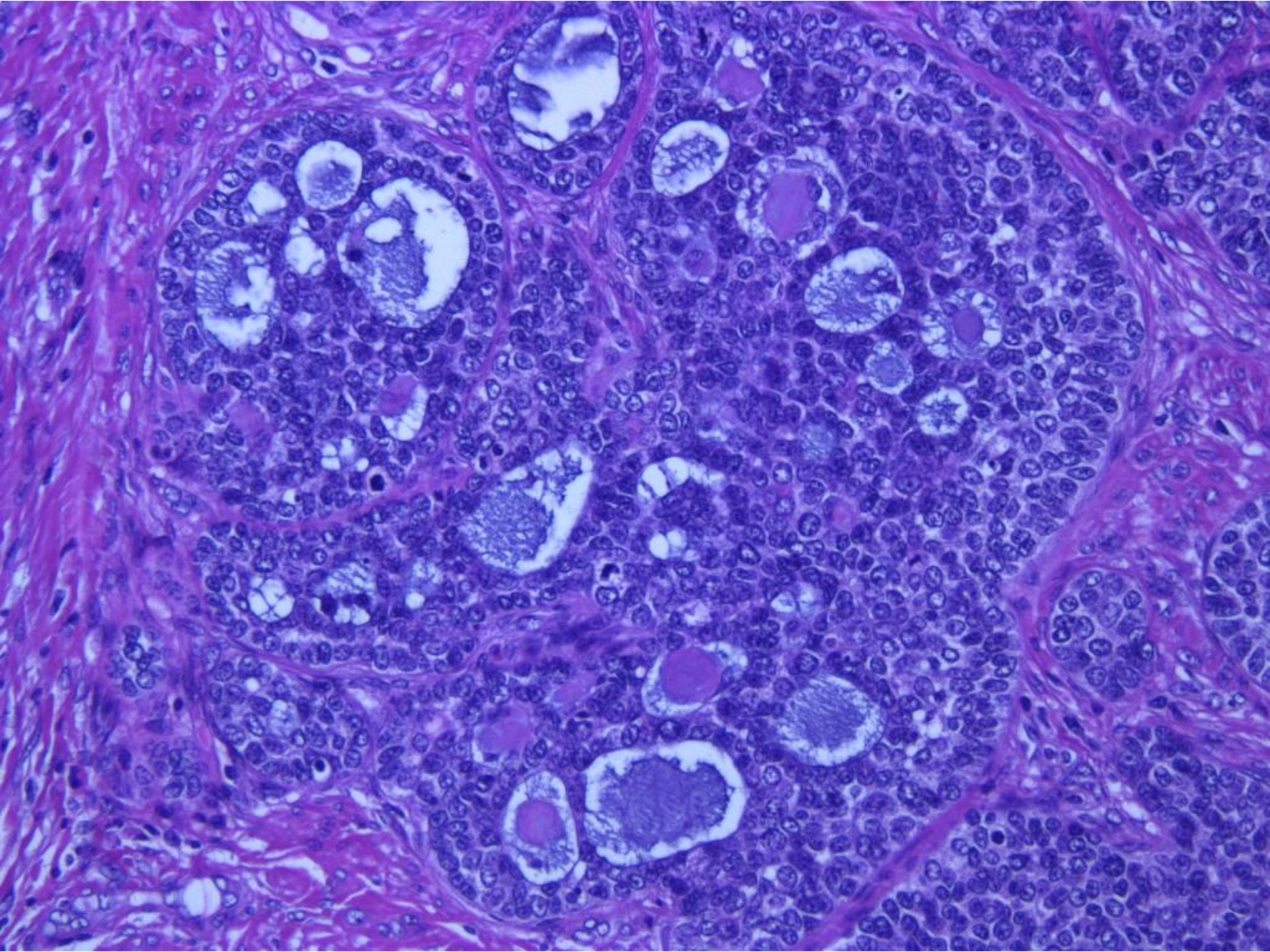


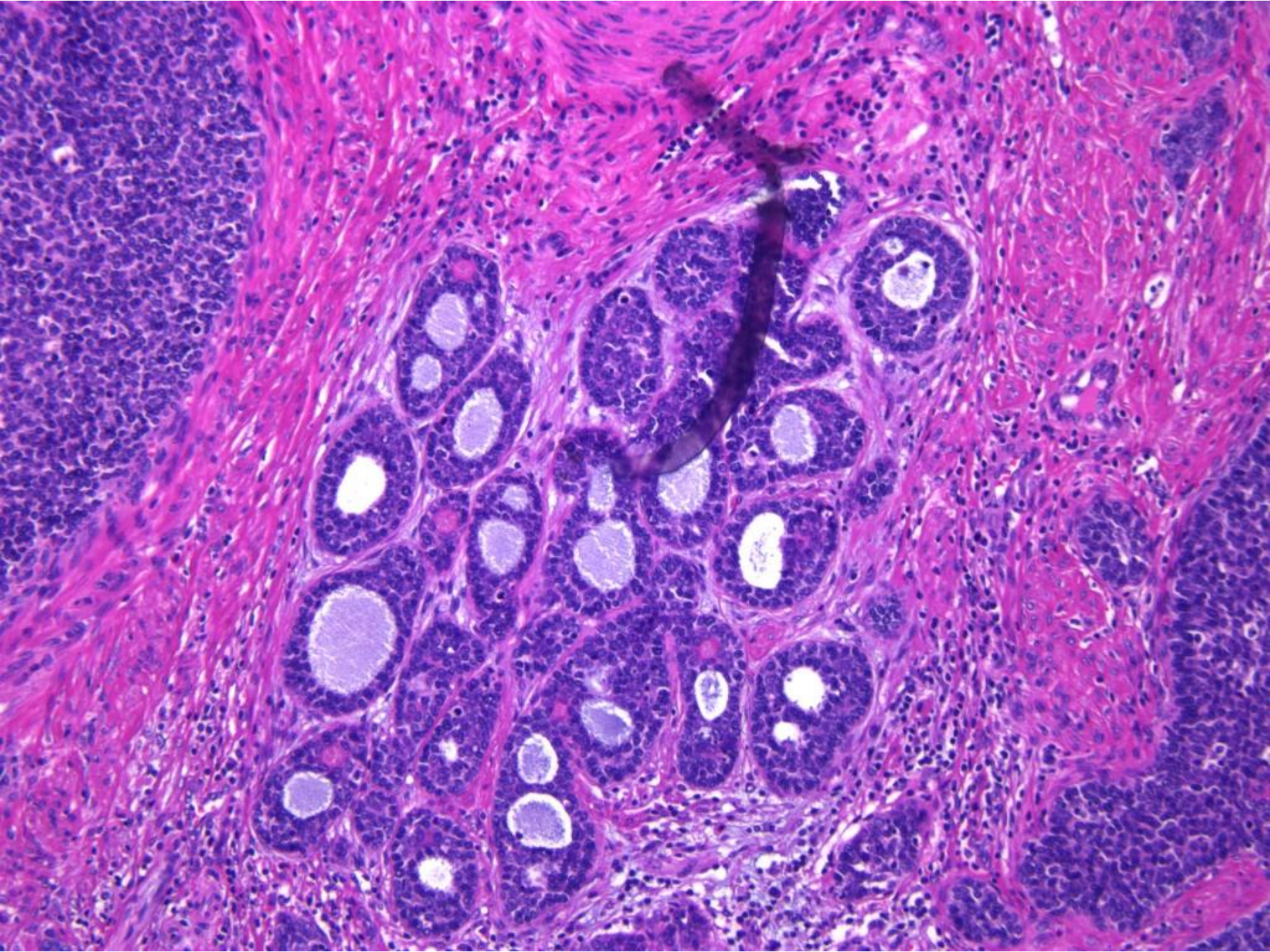


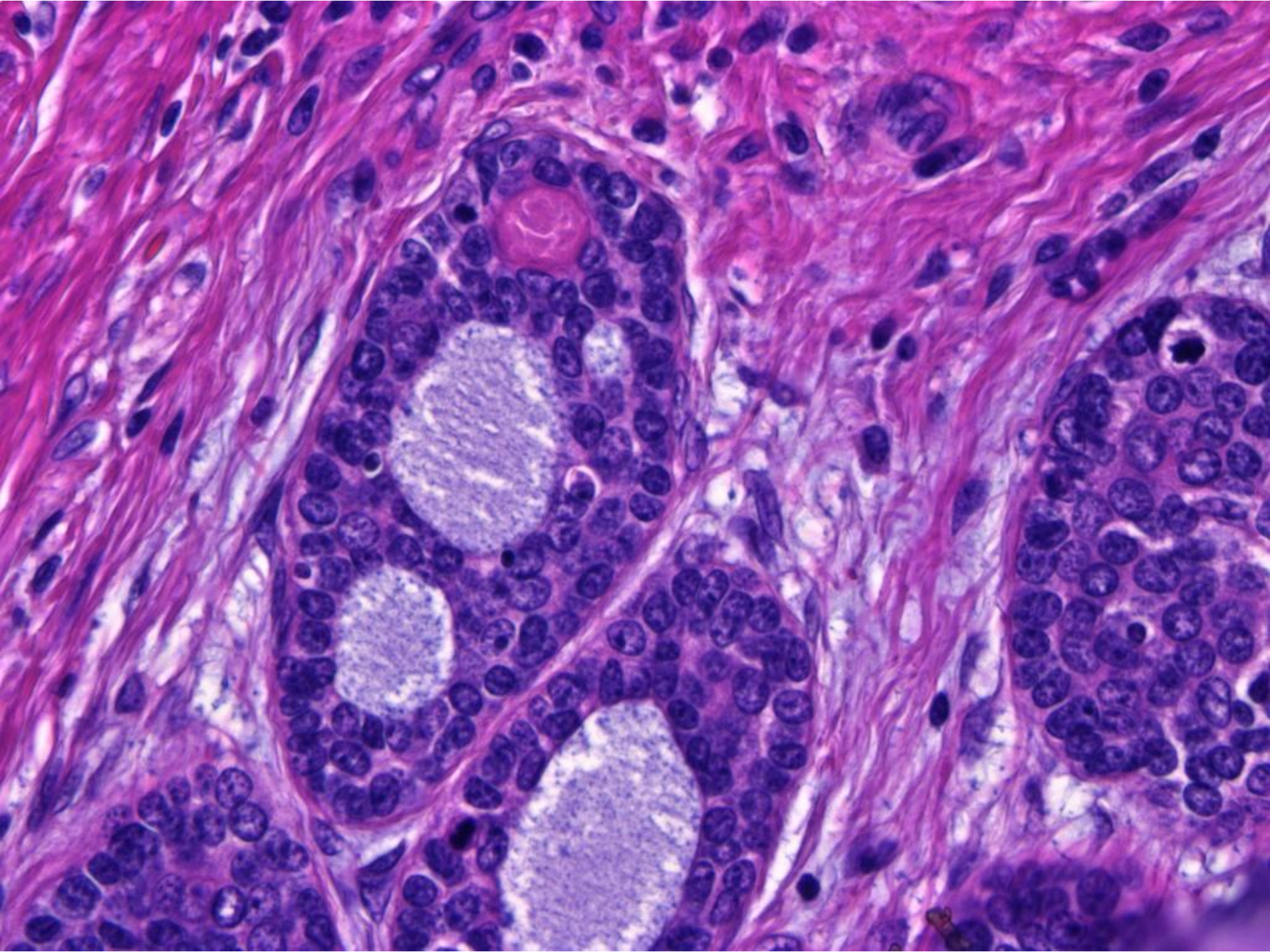


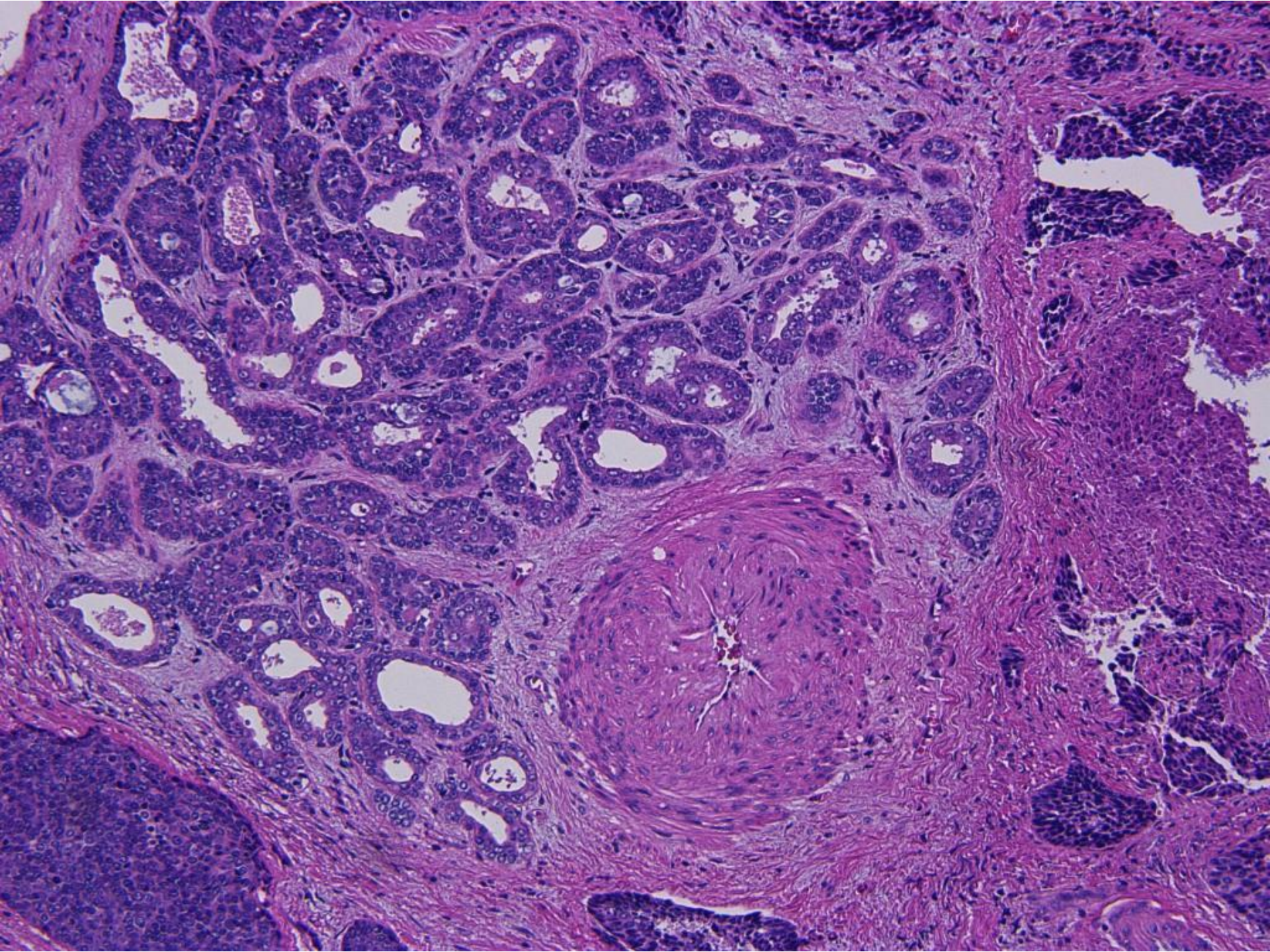


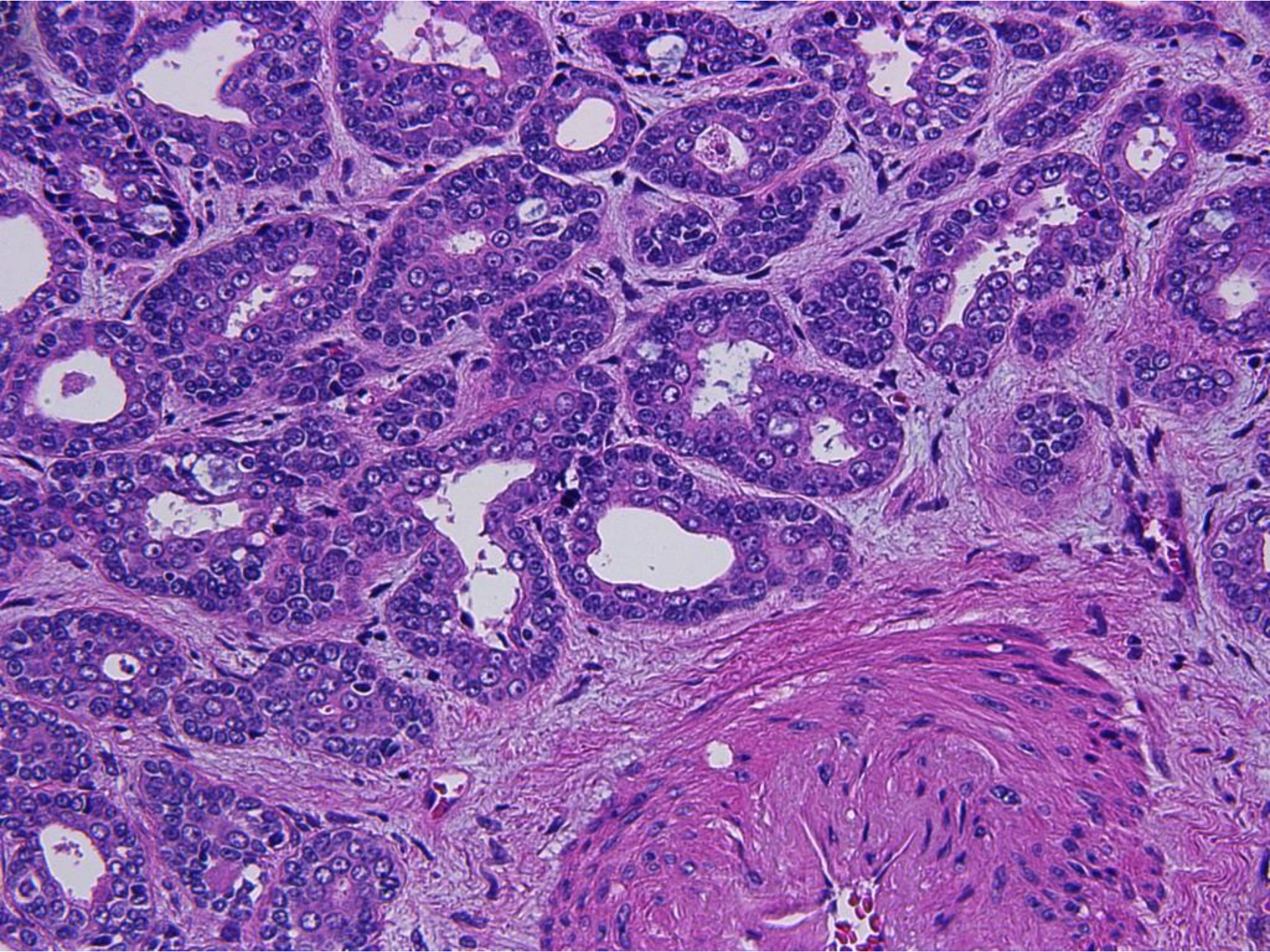


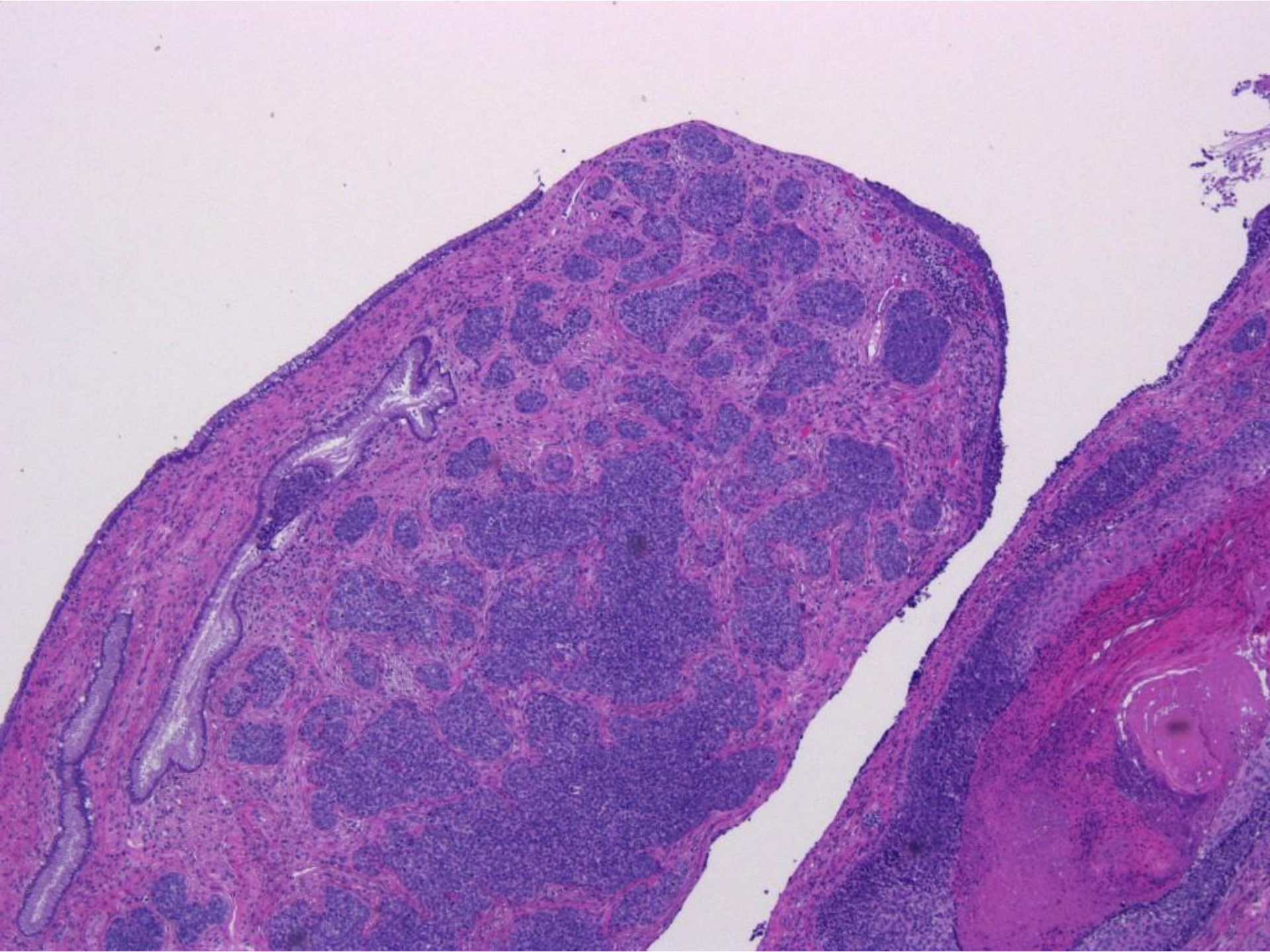


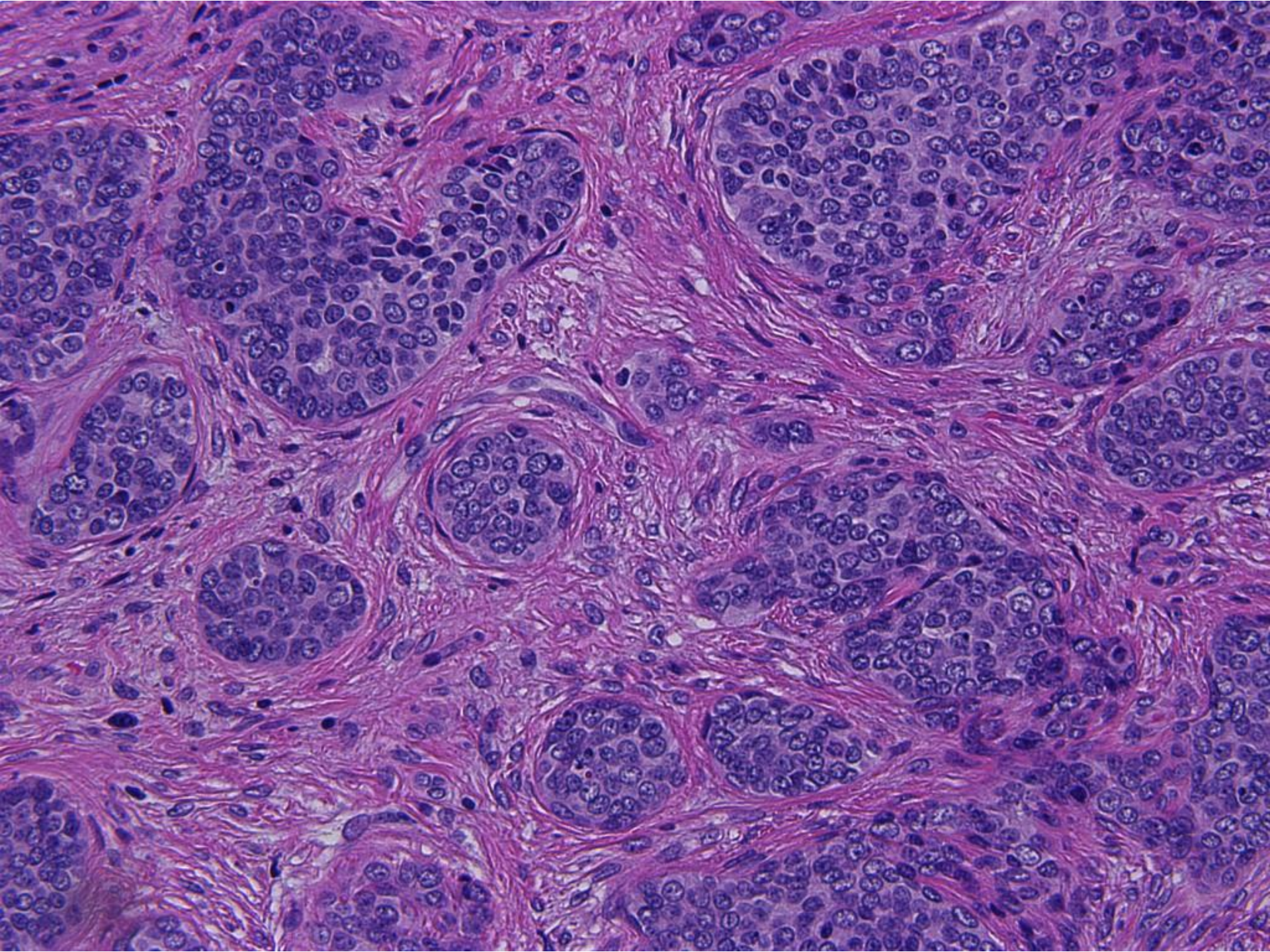


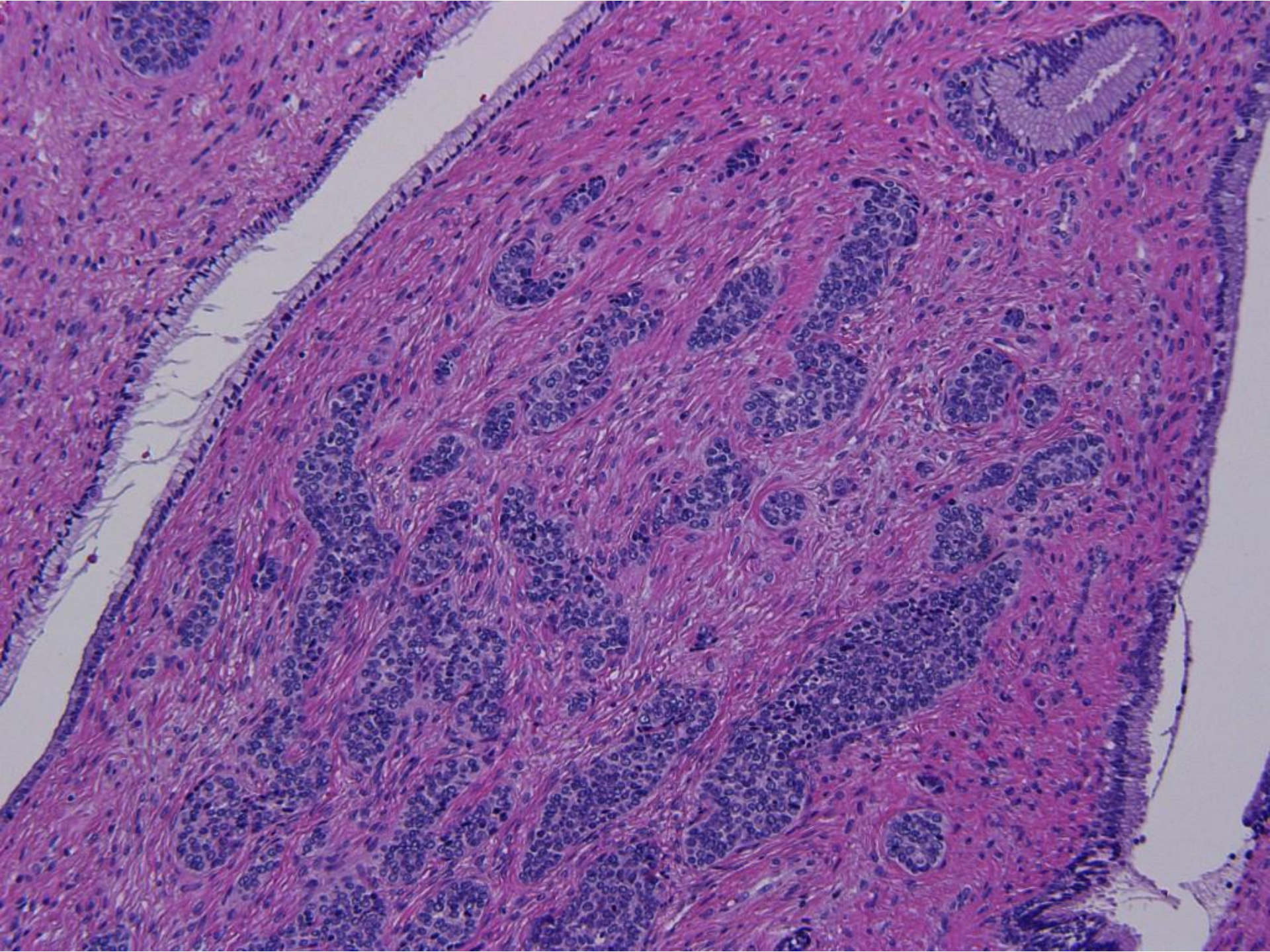


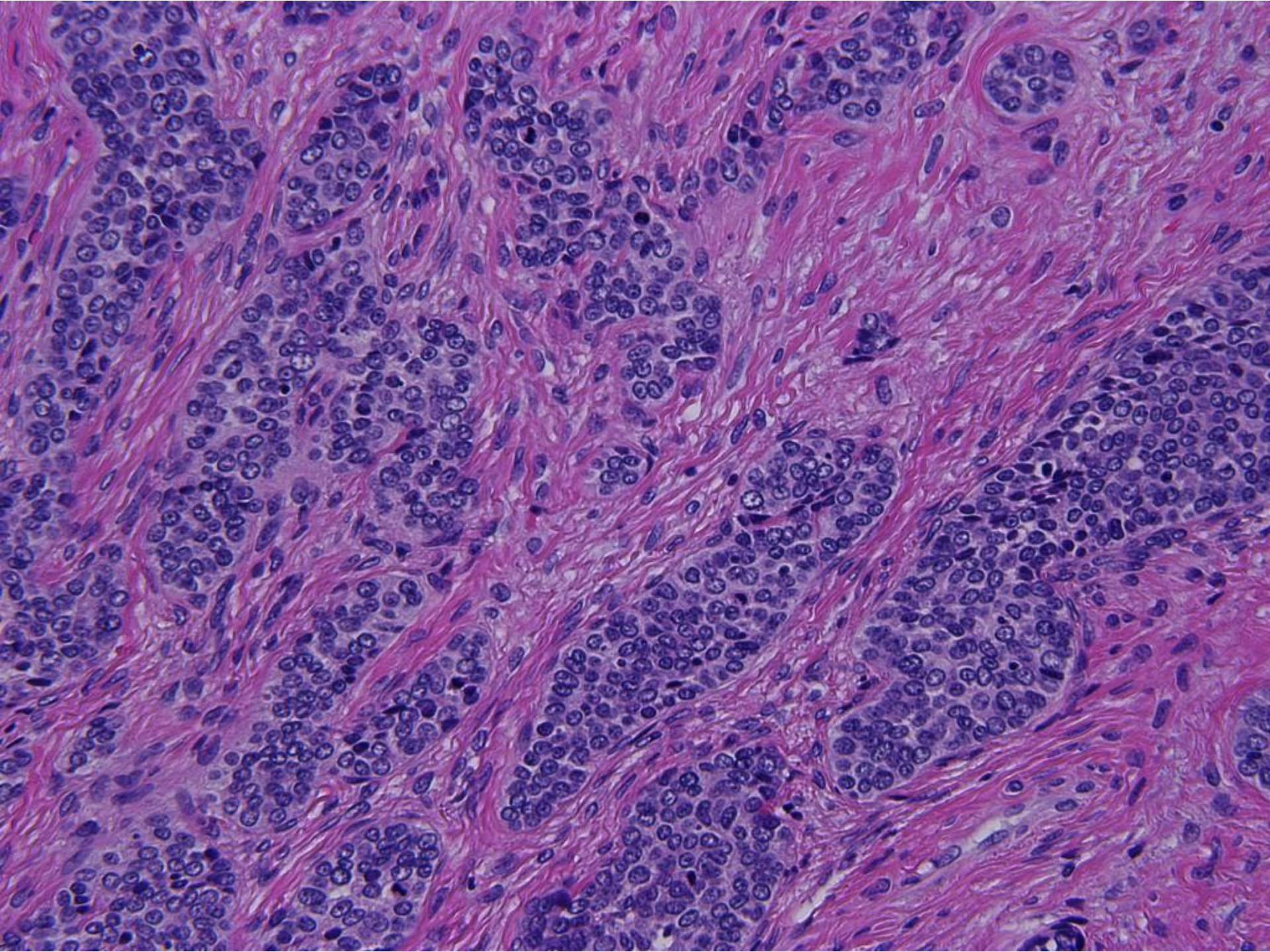


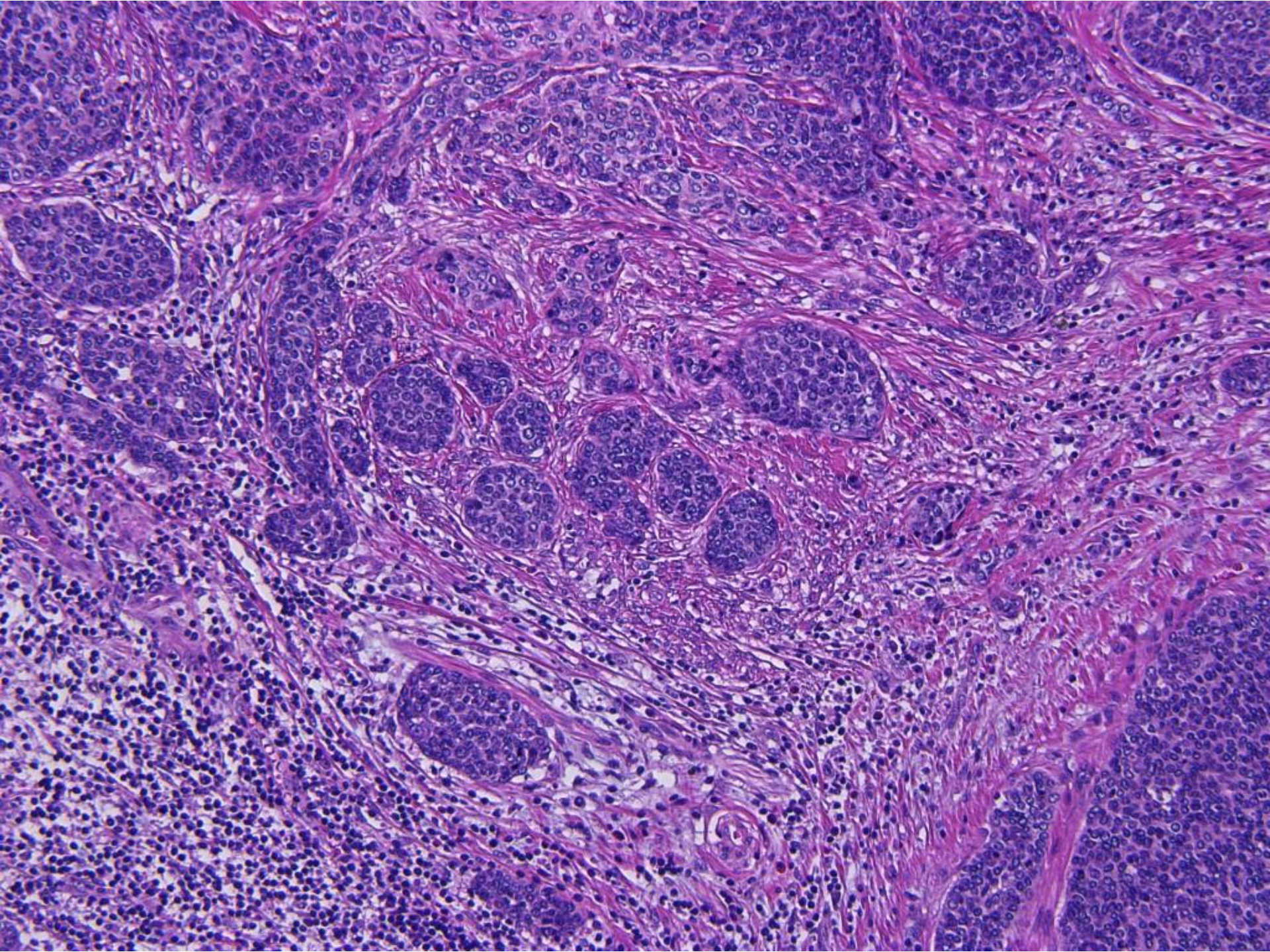


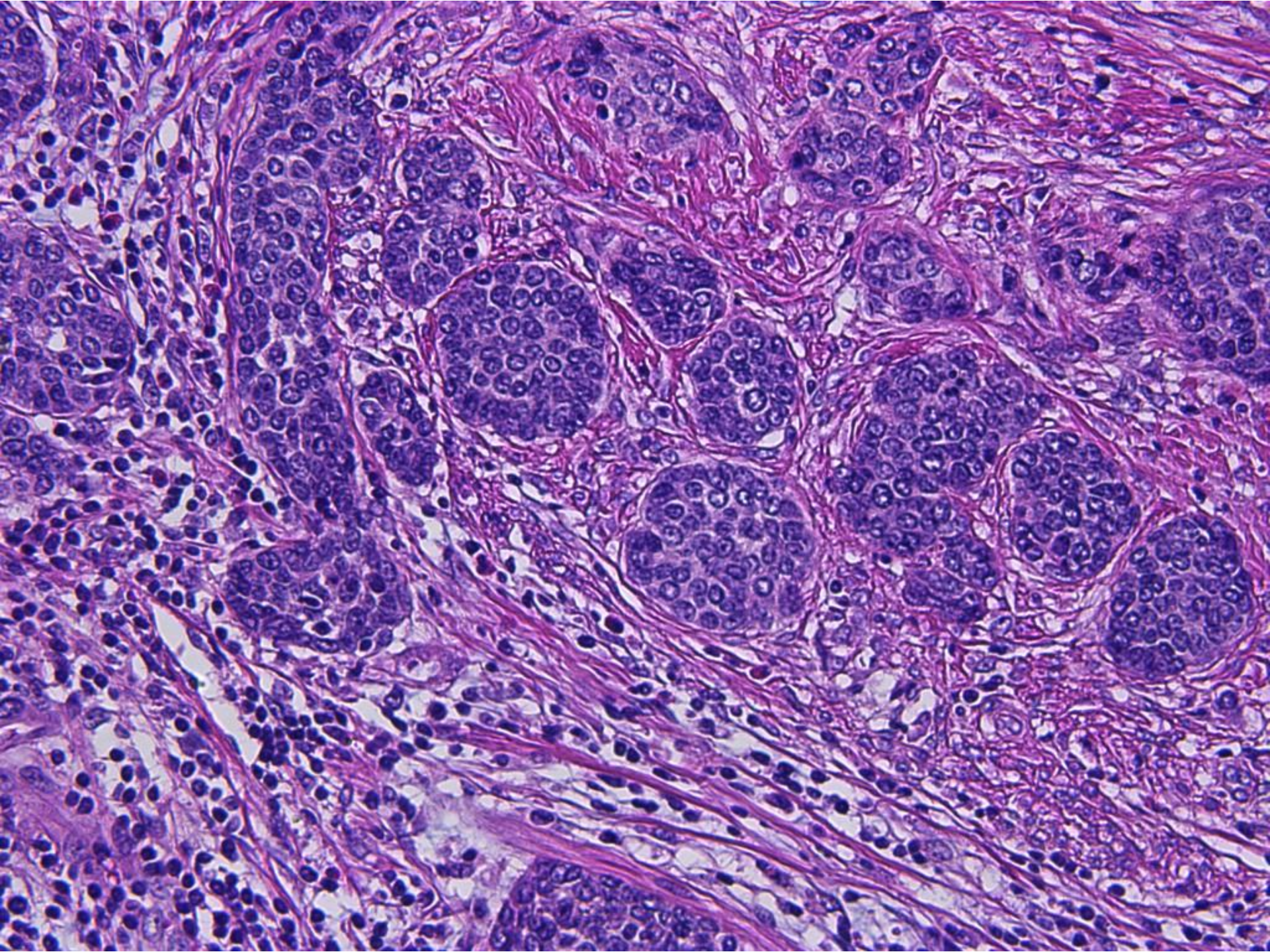


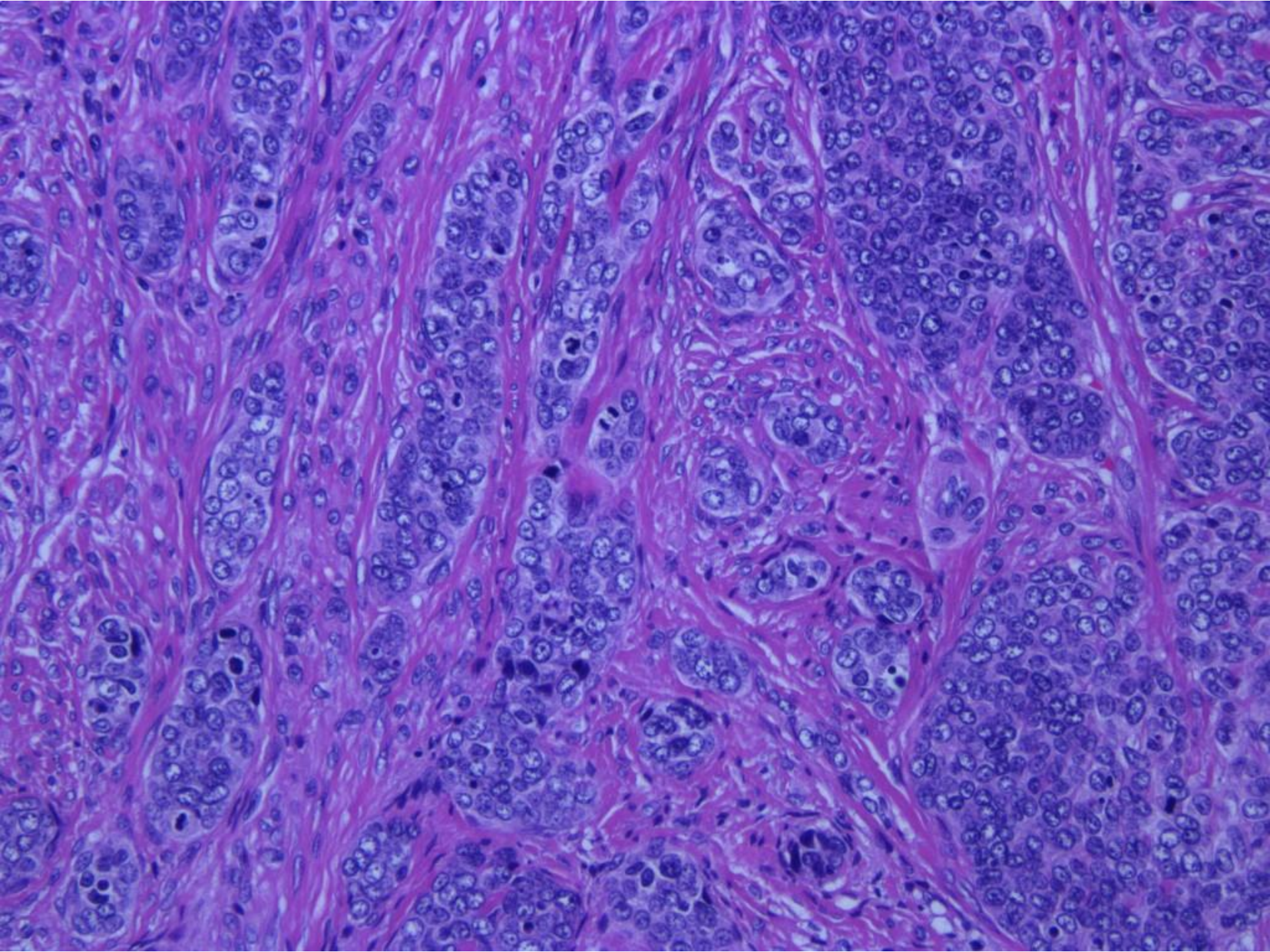


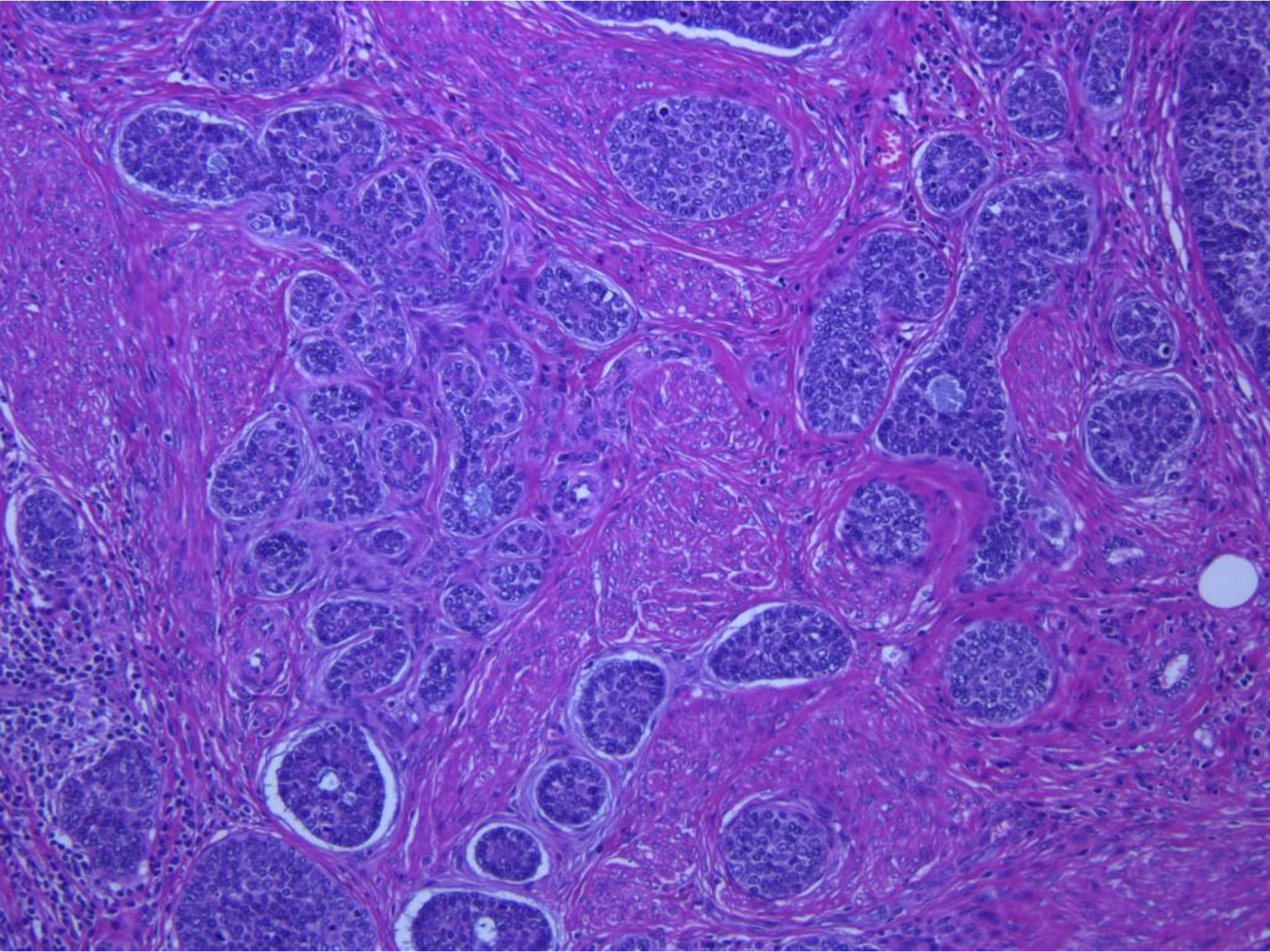


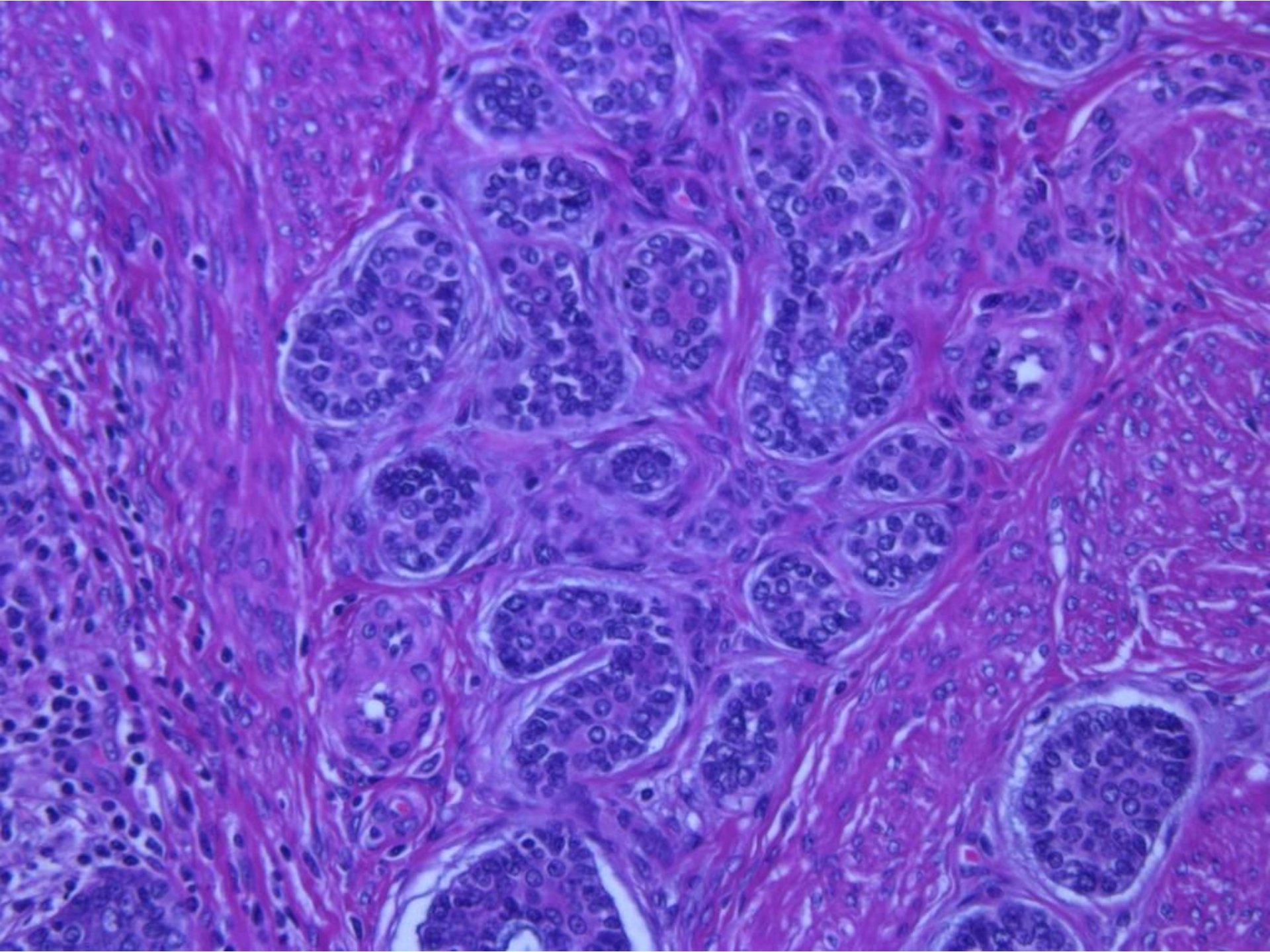


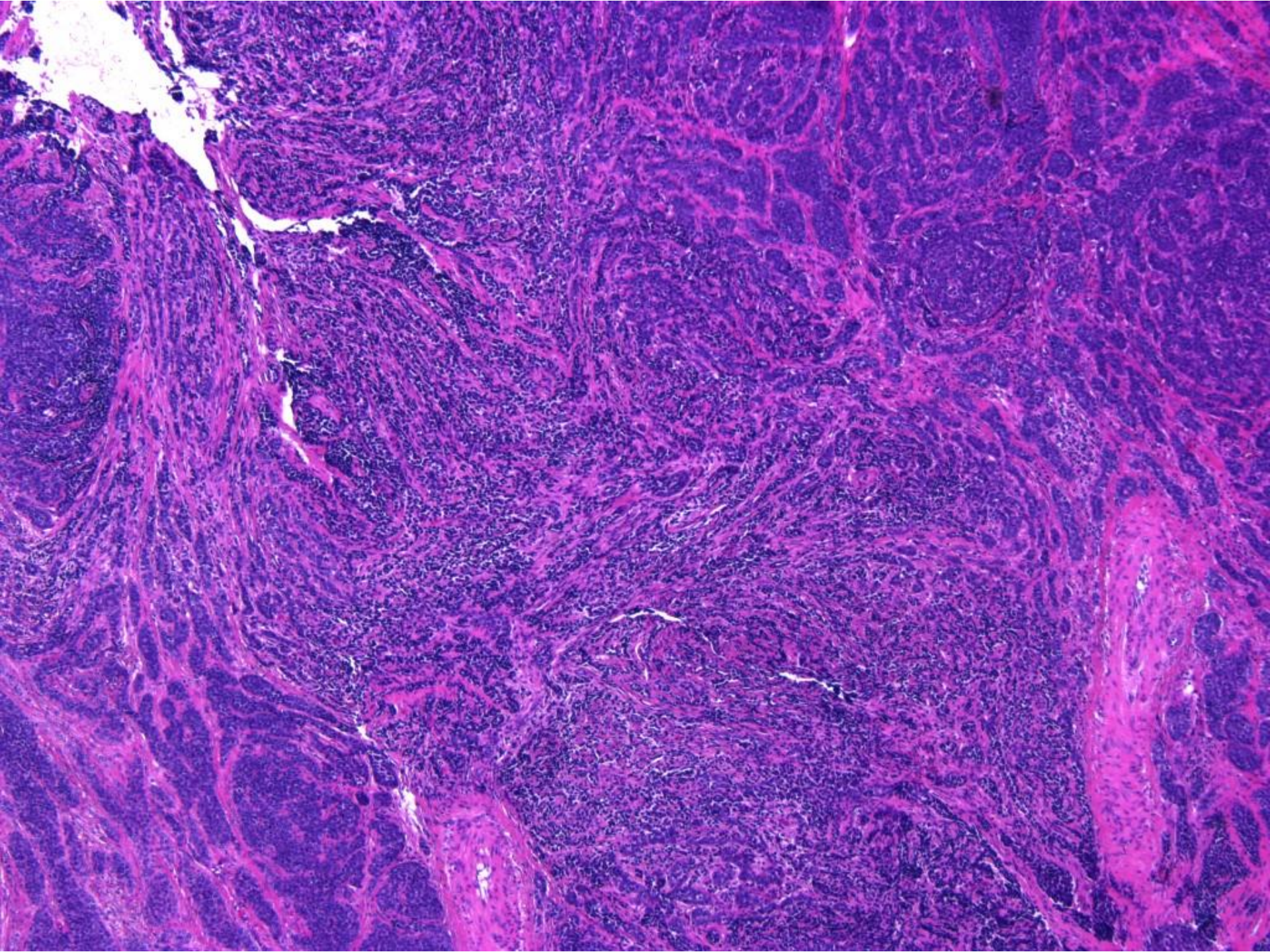


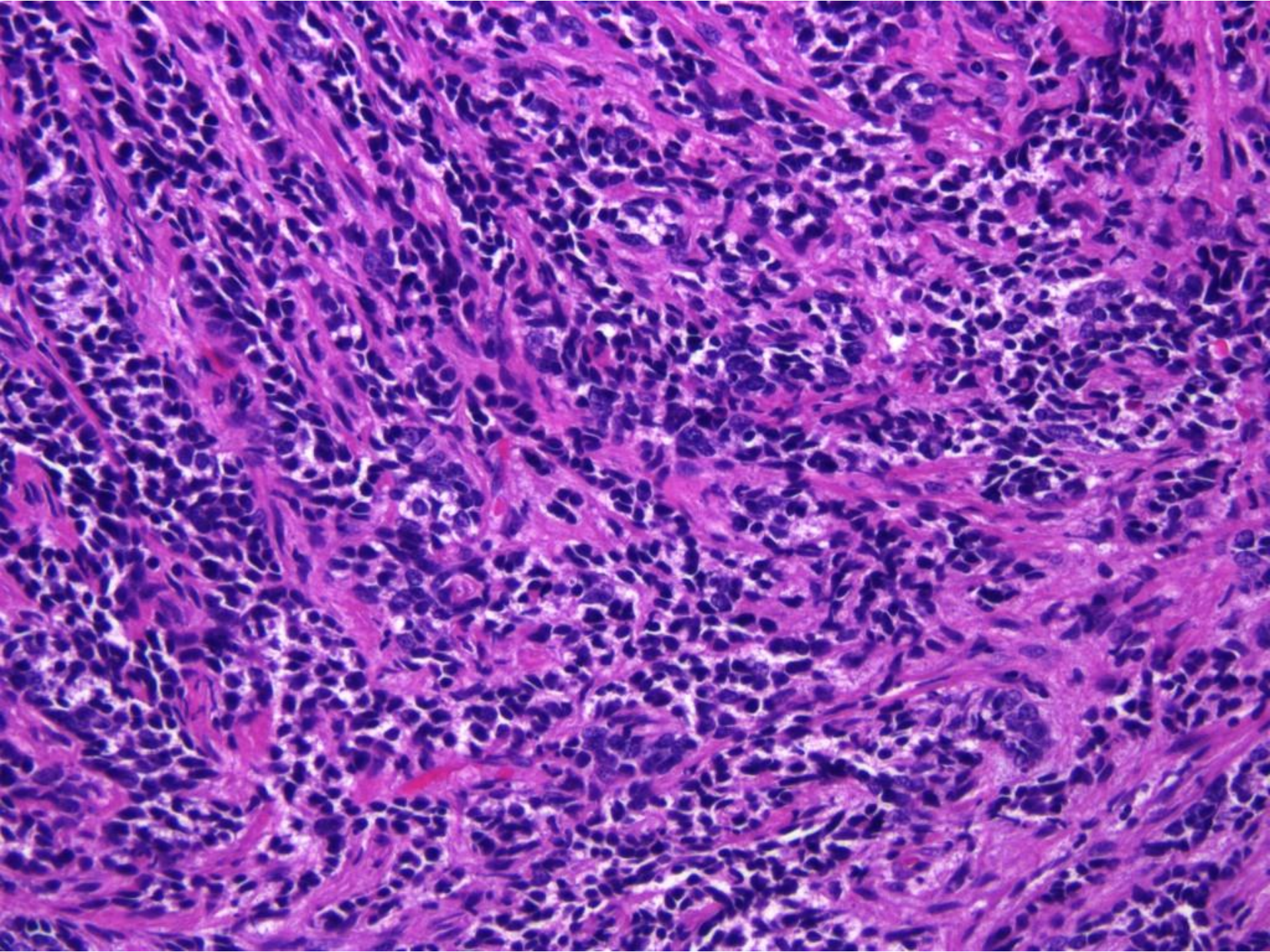


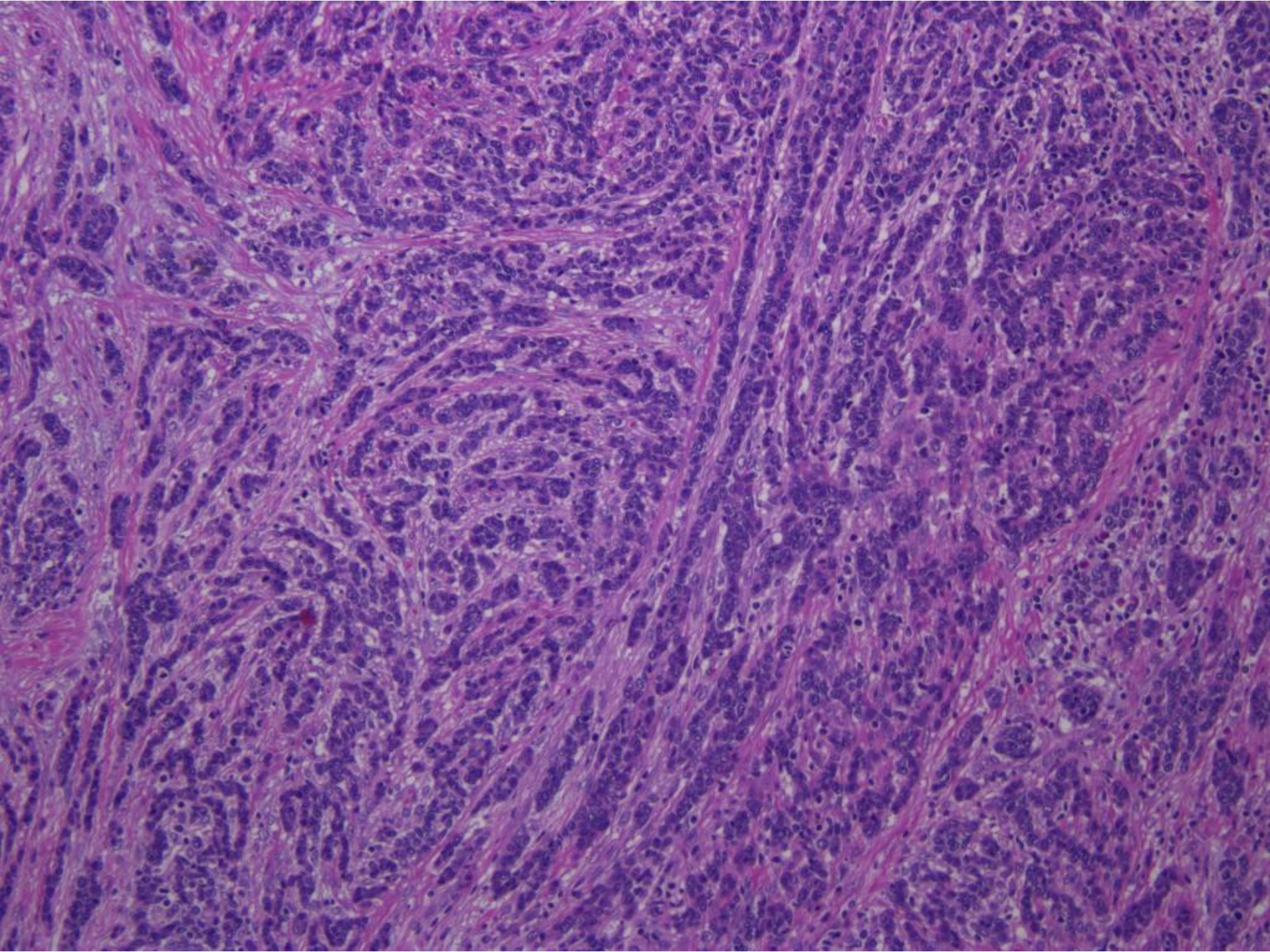


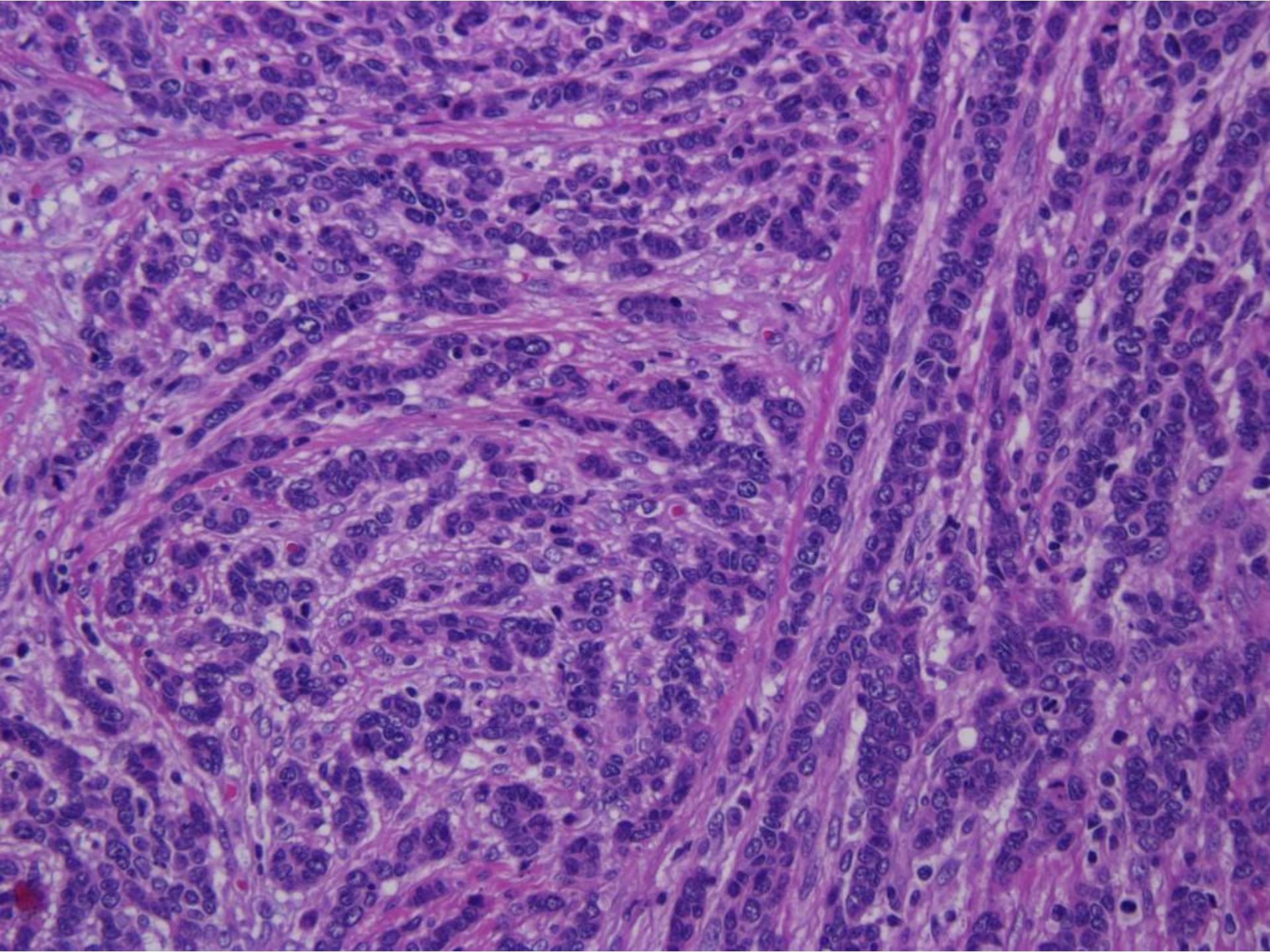


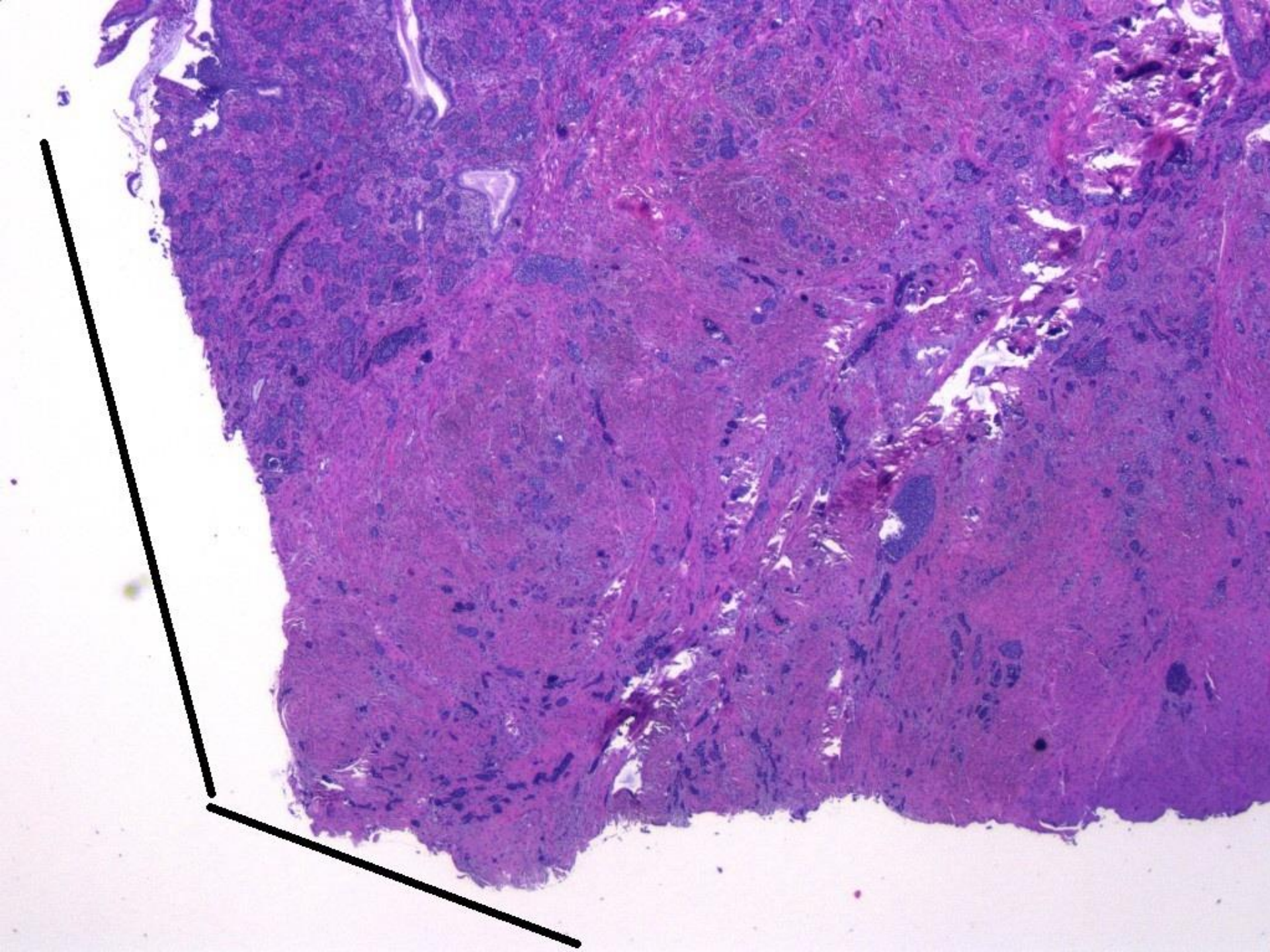


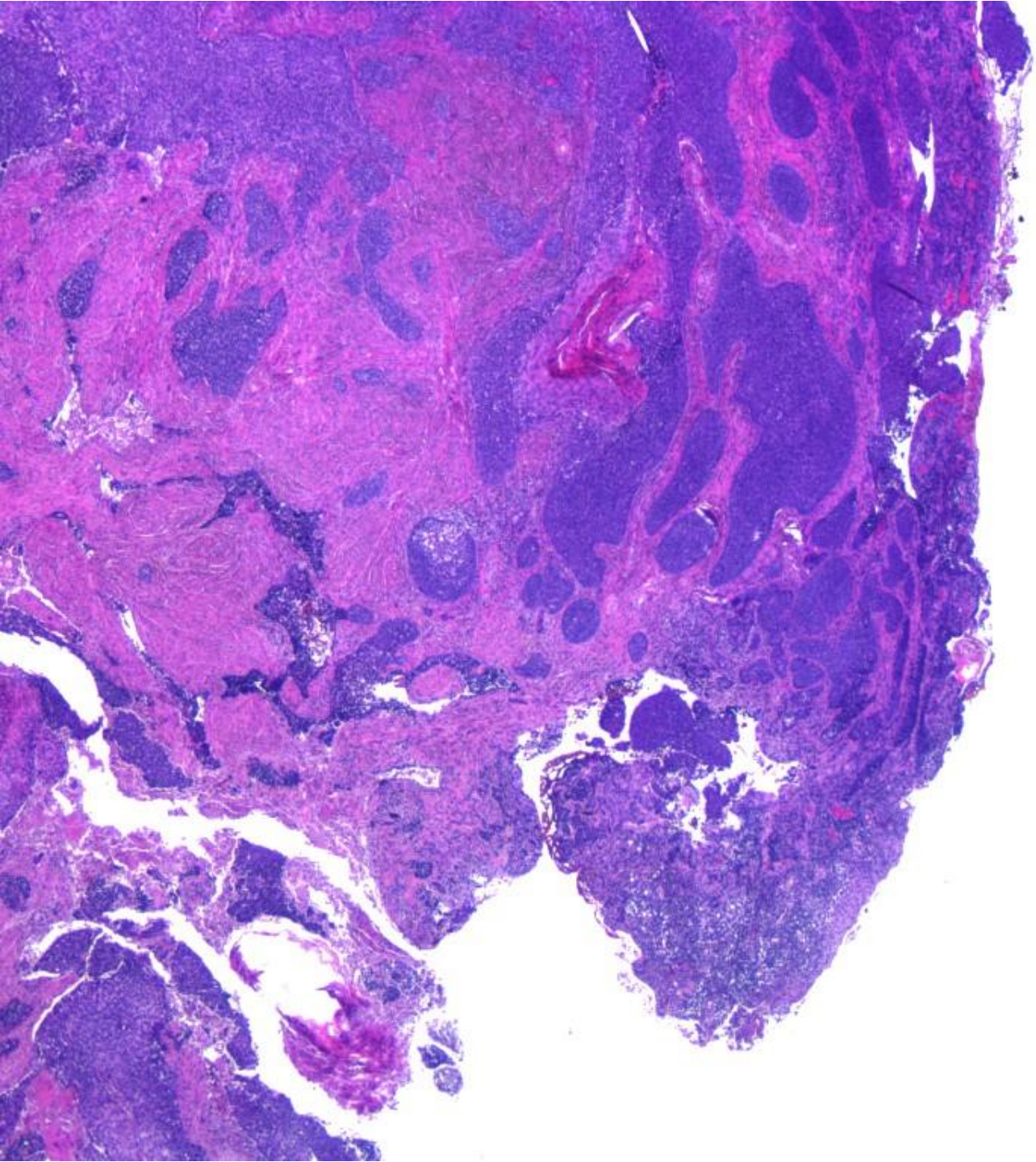


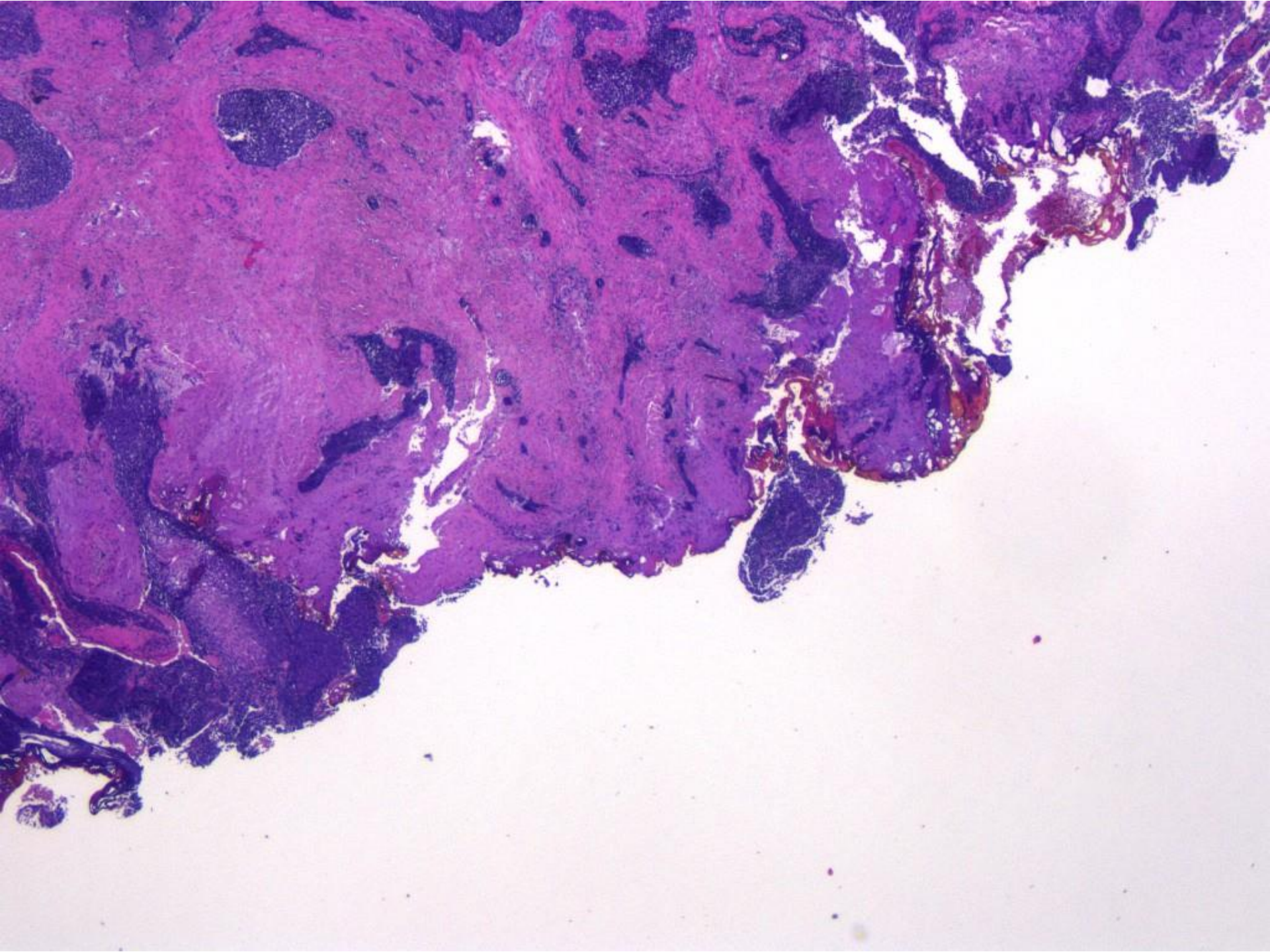


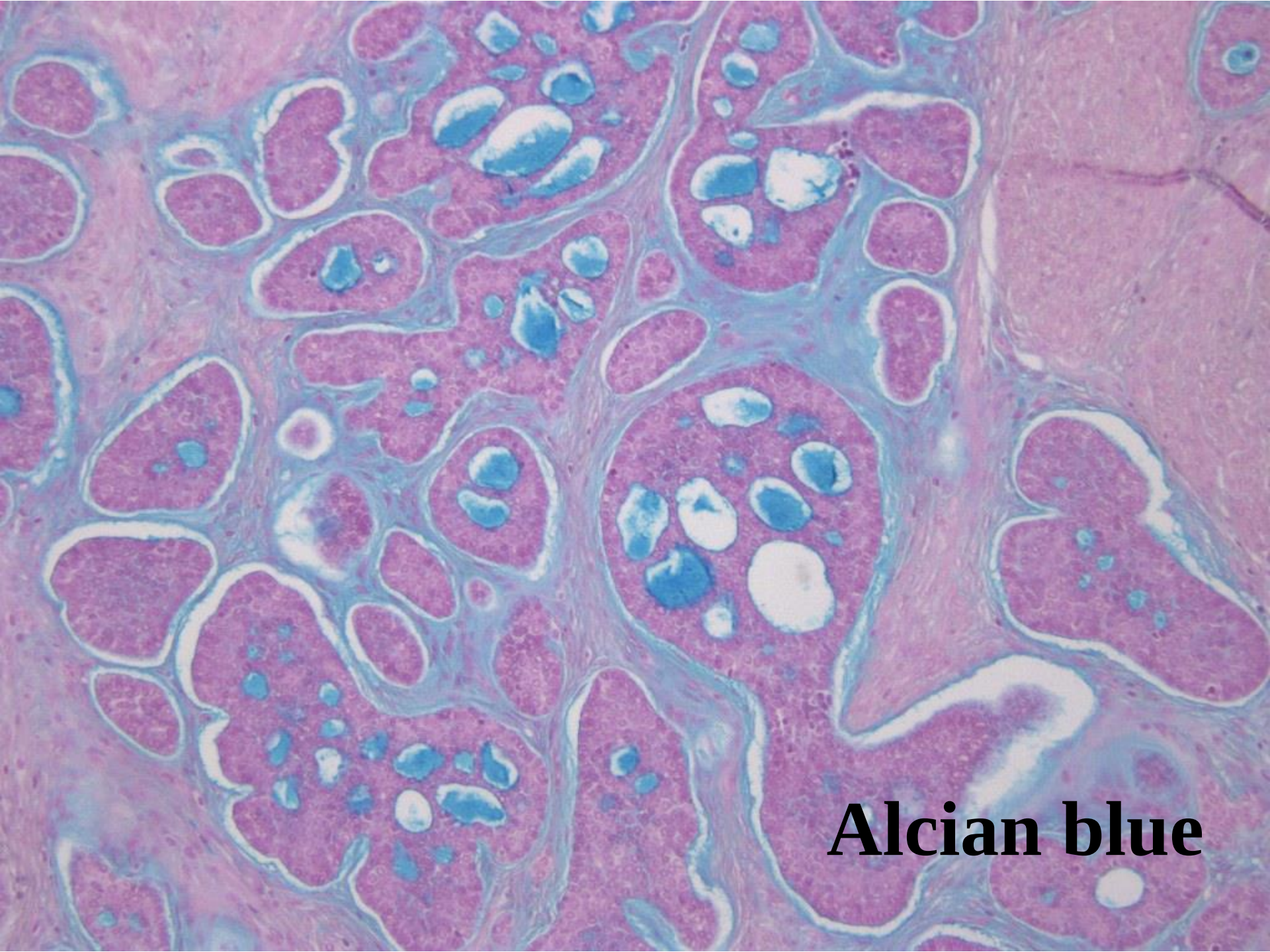


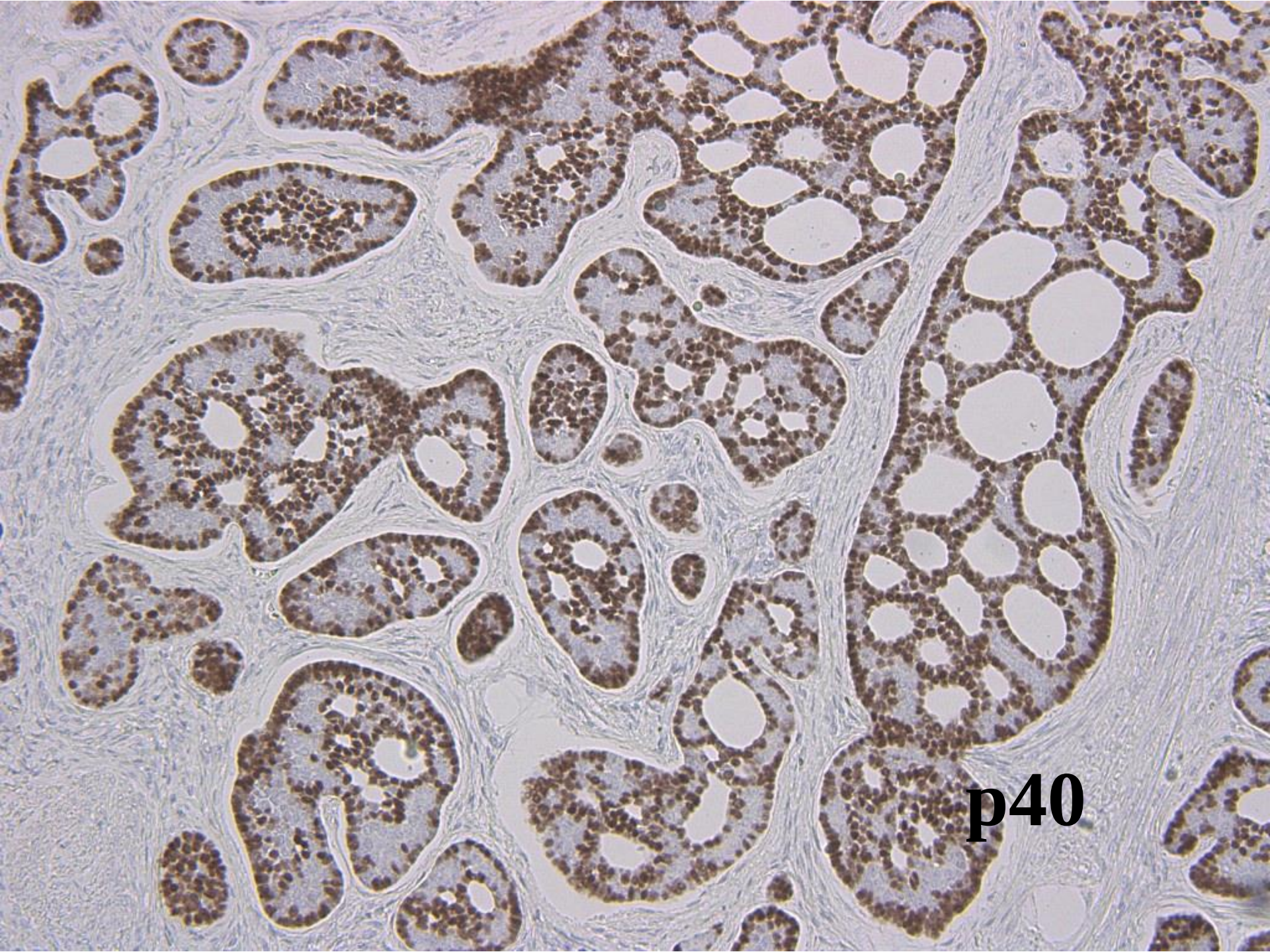









Alcian blue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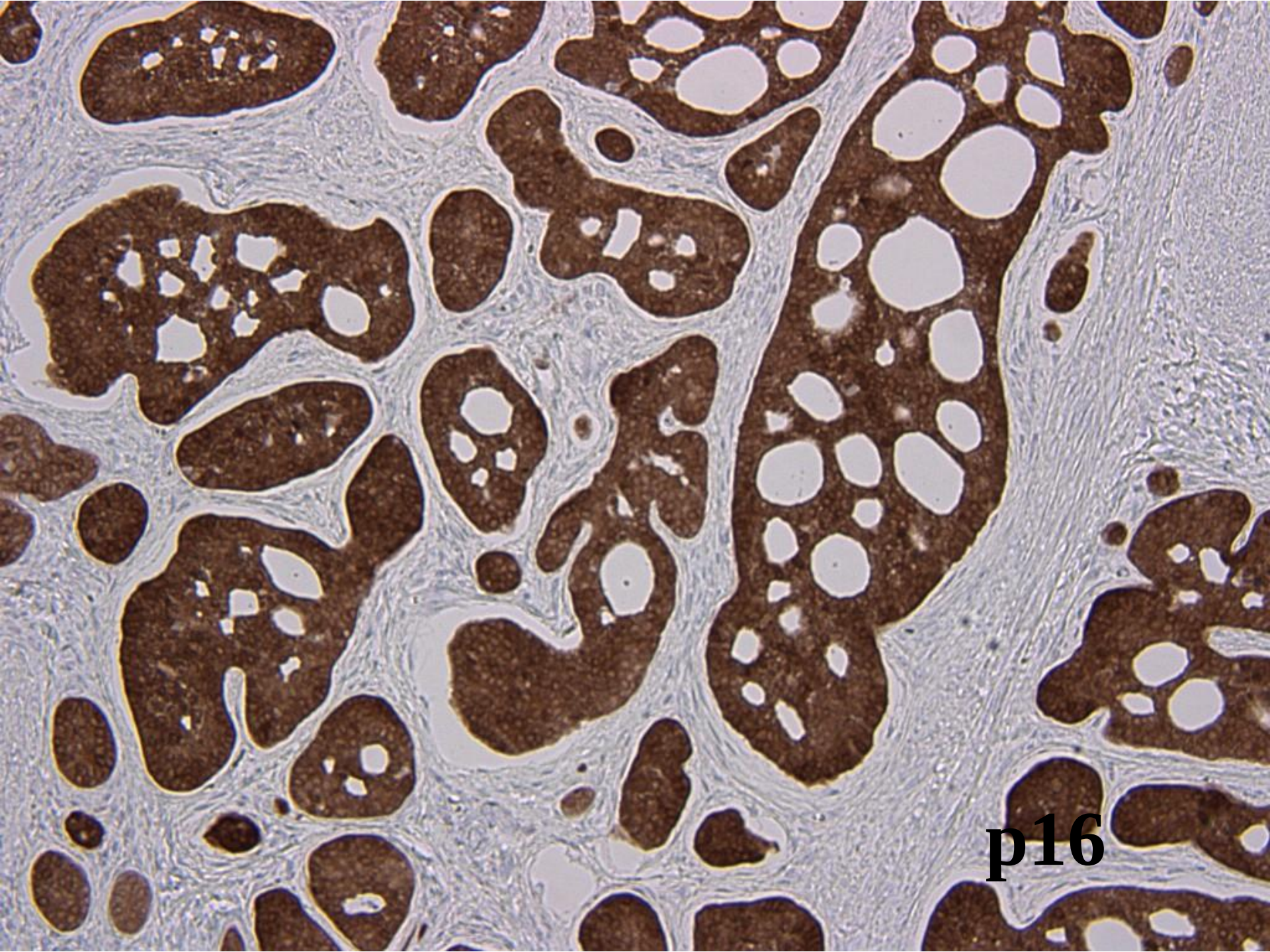
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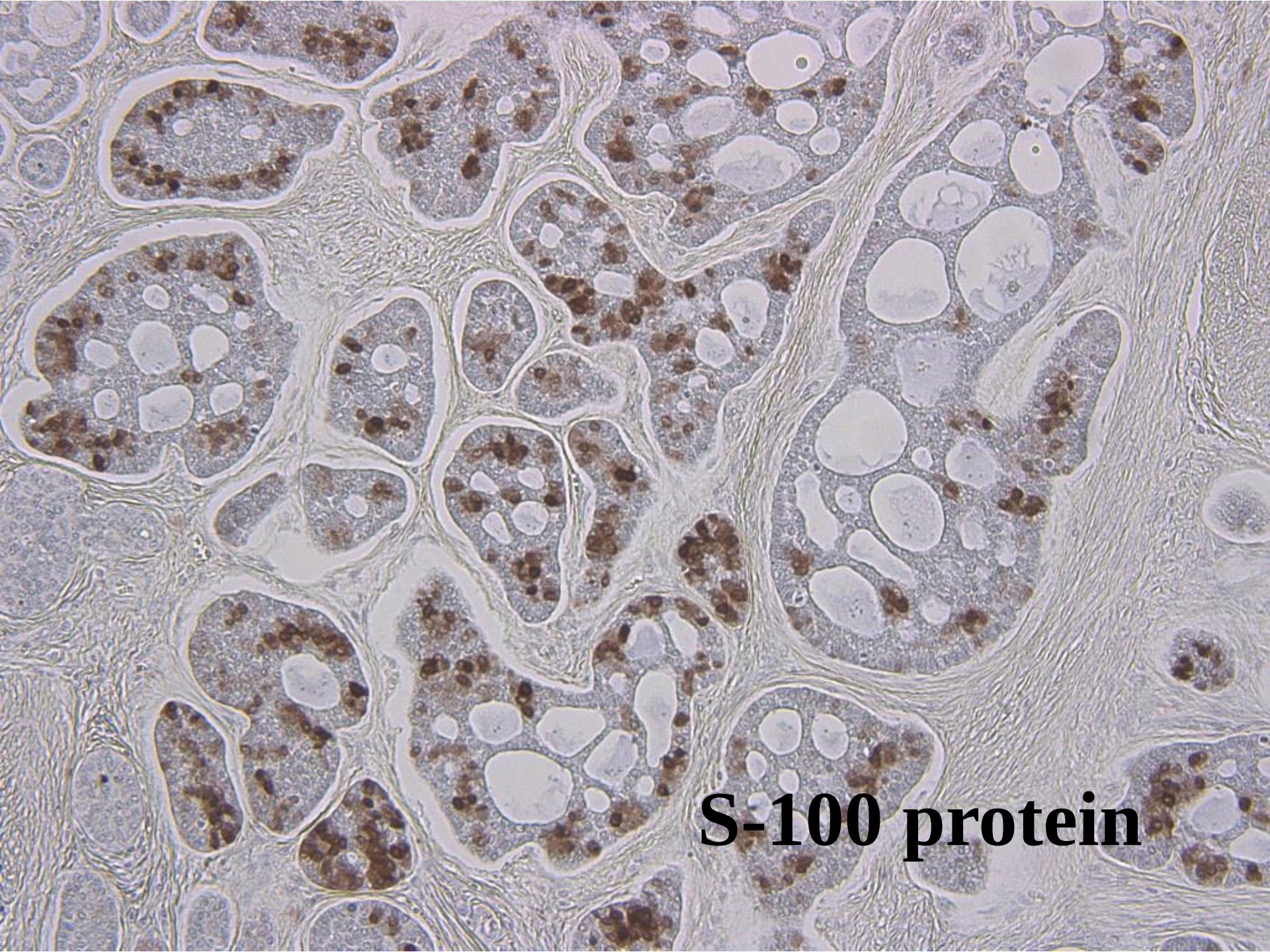
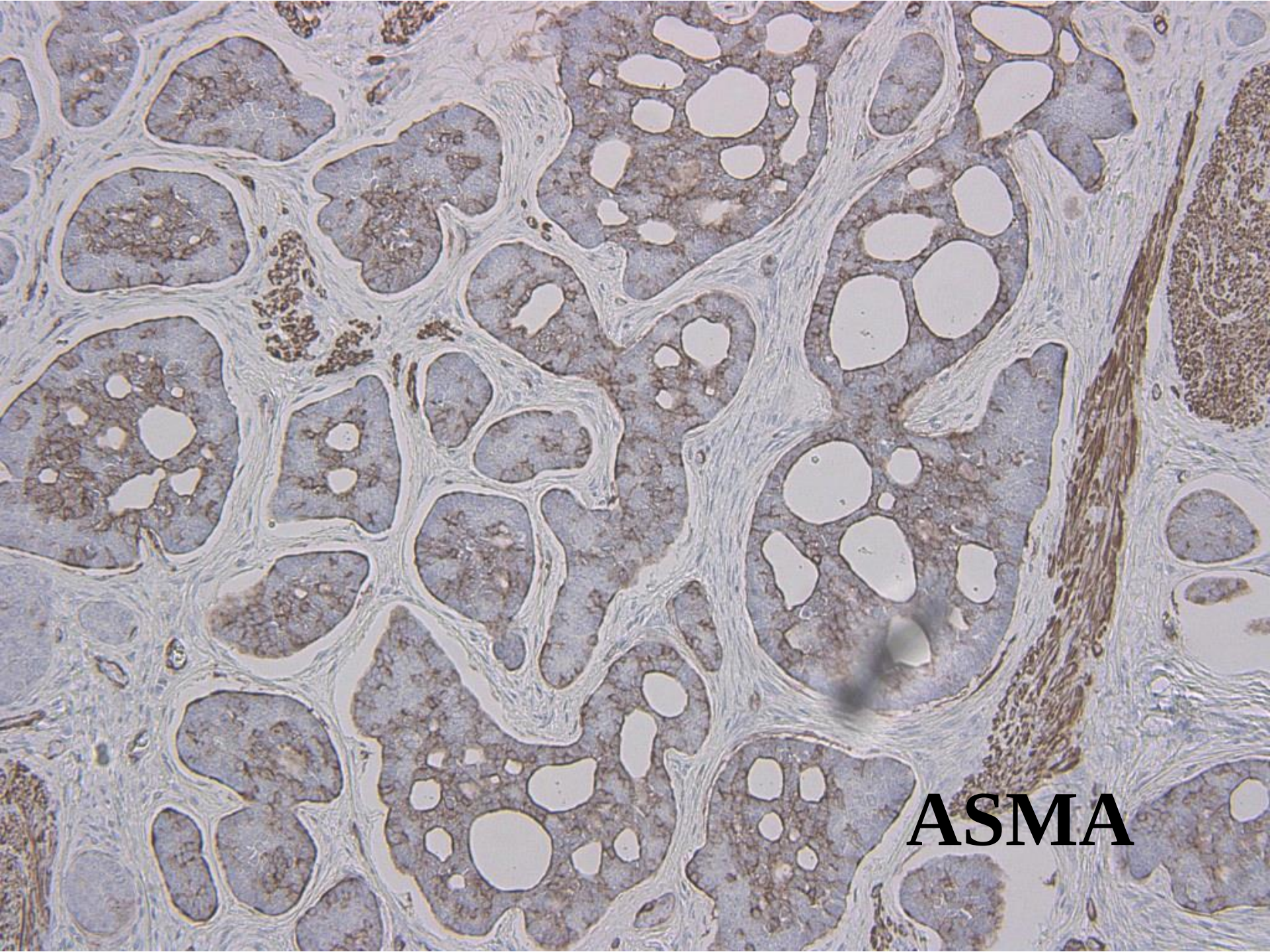
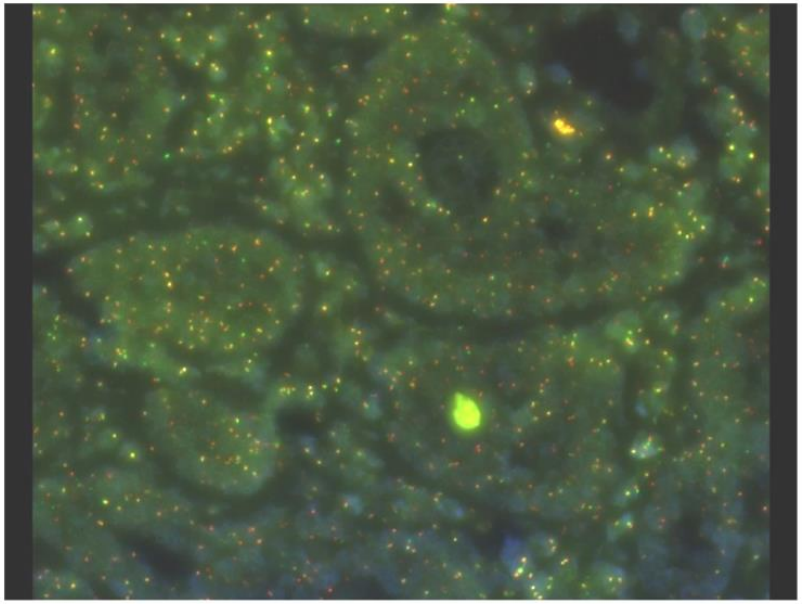

S-100 protein

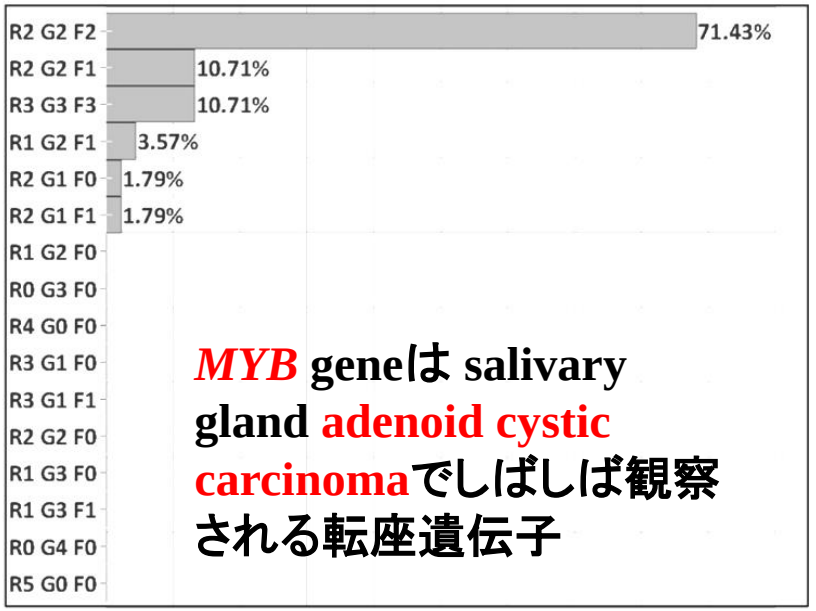

ASMA

MYB gene break apart FISH

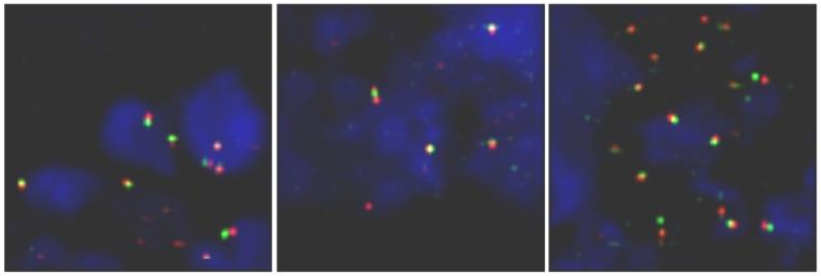
MYB 遺伝子 (FISH) [×400]



シグナル比の分布 (カウント数： 337)



MYB **geneは salivary gland adenoid cystic carcinomaでしばしば観察される転座遺伝子**



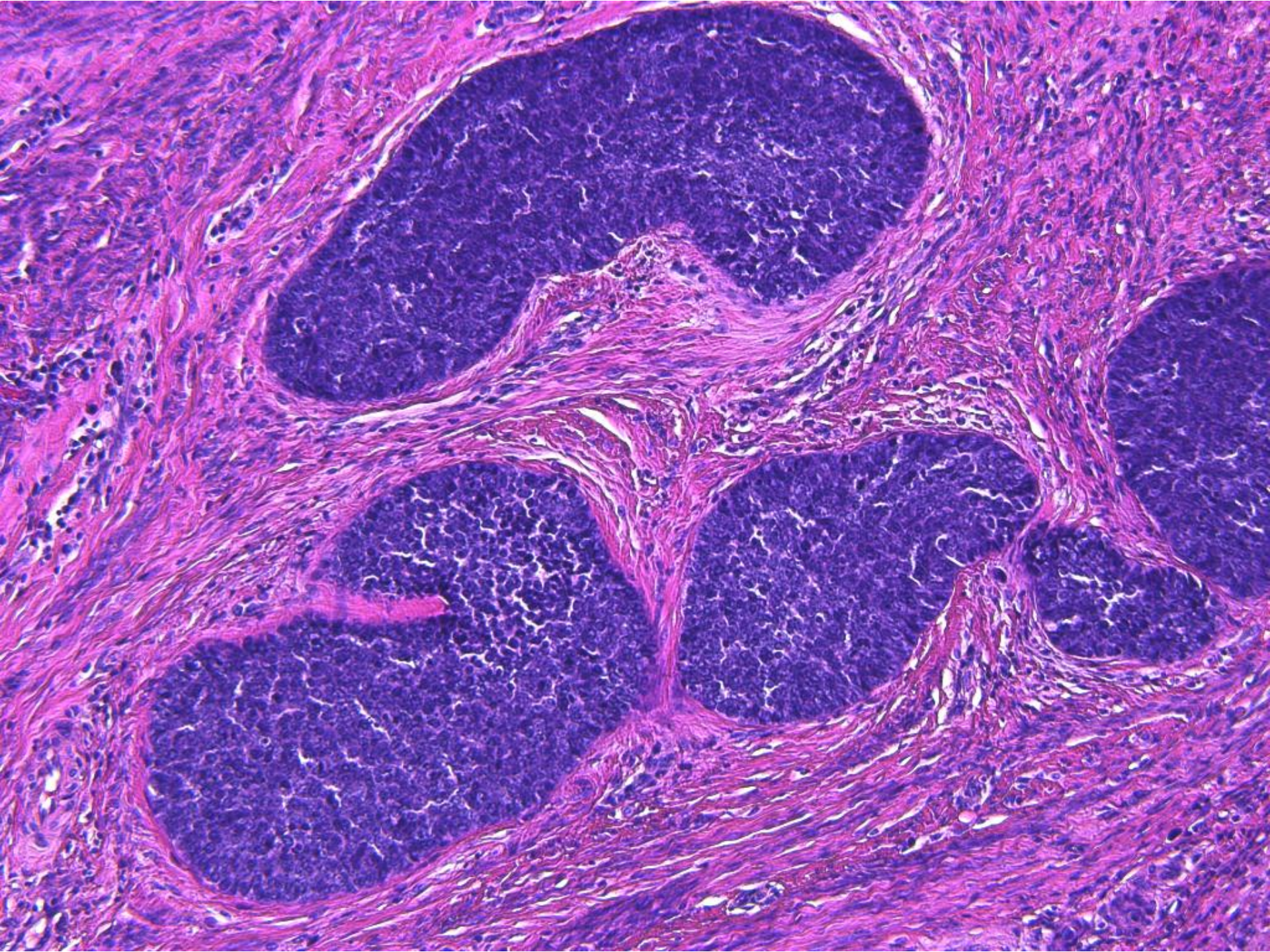
賴田顯辞先生
2015年高知新聞・高知放送・生命の基金・助成による

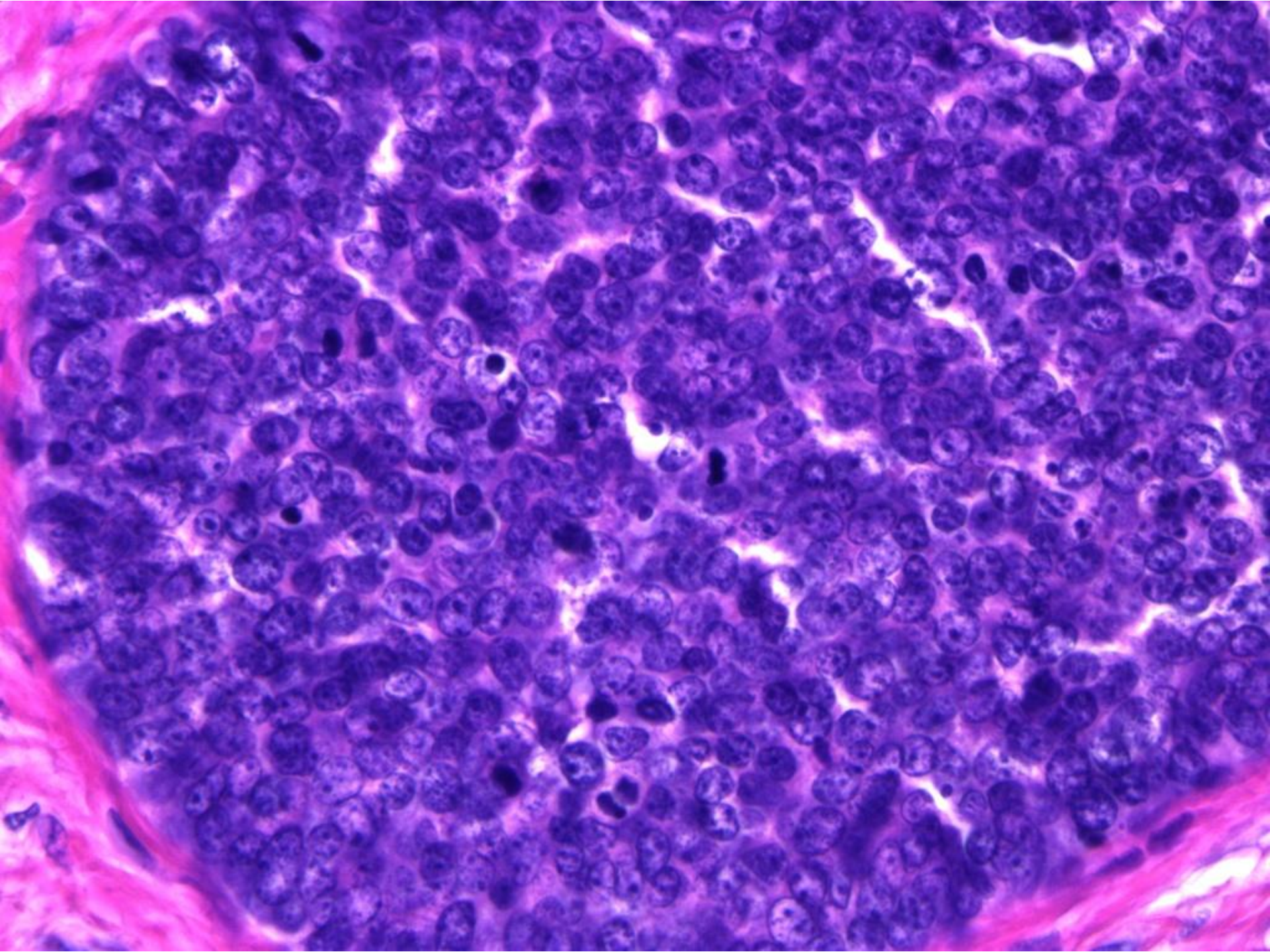
所見
Splitシグナルは17.86%になります。MYBに転座があるかは、equivocalです。

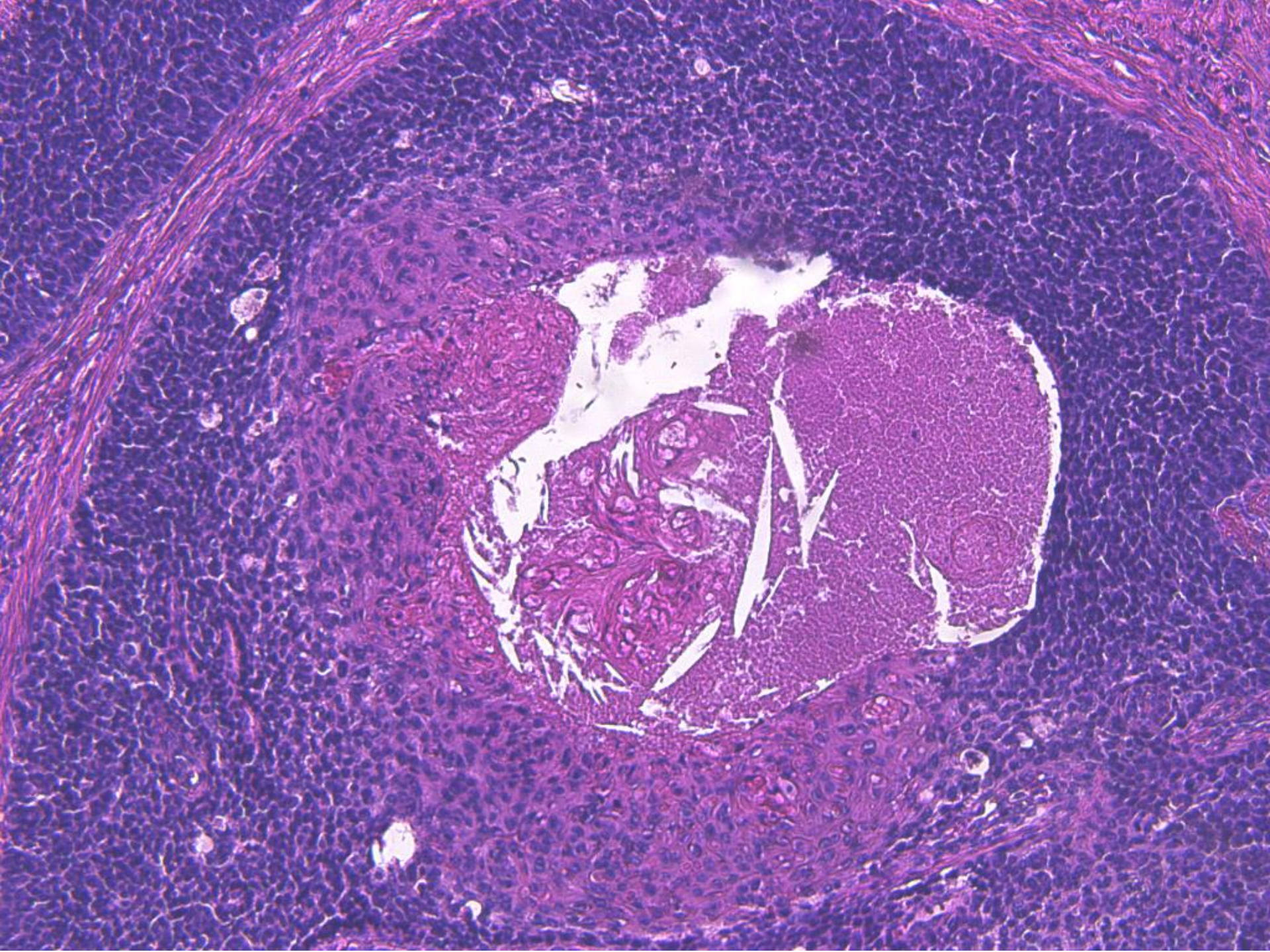
子宮摘出標本

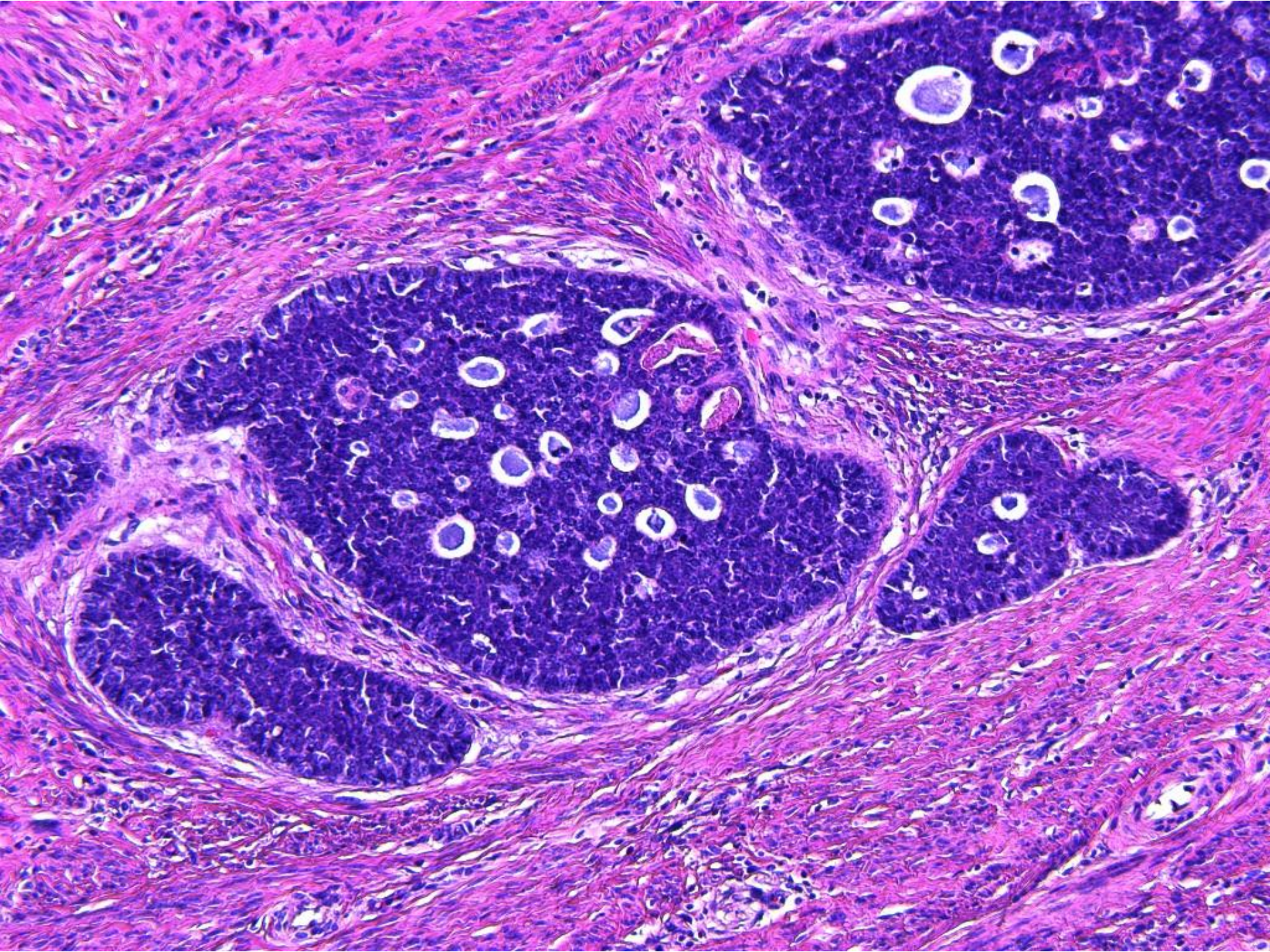

6 7 8 9 20 1 2 3 4 5 6 7 8 9 30 2 3 4 5 6 7 8

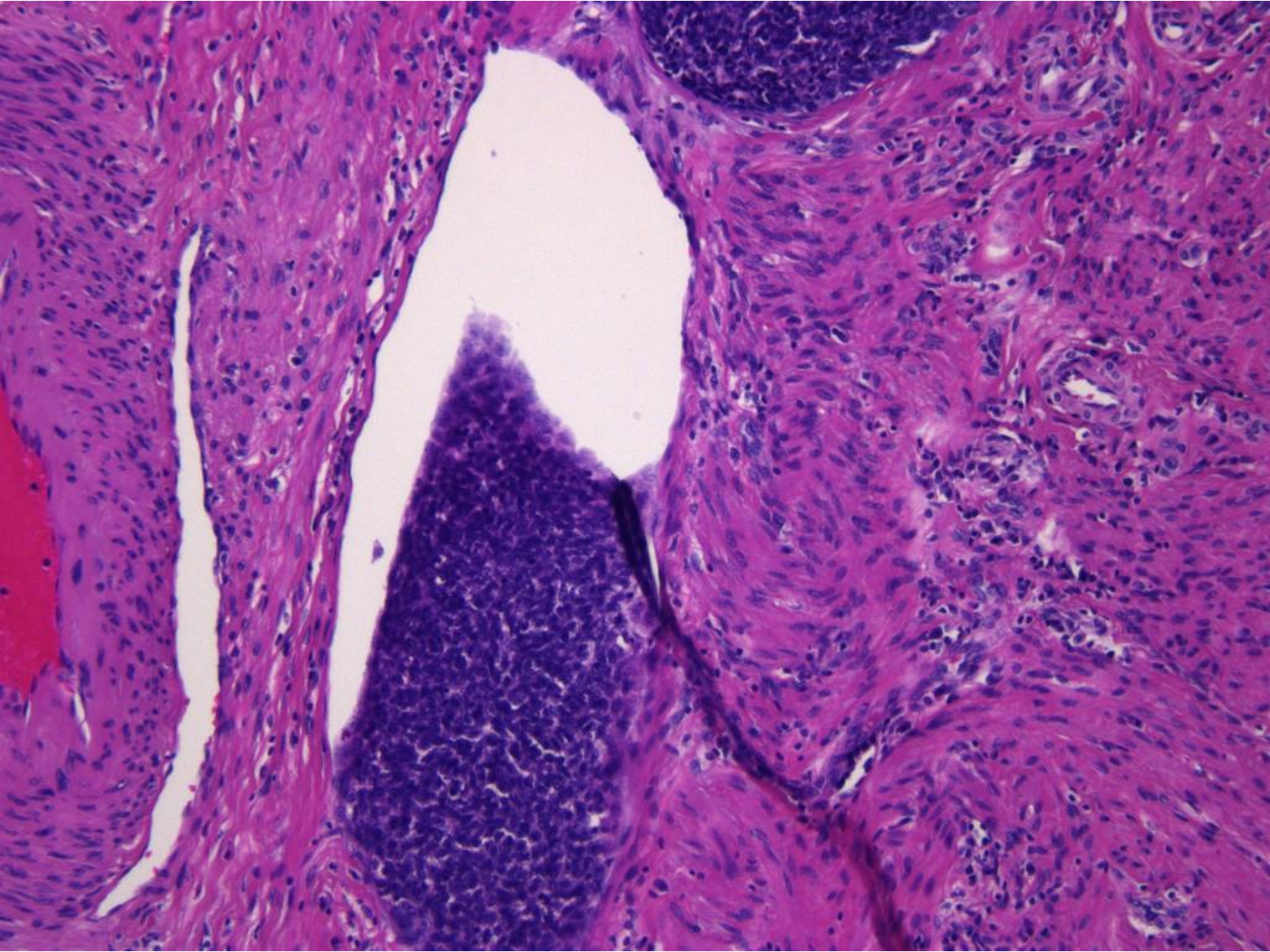

10
20
30

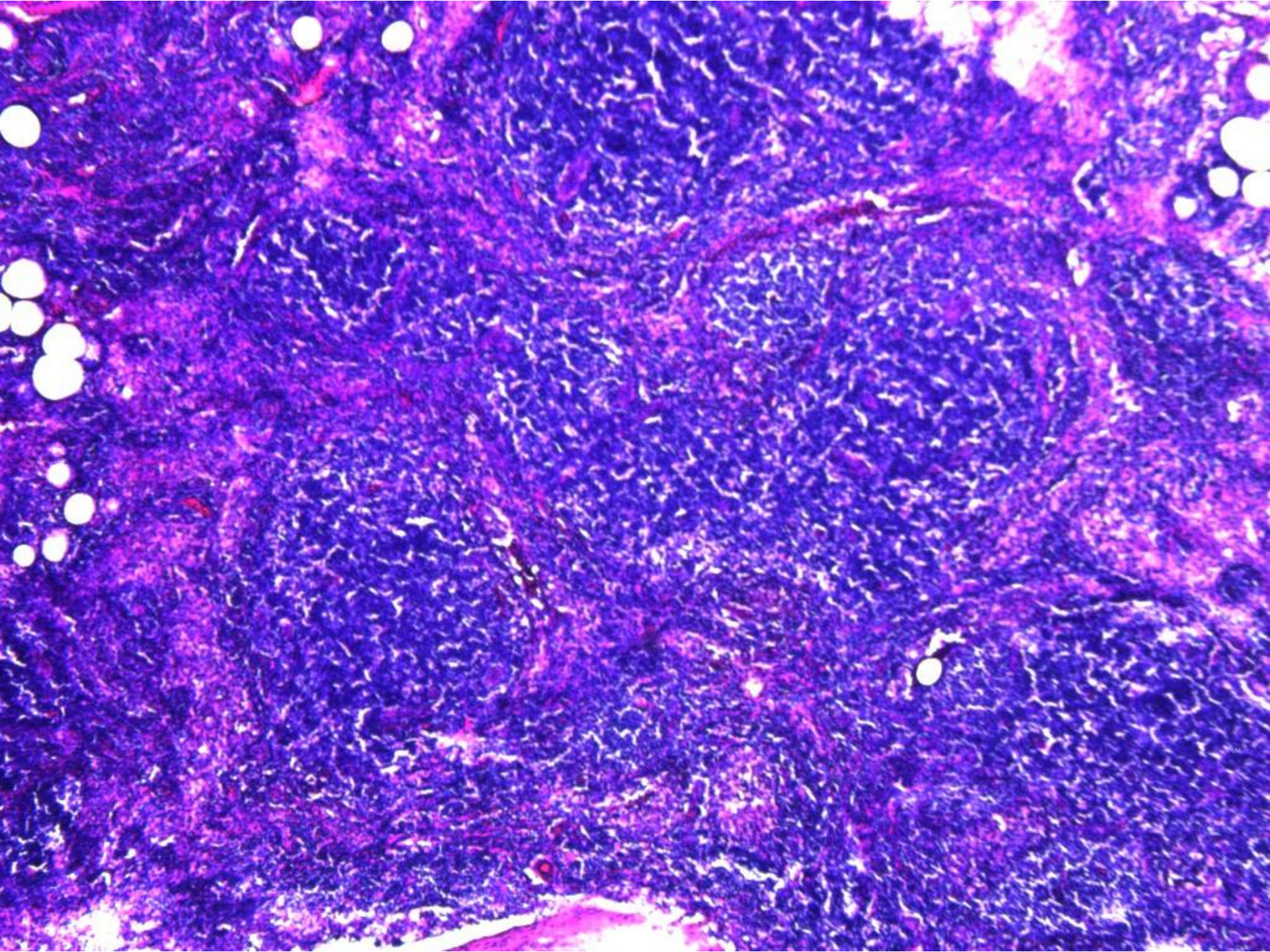










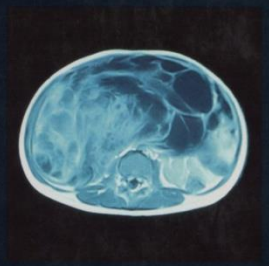


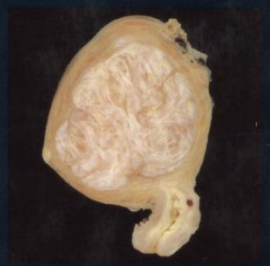
Final Diagnosis

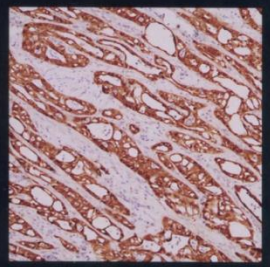
Uterine cervical cancer, 26x25mm, mixed basaloid squamous cell carcinoma, adenoid cystic carcinoma and adenoid basal carcinoma, pT2a1, FIGO IIA1, pN0, hysterectomy

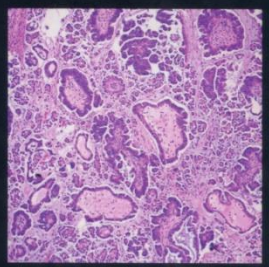
WHO Classification of Tumours of Female Reproductive Organs

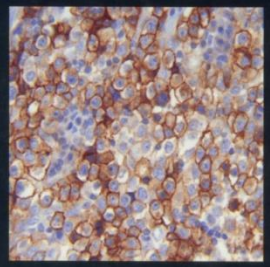
Edited by Robert J. Kurman, Maria Luisa Carcangiu, C. Simon Herrington, Robert H. Young

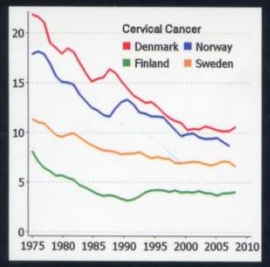


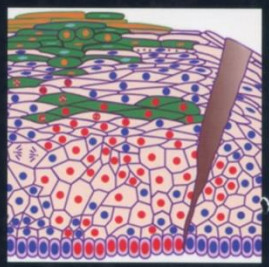


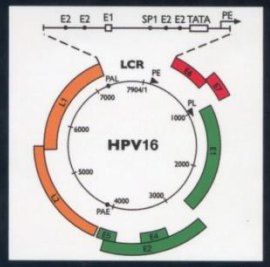












WHO

Basaloid squamous cell carcinomaを含む

Adenoid basal carcinoma, adenoid cystic carcinomaを含む

Adenoid cystic carcinoma (WHO, p196)

1) 定義：唾液腺の腺様嚢胞癌に類似する腫瘍。
2) 組織像：篩状を呈する管状増殖パターンと偽腺腔を有する腫瘍。基底膜様物質を含む。
3) 病因：HPV16との関連がいくつかの症例で示唆。

Adenoid basal carcinoma (WHO, p195)

1) 定義：基底細胞様細胞で構成される小型で、よく分化した円形胞巣からなる上皮性腫瘍。
2) 同義語：adenoid basal epithelioma
3) 病因：High-risk HPVが示唆。
4) 由来：reserve cellsと考えられている。
5) 疫学：50歳以上の女性に多い。
6) 症状：通常なく、偶発的に発見されることが多い。
7) 肉眼所見：たいてい異常として認識されない。
8) 組織所見：皮膚の基底細胞癌に類似する。
9) 免疫染色：p16陽性。CD117は陰性。
10) 予後：低悪性度の腫瘍で、予後良好で、めったに転移しない。

The American Journal of Surgical Pathology 12(2): 134–144, 1988

"Adenoid Cystic" Carcinoma and Adenoid Basal Carcinoma of the Uterine Cervix

A Study of 28 Cases

Judith A. Ferry, M.D., and Robert E. Scully, M.D.

Adenoid cystic carcinoma (ACC) and adenoid basal carcinoma (ABC) of the uterine cervix are rare tumors that have often been regarded as a single entity. We studied 28 cases of these neoplasms, with 14 cases in each category. Most patients were over 60 years of age, and there was a high proportion of black women. The majority of the women with ACC presented with postmenopausal bleeding and had an obvious mass on pelvic examination. Despite the tumors' architectural similarity to ACC of the salivary gland, microscopic examination of the cervical carcinomas showed necrosis, a high mitotic rate, and greater nuclear pleomorphism. In all but one of the cases, the tumor cells were negative for S-100 protein on immunoperoxidase staining—a finding that provides evidence against a myoepithelial component. However, S-100–positive dendritic cells were present in the stroma of the tumors and among the neoplastic cells. The patients with ABC were usually asymptomatic, without a gross abnormality of the cervix. Microscopic examination disclosed small nests of basaloid cells, almost always beneath, and often arising from, in situ or small invasive squamous cell carcinomas. In contrast to ABC, ACC was often complicated by local recurrence or distant metastasis. We conclude that ACC of the uterine cervix differs from ACC of salivary gland origin and is also distinct clinically and pathologically from cervical ABC.

Key Words: Adenoid cystic carcinoma—Adenoid basal carcinoma—Uterine cervix.

Am J Surg Pathol 12(2): 134–144, 1988.

Adenoid cystic carcinoma (ACC) of the uterine cervix was first described in 1949 (29). It is a rare tumor, and most authors have reported either a single case or a small series of cases (4,5,12–15,18,21,22,24,25,28–32,35,38,41). The relation of the cervical tumor to ACC of the salivary gland and upper respiratory tract—neoplasms containing myoepithelial cells (8,9,17)—is unknown. Investigators agree, however, that the cervical tumor typically has an aggressive behavior and is associated with a poor prognosis.

Adenoid basal carcinoma (ABC) of the uterine cervix was first described as an entity distinct from ACC in 1966 (1). Despite the suggestion of a prognosis better than that of ACC (2,42), ABCs have subsequently been included within series of ACC by some authors (31), while others have classified all ACCs of the uterine cervix as ABCs to distinguish them from ACCs of salivary gland origin (37) and some have used the terms "ABC" and "ACC" interchangeably (34). ABCs have been referred to by one group as "basaloid carcinomas" (10), and a neoplasm closely resembling ACC but containing foci resembling ABC has been classified as "adenoid cystic basal cell carcinoma" (27).

In order to clarify the relation of these tumors

Med Electron Microsc (2000) 33:241–245

ORIGINAL PAPER

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Adenoid basal carcinoma of the uterine cervix: a case report with ultrastructural findings

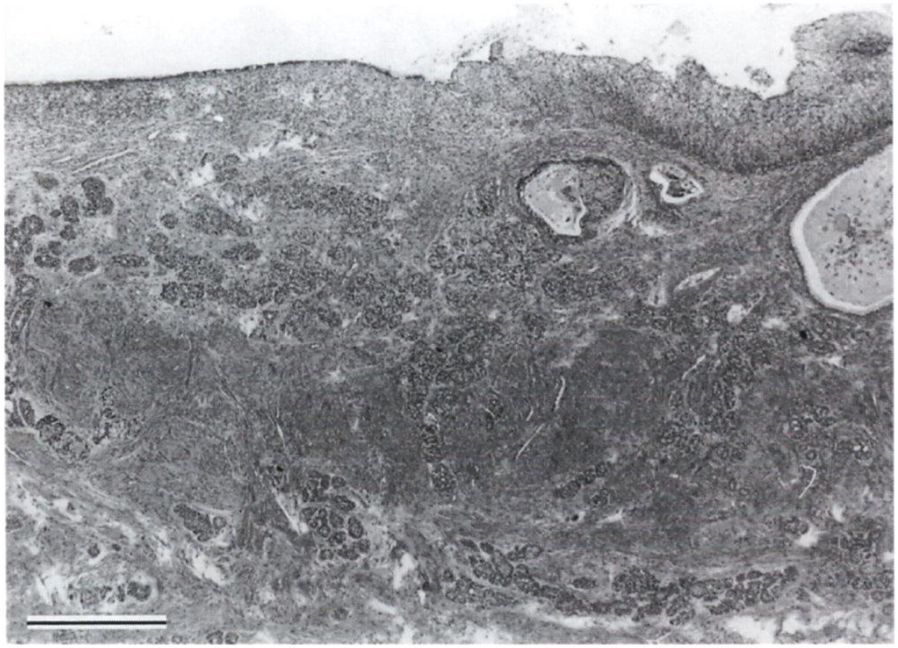

Fig. 1. Low magnification of the uterine cervix. The cervical epithelium in the *right half* of the figure shows cervical intraepithelial neoplasia (CIN) 3. Multiple epithelial nests are seen in the stroma. *Bar* 1 mm

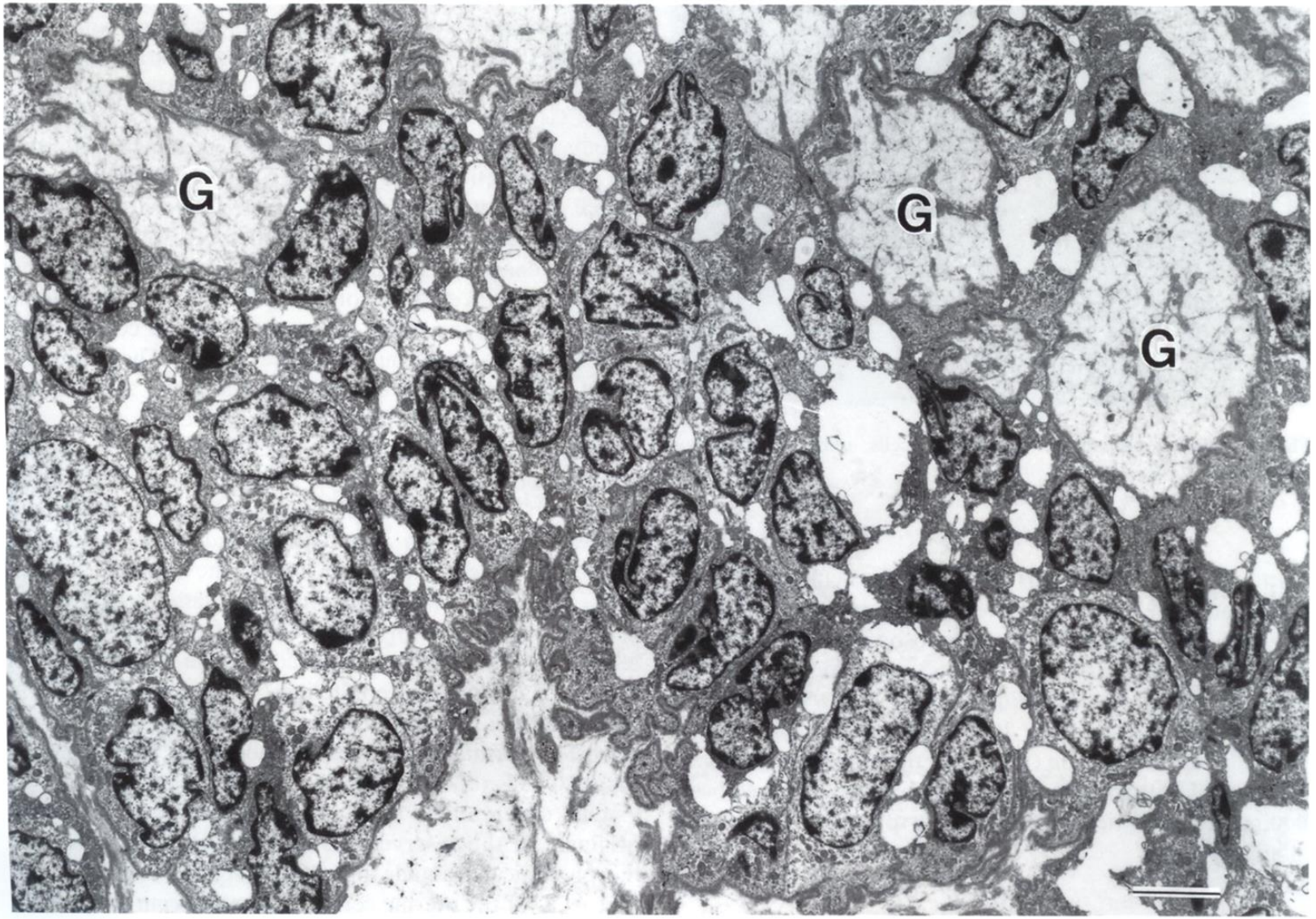

Fig. 5. Ultrastructural findings. Tumor cells have irregular nuclei and scanty cytoplasm. Epithelial nest and glandlike structure (*G*) are covered with basal lamina. *Bar* 5 μm

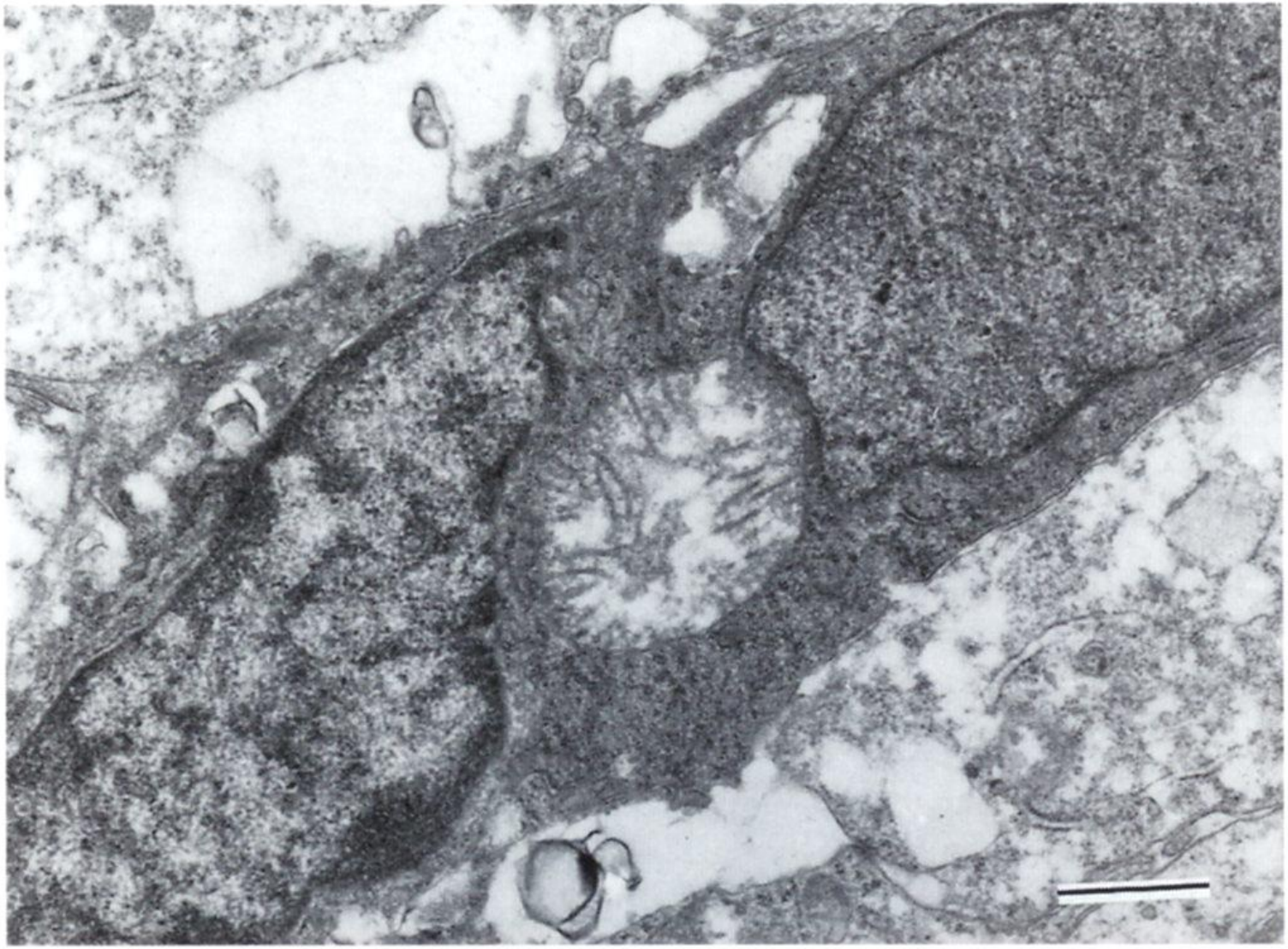

Fig. 6. Small gland with microvilli. *Bar* 1 μm

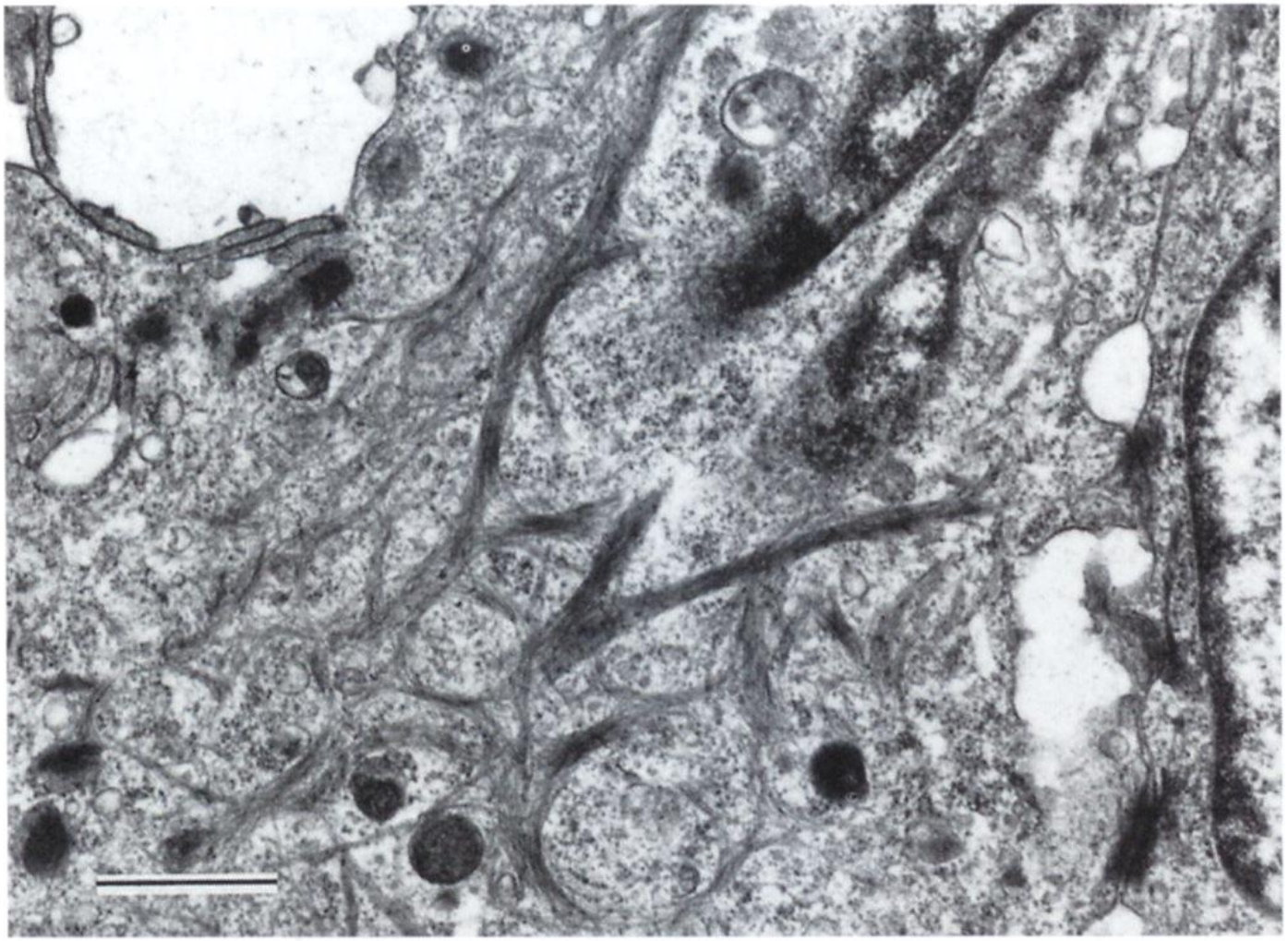

Fig. 7. Thick tonofilaments in tumor cells indicate squamous differentiation. *Bar* 1 μm

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ORIGINAL PAPER

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Adenoid basal carcinoma arising in the cervical polyp: an immunohistochemical study of stromal cells

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Abstract Adenoid basal carcinomas of the uterine cervix are uncommon neoplasms and generally run a favorable clinical course. Although it is well known that these tumors do not evoke the stromal reaction, we immunohistochemically examined a stromal reaction in a case of adenoid basal carcinoma. A 40-year-old woman was found to have a cervical polyp during a medical checkup and underwent polypectomy. Histological examination revealed the finding of adenoid basal carcinoma. Immunohistochemically, a smaller number of CD34-positive and CD31-negative stromal cells, namely fibroblasts, in the stroma of tumor center than in normal cervical stroma were observed. On the other hand, alpha-smooth muscle actin-positive and h-caldesmon-negative stromal cells, namely myofibroblasts, were completely absent in the stroma of tumor center. Finally, our preliminary report suggests that the decrease of CD34-positive fibroblasts in adenoid basal carcinoma may show an early stromal reaction to tumor invasion. Gynecologists and pathologists should bear in mind that adenoid basal carcinoma may arise in a cervical polyp.

Case report

tumors are believed to arise from multipotential reserve cells.[3,5,9] The depth of stromal invasion by basal cell carcinoma ranges from 2 to 10 mm. Additionally, these tumors seldom show metastasis into lymph nodes and seldom behave in an aggressive manner. Therefore, adenoid basal carcinomas may be treated conservatively, and cold-knife conization may be sufficient in appropriate circumstances.[9] It is well known that these infiltrating tumors generally evoke no stromal reaction, but there are no detailed descriptions of the changes of stromal cells in adenoid basal carcinomas. However, Barth et al. reported that CD34-positive stromal cells decreased and myofibroblasts increased in the stroma of invasive uterine cervical cancer.[11] Therefore, we examined the distribution of CD34-positive stromal cells and myofibroblasts in a case with adenoid basal carcinoma to clarify whether adenoid basal carcinoma really evoke the stromal reaction.

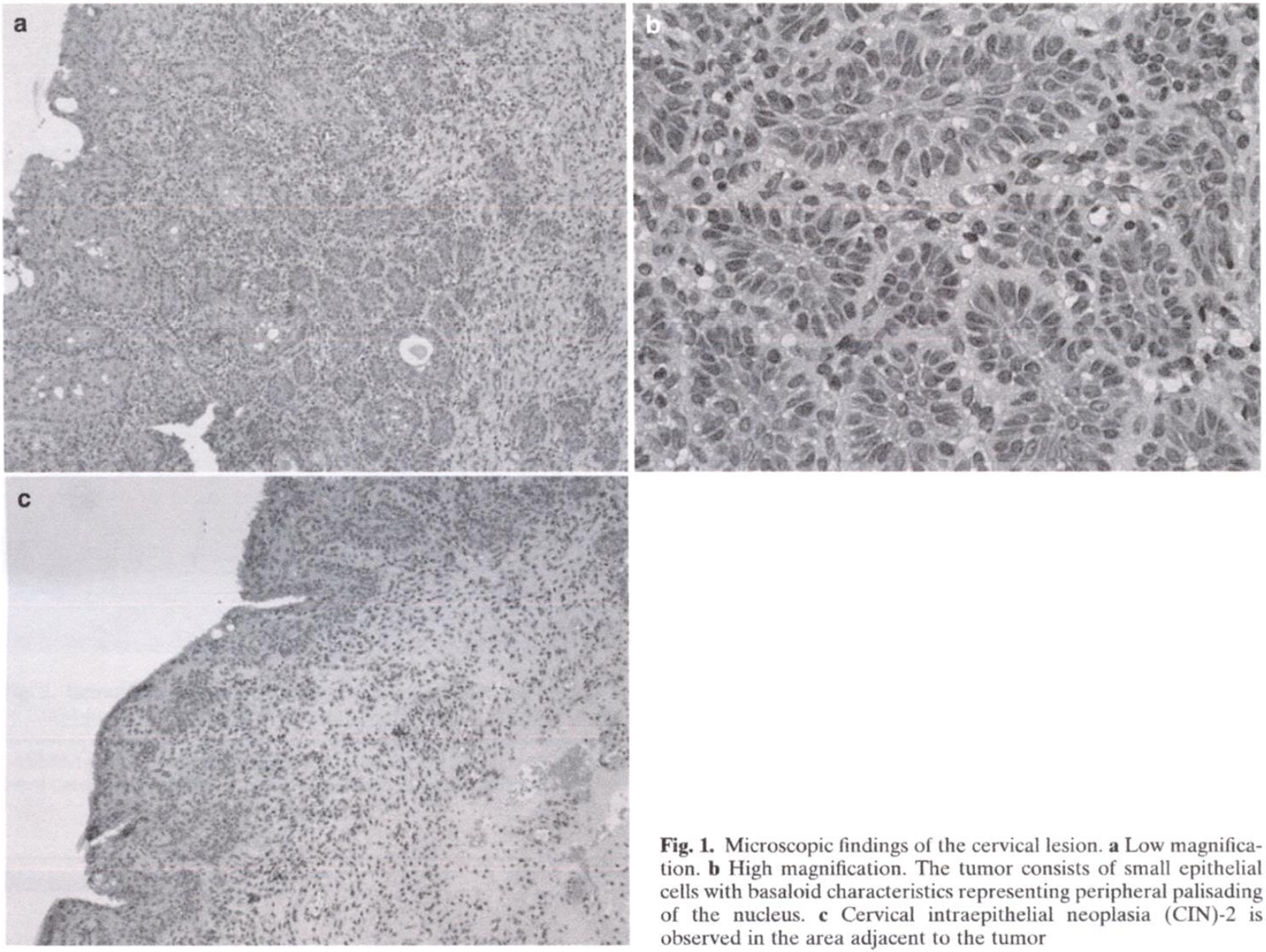

Fig. 1. Microscopic findings of the cervical lesion. **a** Low magnification. **b** High magnification. The tumor consists of small epithelial cells with basaloid characteristics representing peripheral palisading of the nucleus. **c** Cervical intraepithelial neoplasia (CIN)-2 is observed in the area adjacent to the tumor

Take Home Message

1) Basaloid squamous cell carcinoma, adenoid cystic carcinoma, adenoid basal carcinomaが混在する稀な腫瘍を報告した。
2) この腫瘍は3つの腫瘍の分化の方向性という観点において近い関係を示唆するのかもしれない。

Kidney Tumor Friend Meeting in Pilsen June, 2017