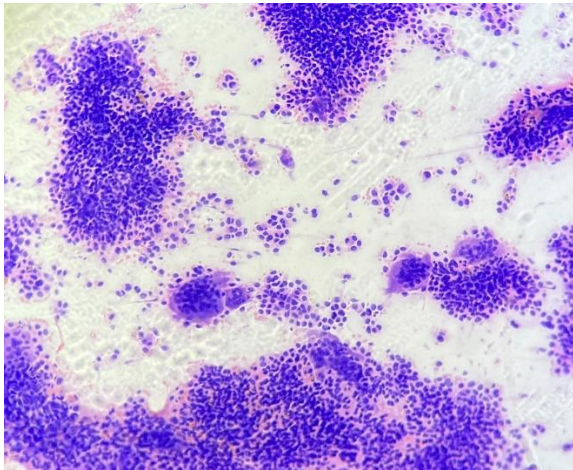


CASE OF THE WEEK - 18.03.2023

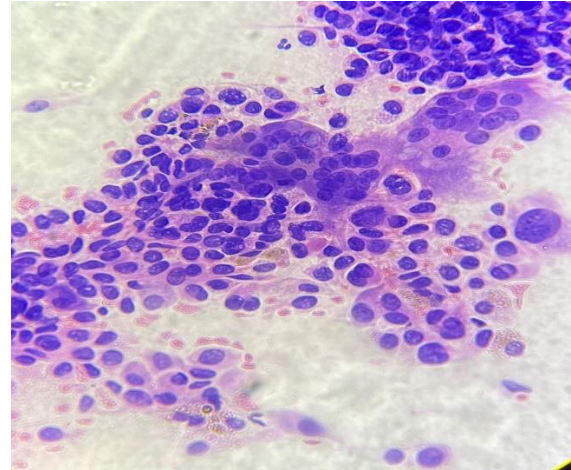
Malignant Giant cell tumour

HISTORY: A 34 years Male patient came with complaint of low back ache. CT scan showed a pleural based lesion in right lung upper zone suggestive of metastasis. MRI spine showed a osteolytic lesion with a soft tissue component in the S2.

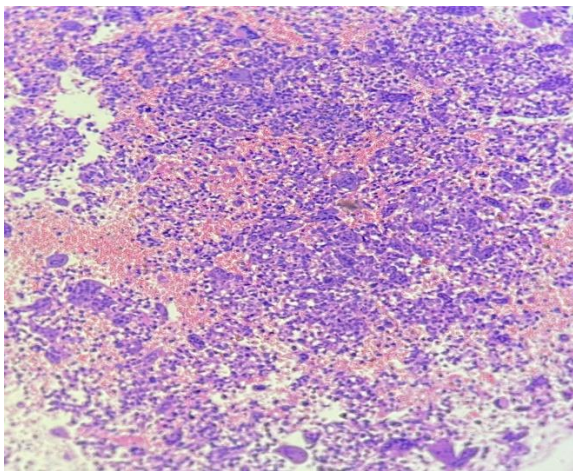
CLINICAL DIAGNOSIS : ? Tuberculosis ? Round cell tumor



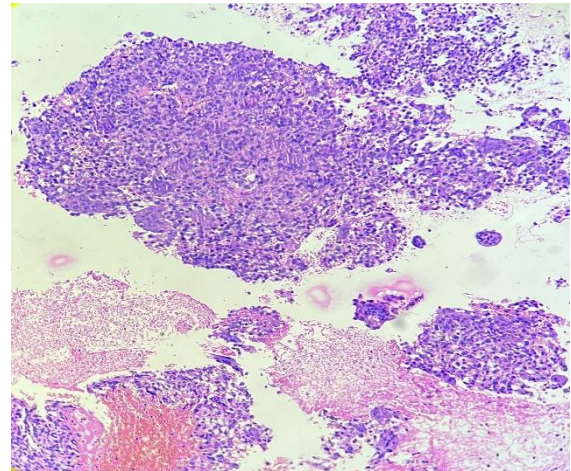
FNAC 100X



FNAC 400X



HPE 100X



HPE 100X

GUIDED FNAC MICROSCOPY : markedly cellular smears show mononuclear cells arranged in dispersed cells and cohesive clusters with nuclear atypia, prominent nucleoli and increased mitotic activity

- Suggesting the possibility of Malignant giant cell tumor

NEEDLE BIOPSY MICROSCOPY – sections reveal large number of multinucleated osteoclast like giant cells in a background of sheets and nests of large mononuclear histiocytic cells. These cells exhibit nuclear atypia, prominent nucleoli and increased mitotic activity. Binucleated stromal cells are noted. Stroma shows extensive areas of necrosis and hemorrhages with presence of foamy macrophages and siderophages.

IMPRESSION – Suggestive of Malignant giant cell tumor