



HKSCCP

CPC September 23, 2002

QEH

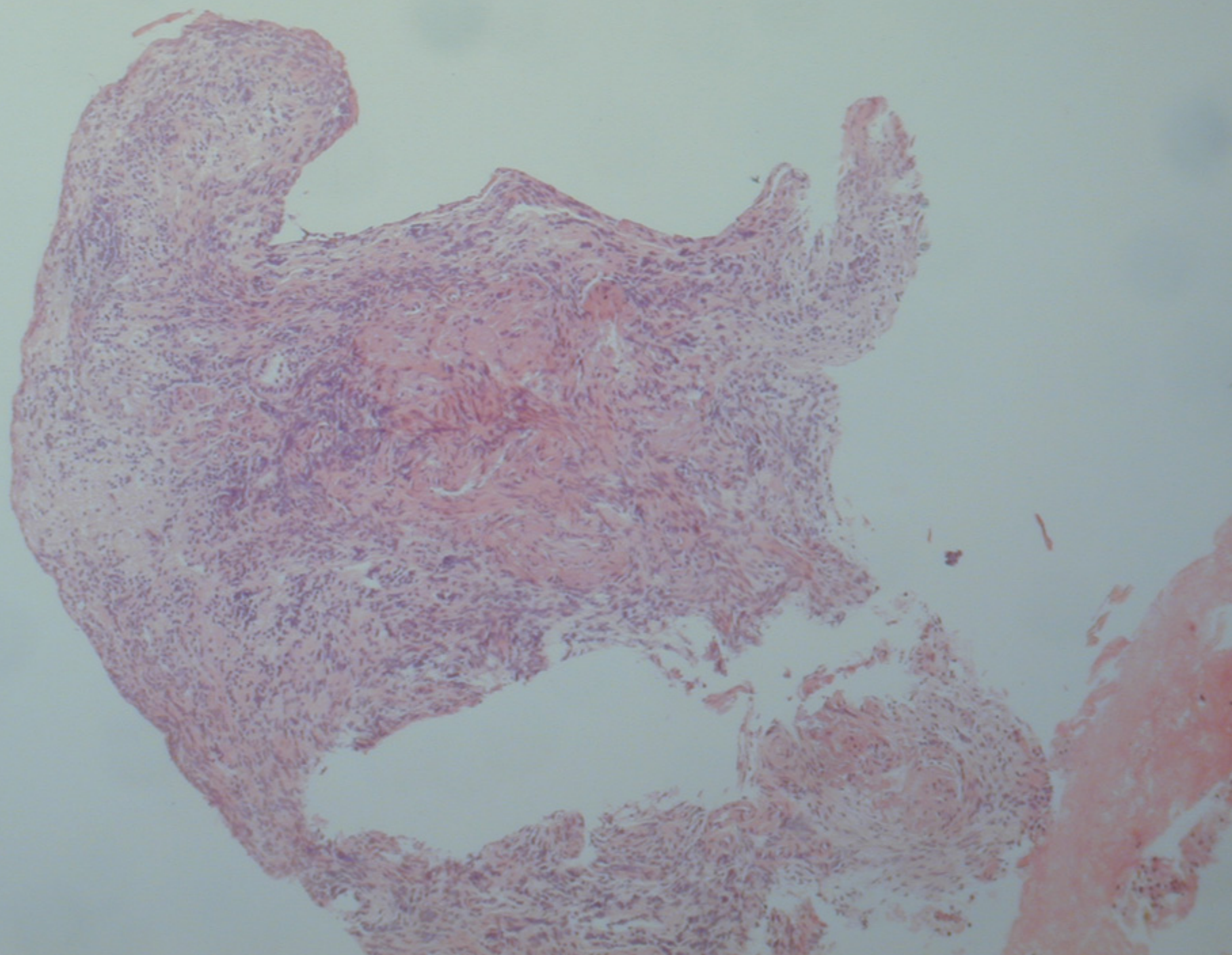
Dr Chan Keeng Wai

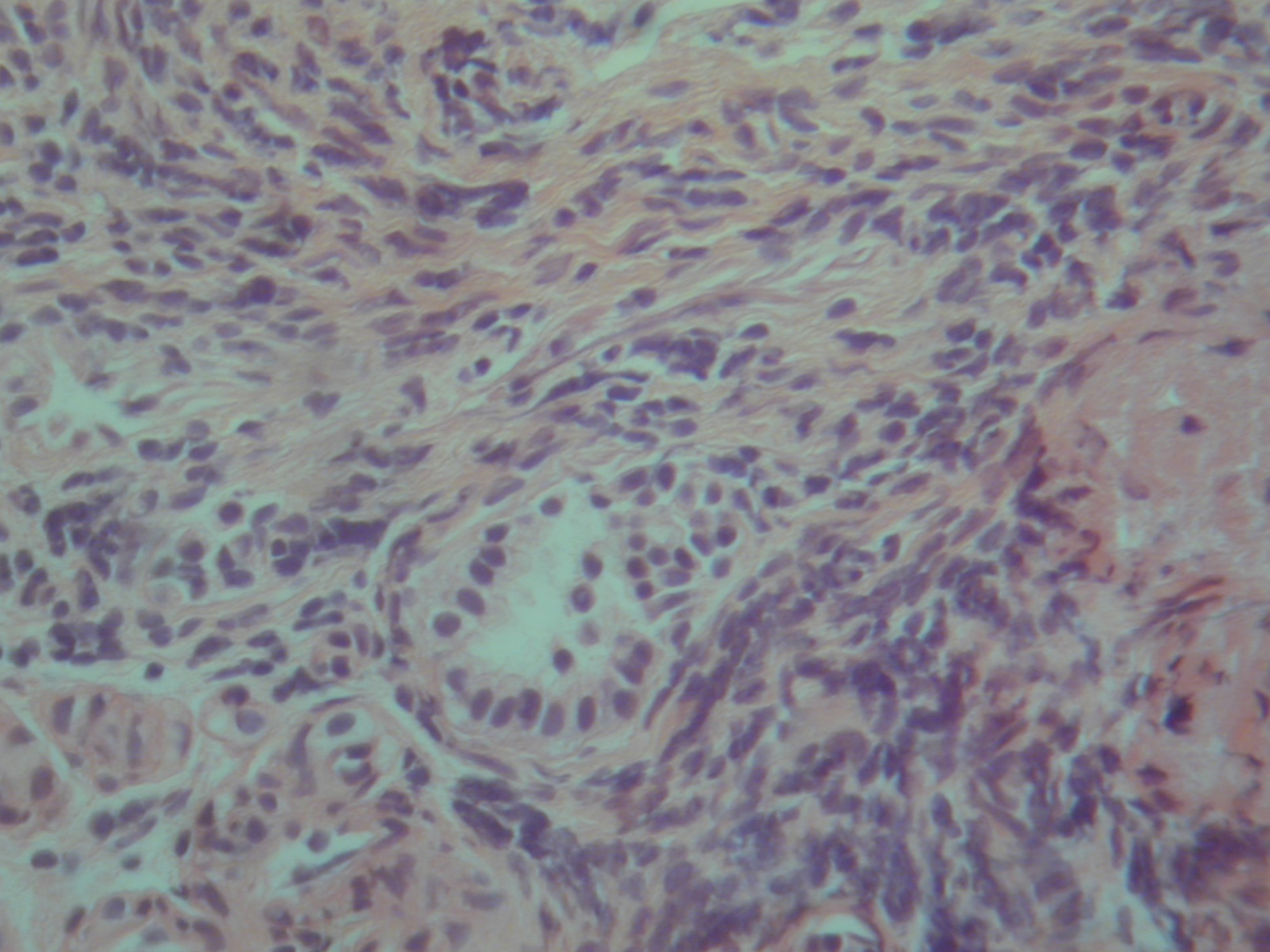
Clinical History 1

- Chinese F/66
- August 6, 1999 : Cervical smear showed AGUS. History of cystic glandular hyperplasia of endometrium in 1989.
- D & C : Scanty inactive endometrium

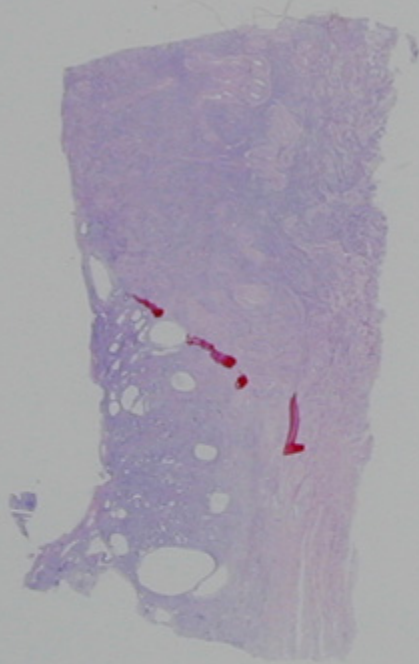
Clinical History 2

- Cervical smear : recurrent AGUS in May 02
- Colposcopy : Normal
- June 5, 02 : THBSO
- Gross specimen: 80 gm
- Uterus - 7 x 5 x 3 cm
- Ectocervix - 4 x 3 cm, smooth surface
- Endometrium - thin and smooth
- Others - right hydrosalpinx; both ovaries NAD



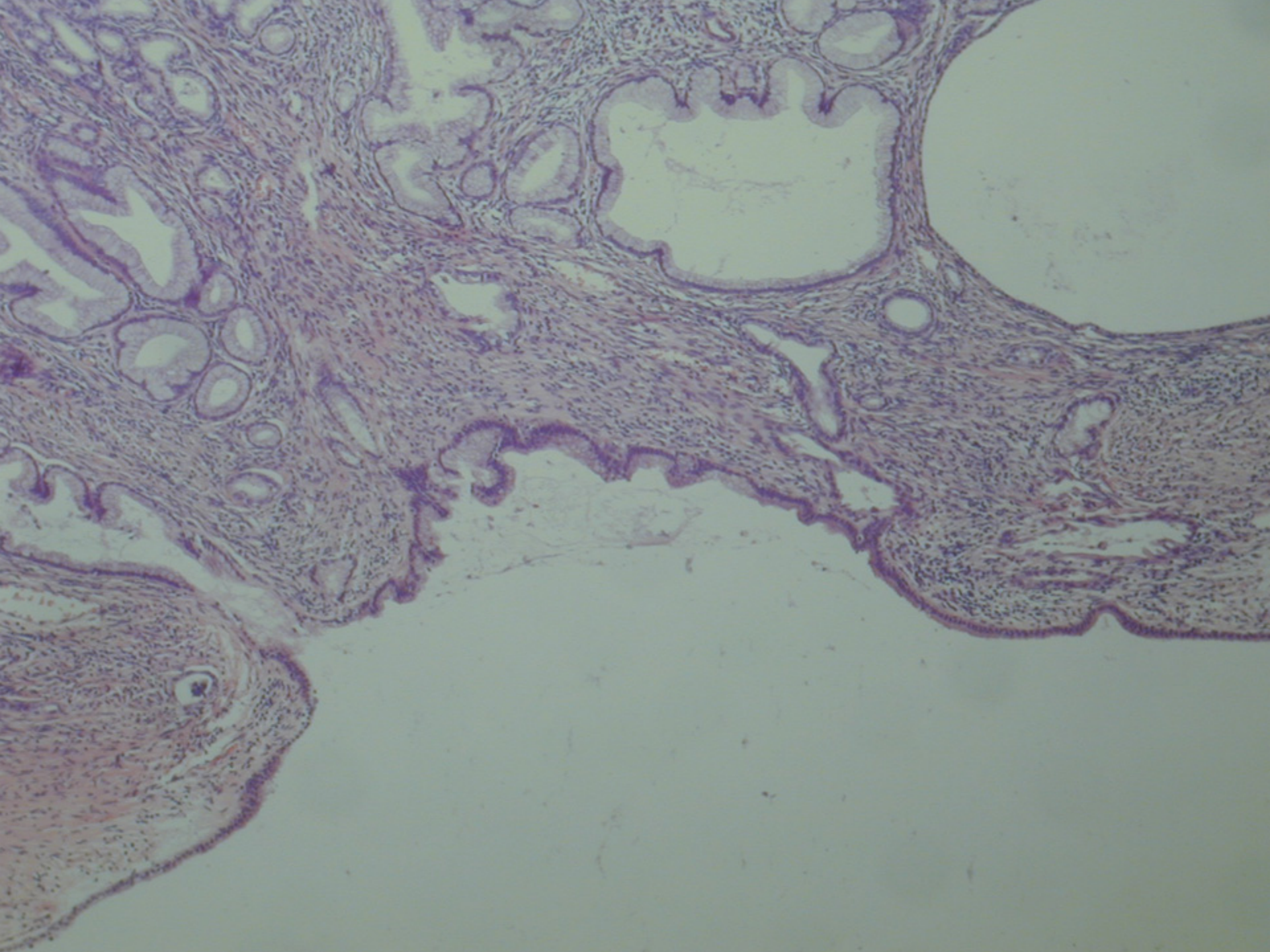


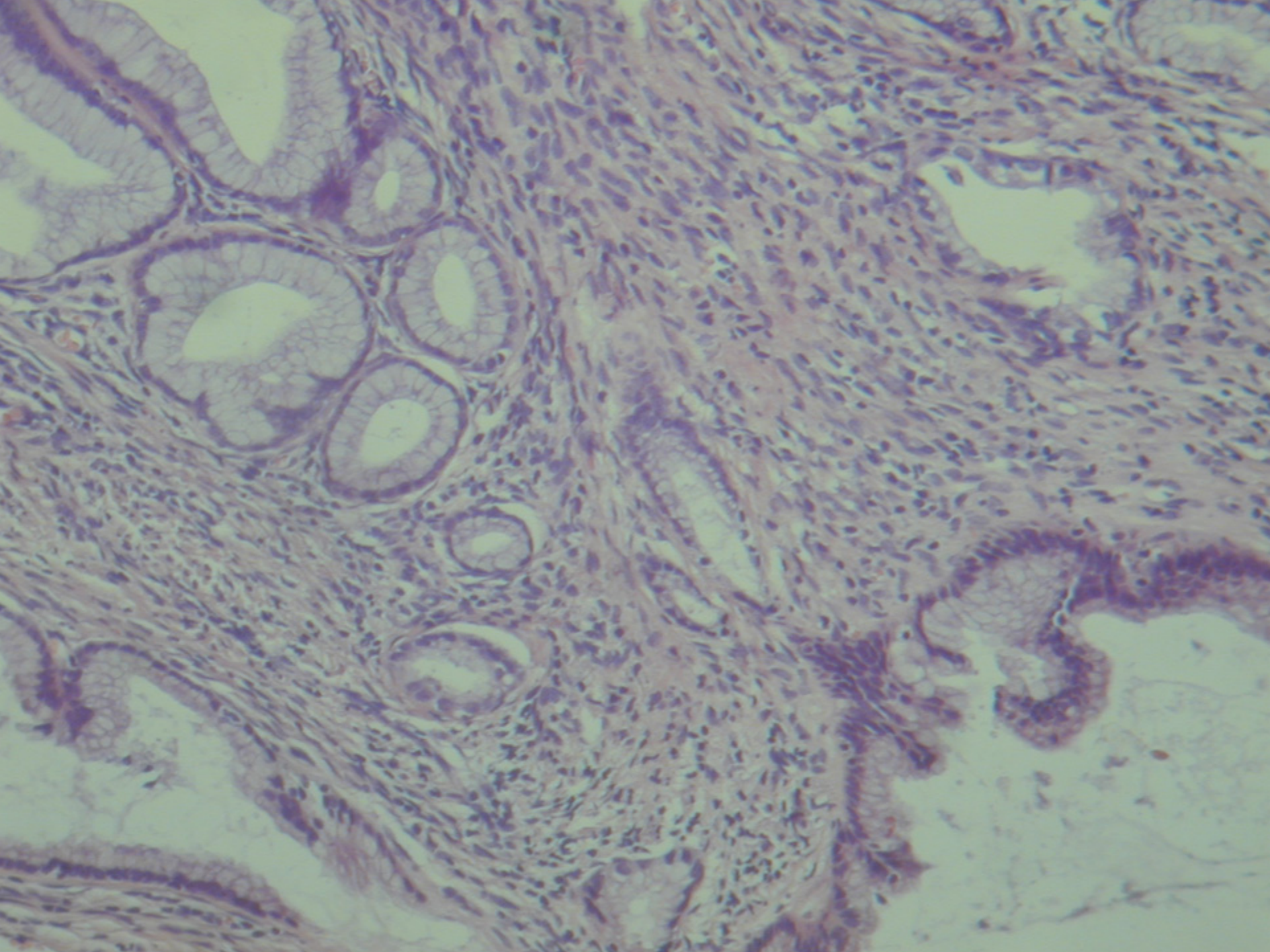
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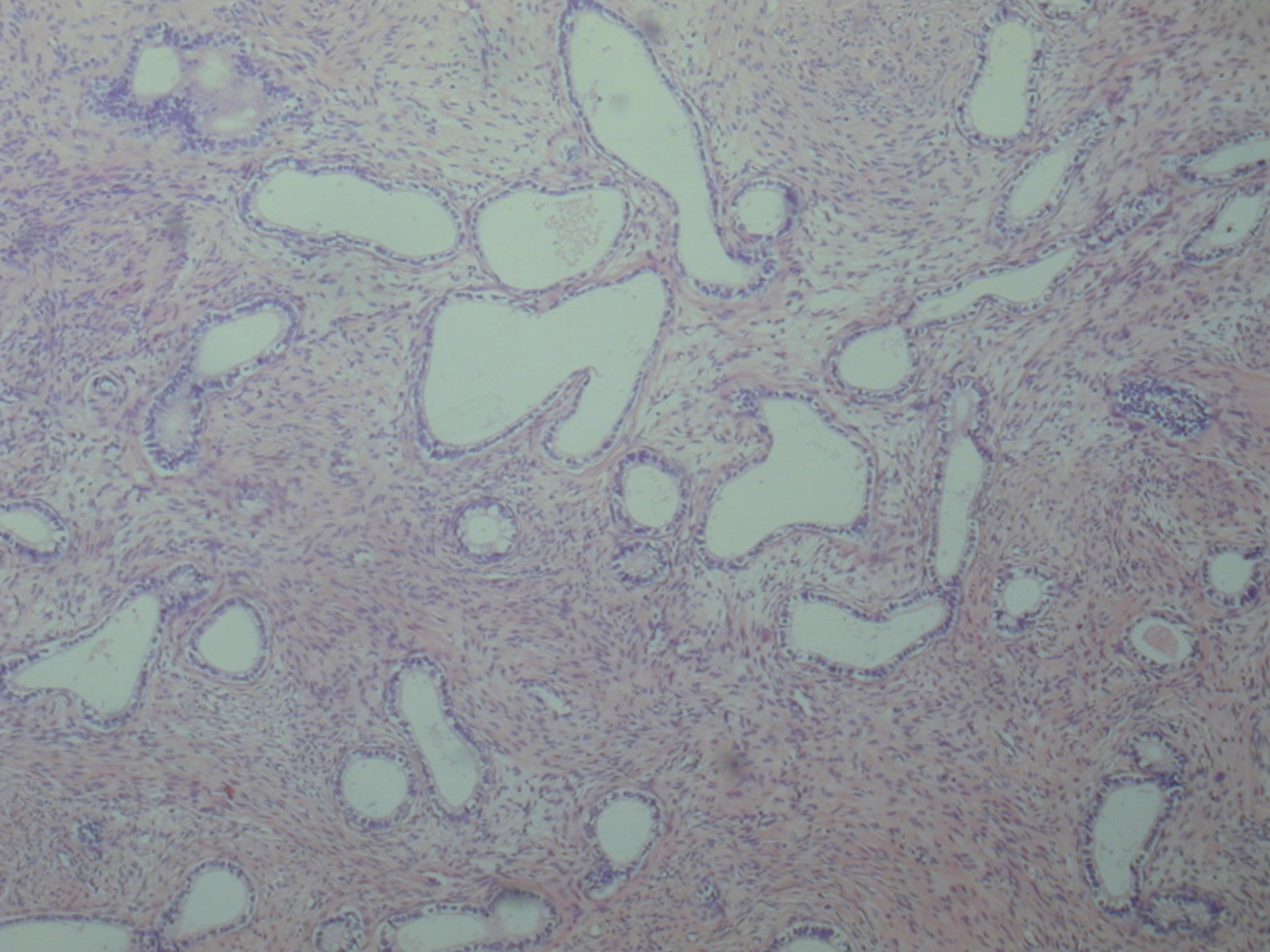


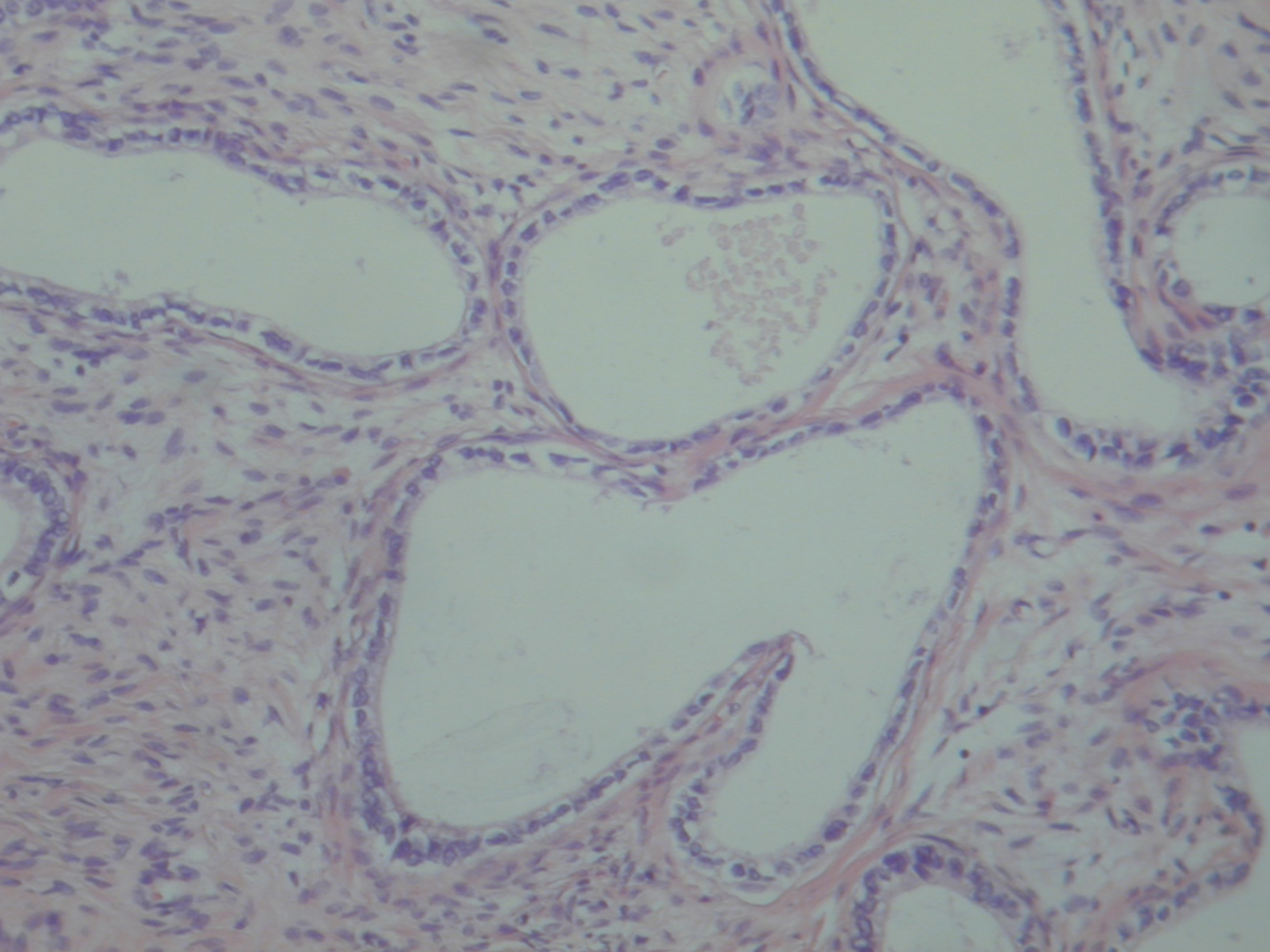
Pathology 12
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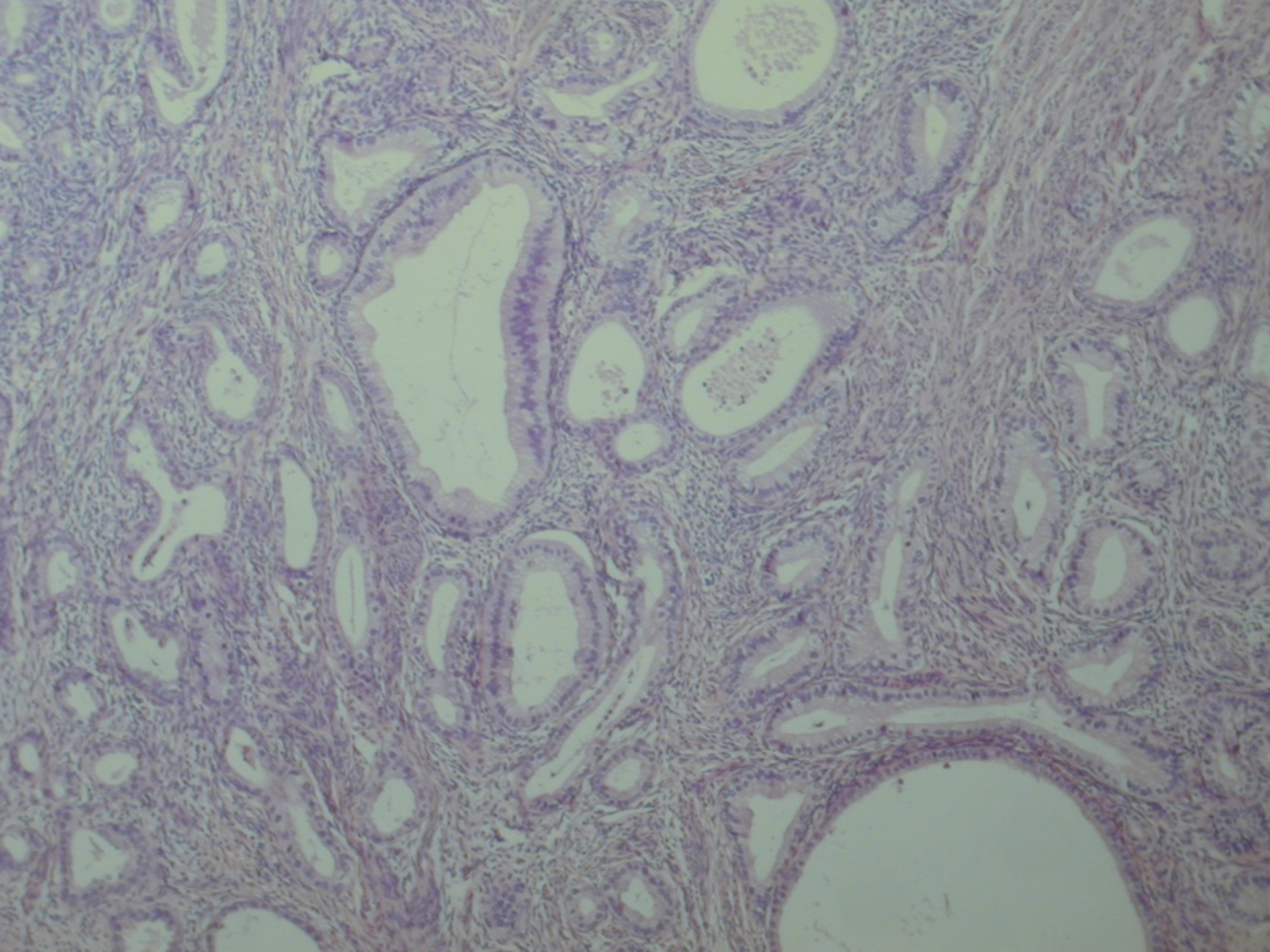


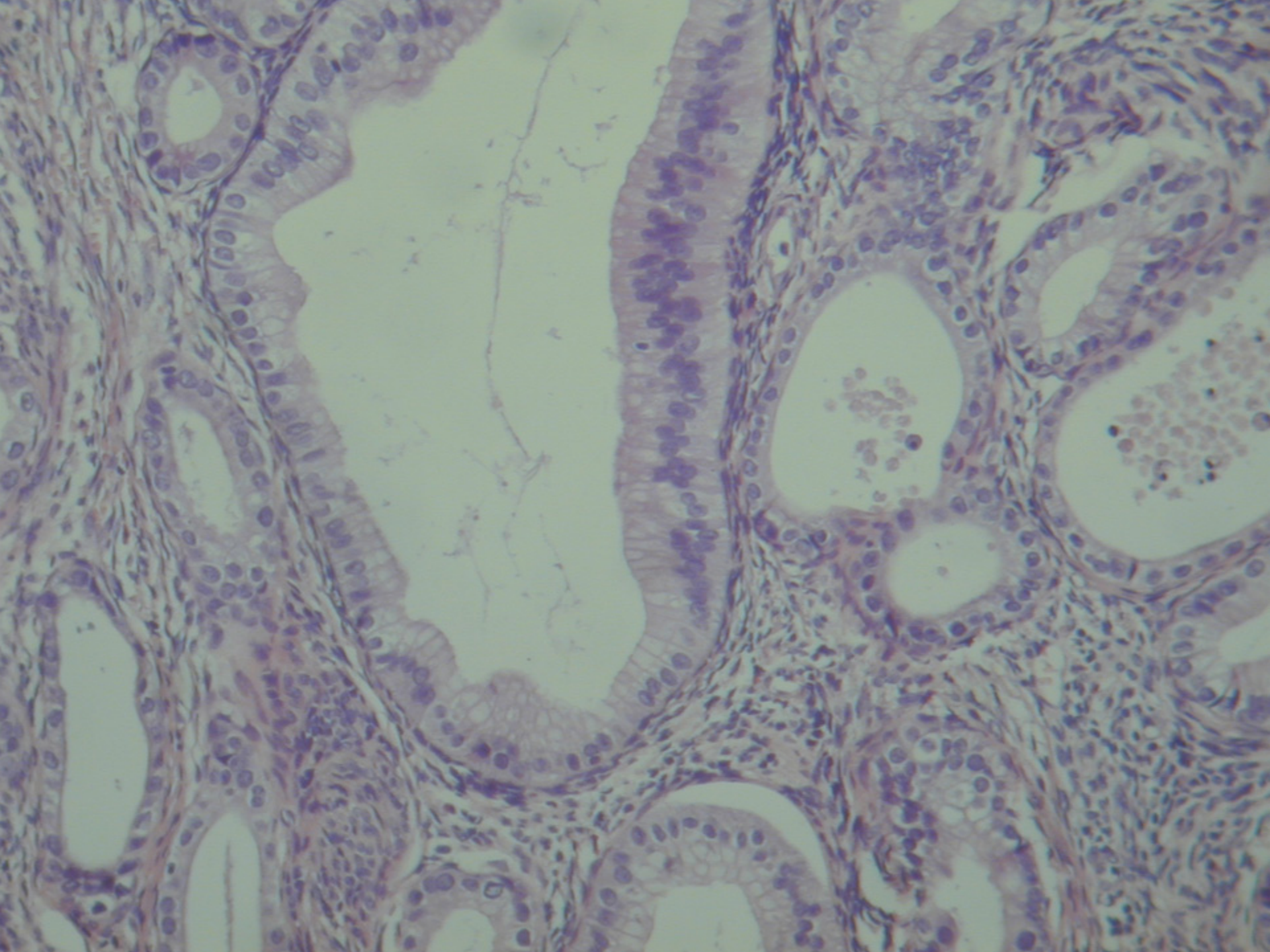


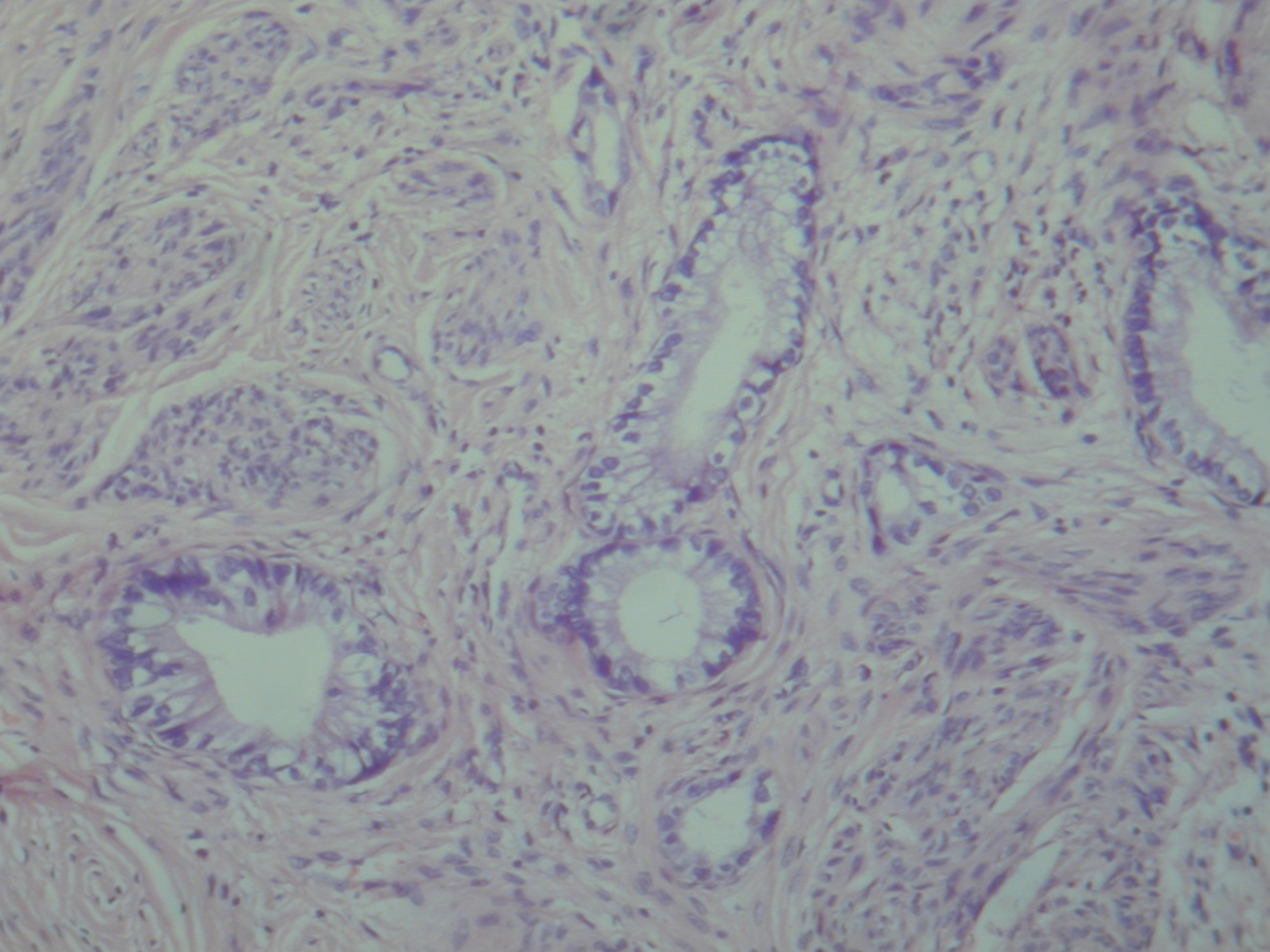


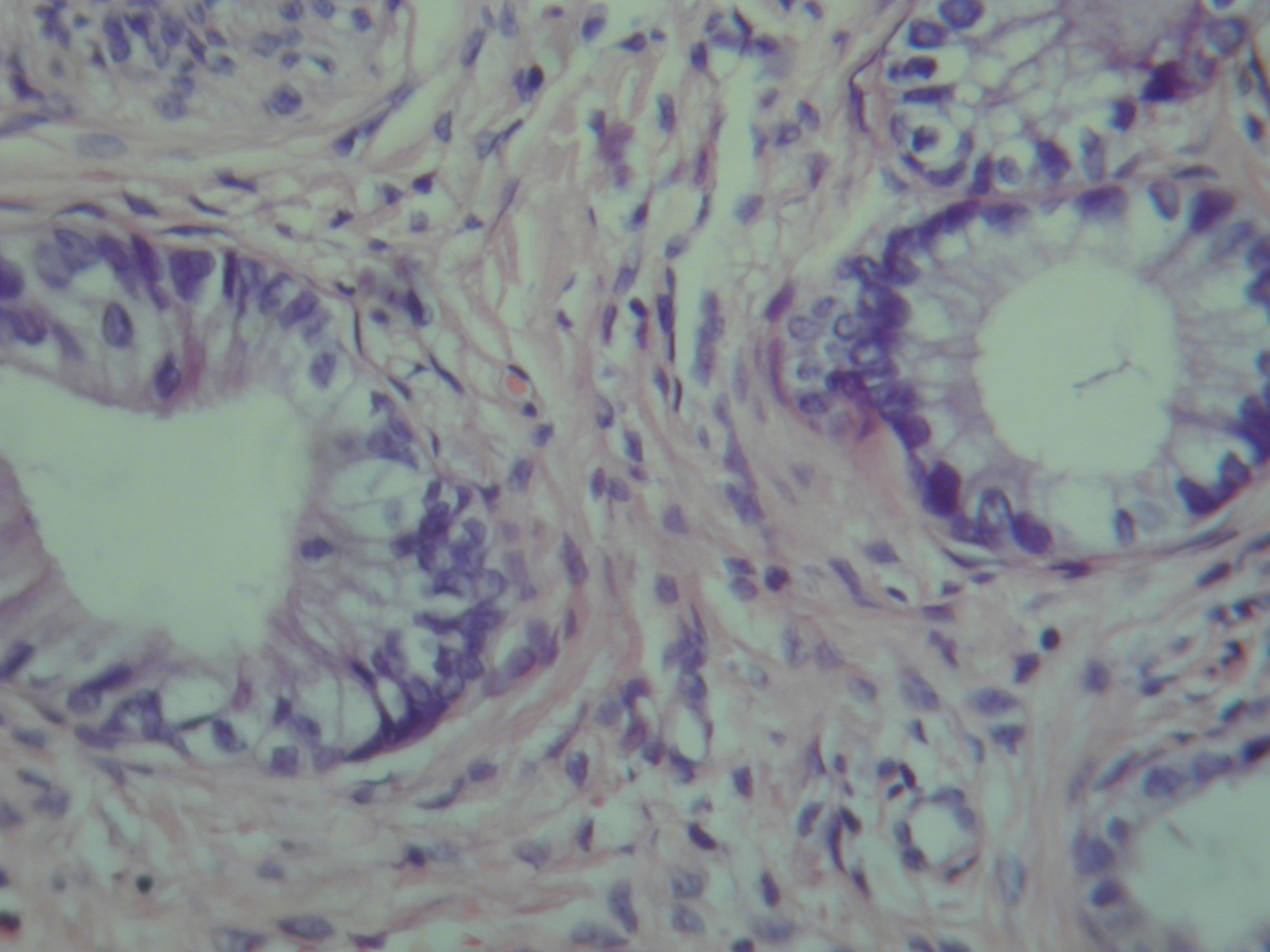


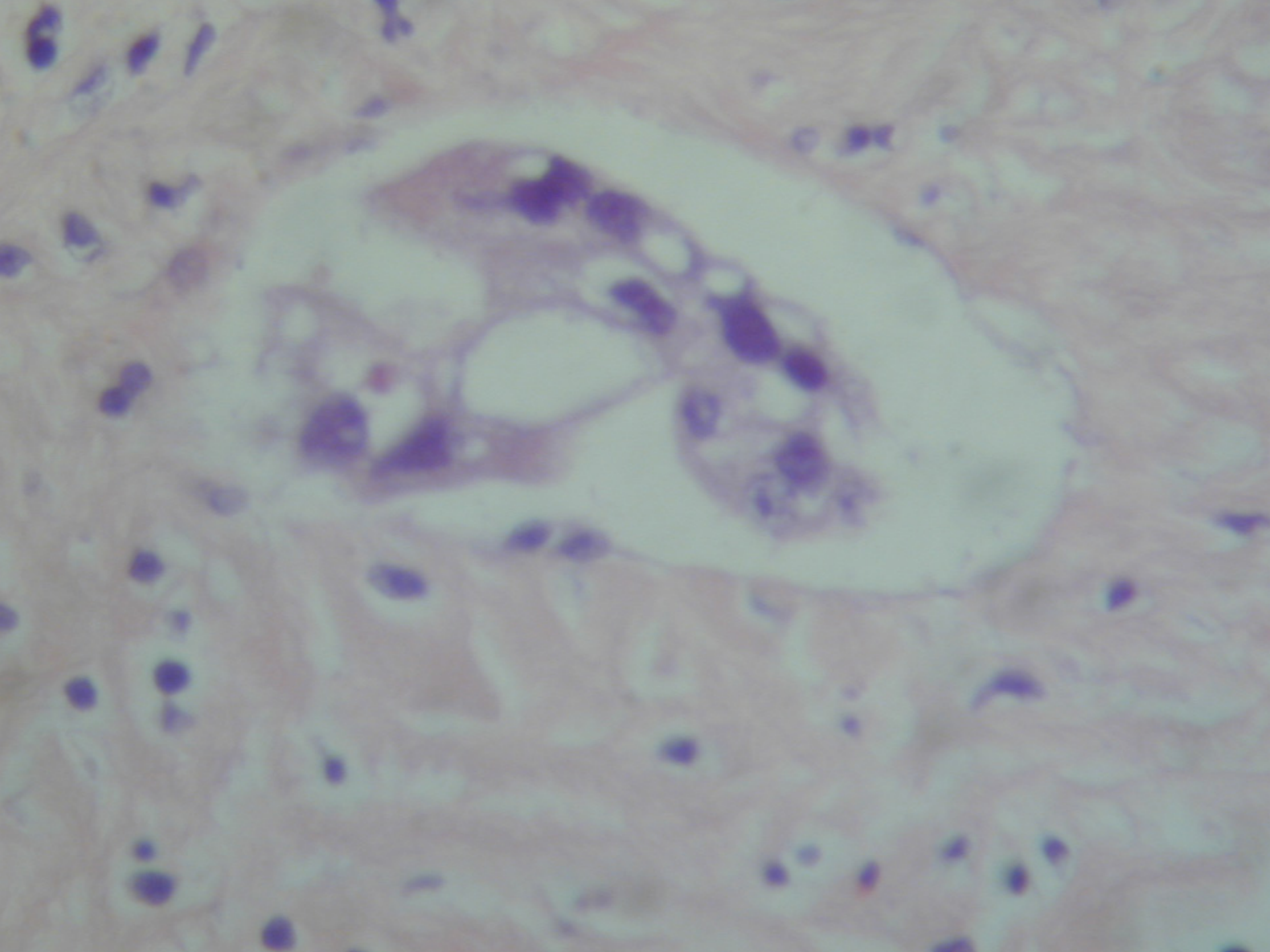


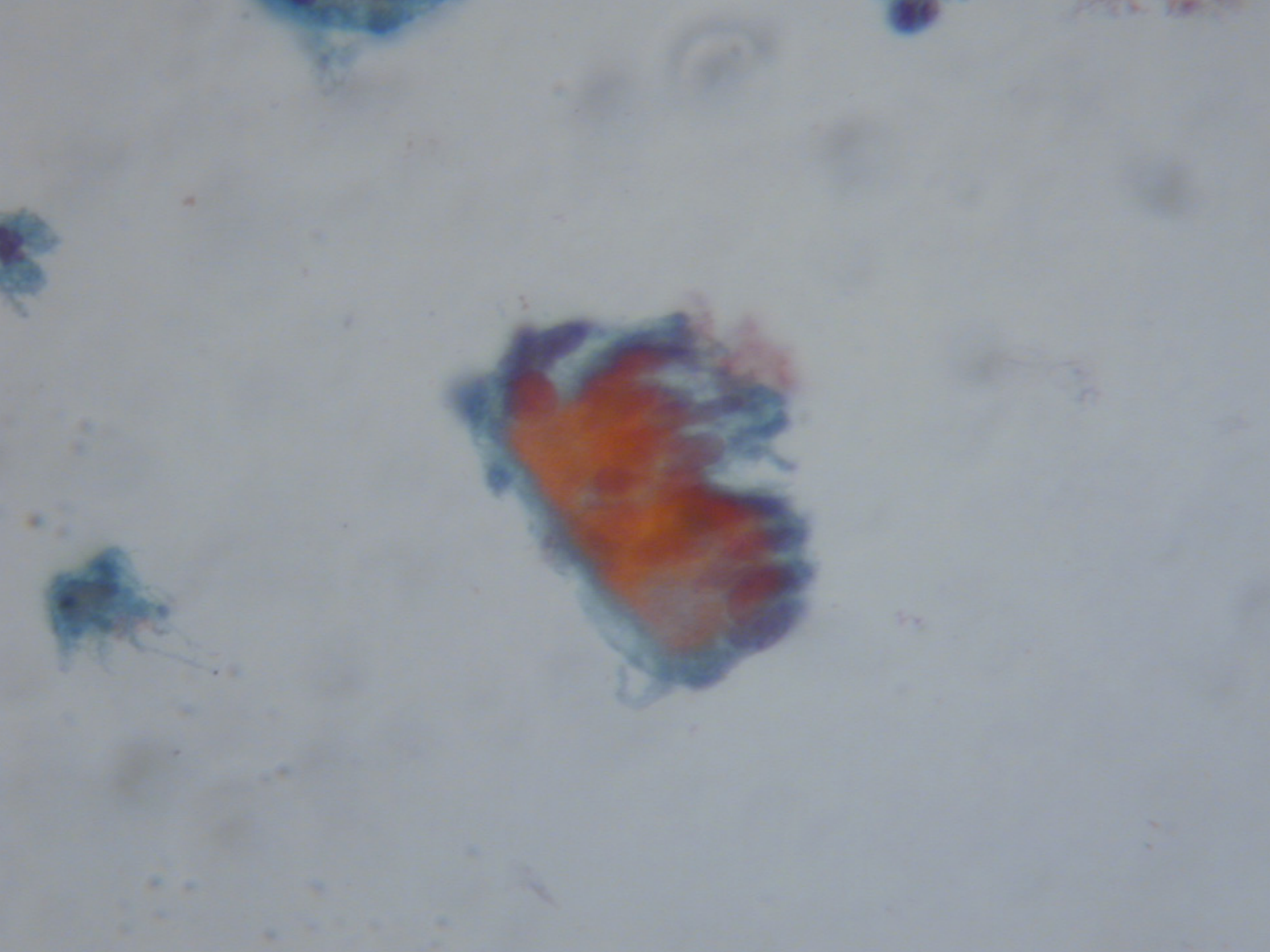


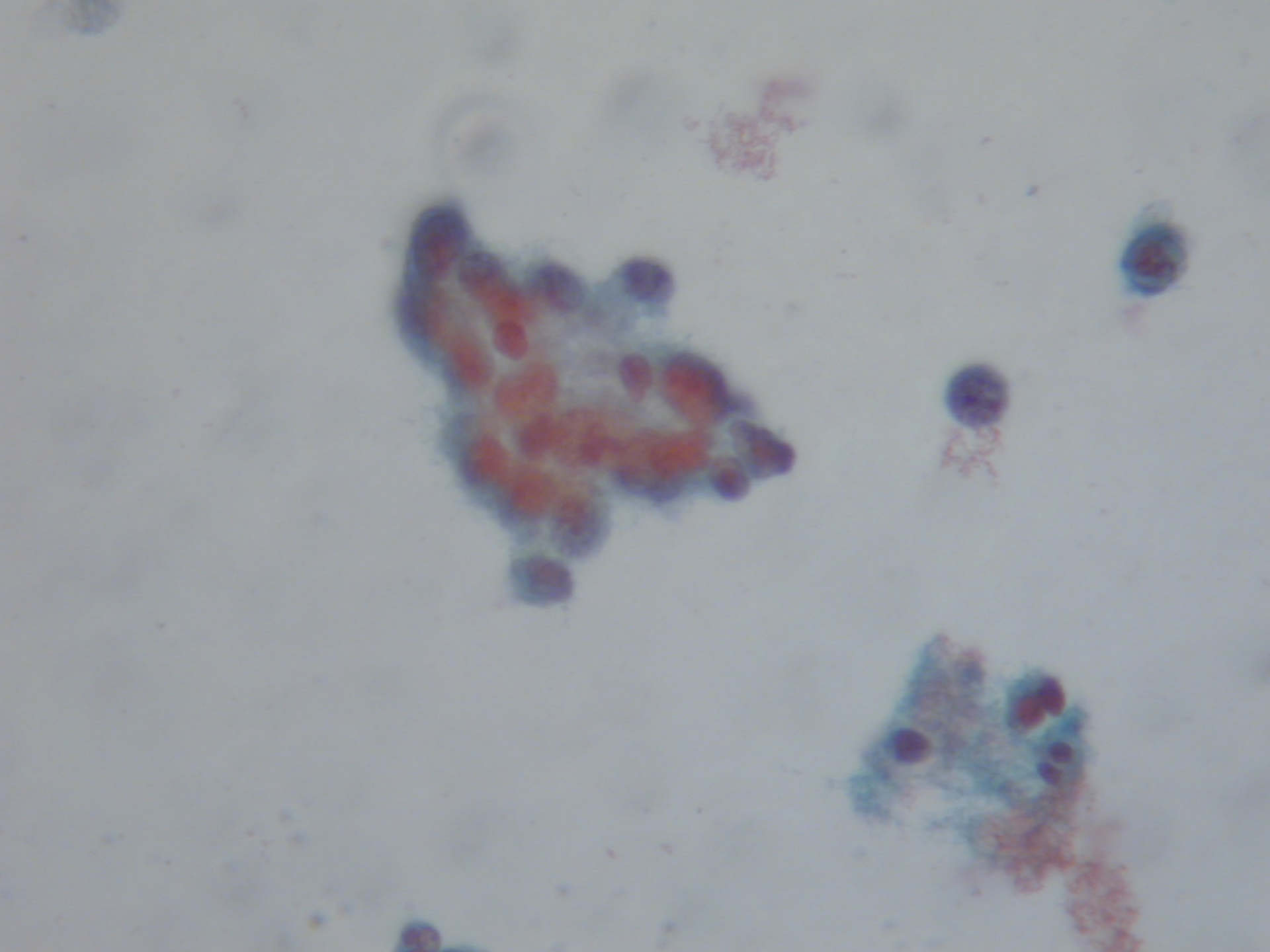


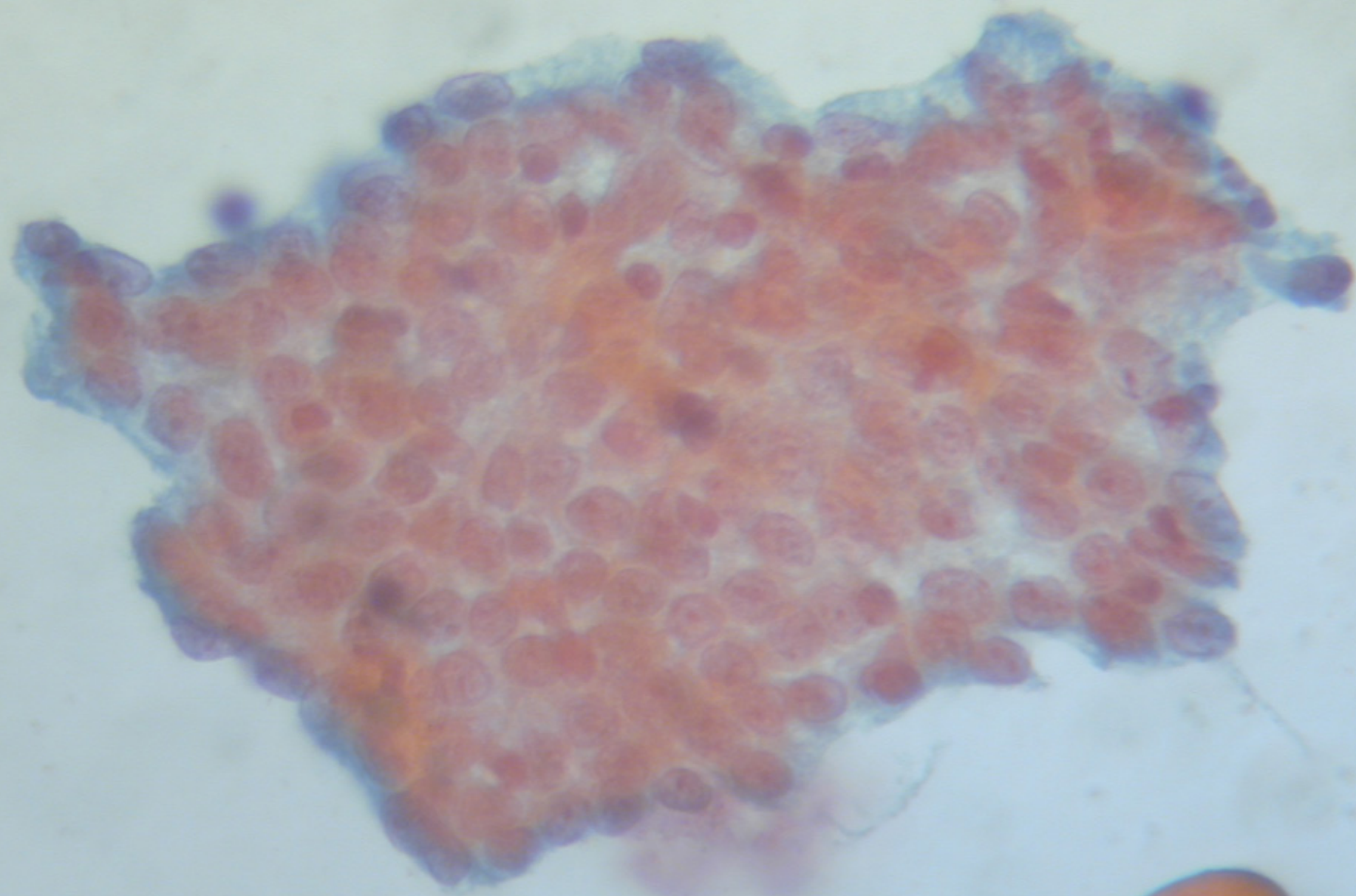












Histopathological Diagnosis

- Minimal Deviation Adenocarcinoma (Adenoma Malignum) - mucinous type with focal endometroid features
- Involving the entire circumference, 1.5 cm deep, 2.7 cm in length
- 1 cm from ectocervical resection margin and 0.3 cm from radial resection margin
- Focal lymphatic invasion
- Both Ovaries - NAD

Differential Diagnosis

- Deep nabothian cyst
- Tunnel clusters
- Microglandular hyperplasia
- Mesonephric hyperplasia
- Intestinal metaplasia
- Atypical hyperplasia/glandular dysplasia
- AIS

Discussion

- MDA is most well differentiated adenocarcinoma of cervix, 1- 3 % of adenocarcinoma of cervix
- 50 % of cases may have small foci of less well differentiated adenocarcinoma
- Argyrophil cells may be present - serotonin and peptide hormones can be identified
- Lobular endocervical glandular hyperplasia may mimic MAD (both have watery vaginal discharge)
- May be associated with Ovarian tumours and Peutz-Jeghers syndrome

Immunohistochemistry 1

- CEA (carcinoembryonic antigen) may show focal positivity in MDA but negative in benign lesions
- HMFG1 (human milk fat globulin antigen) tumour cells may show cytoplasmic staining
- Inappropriate expression of blood group antigen
- Loss of ER and PR receptors
- CA125 may show abnormal staining pattern

Immunohistochemistry 2

- HIK 1083
- A monoclonal antibody against the gastric gland mucous cell mucin
- Positive in well differentiated area of MDA but usually negative in less well differentiated area and benign endocervical glands

Immunohistochemistry 3

- M-GG MC-1
- Antibodies against pyloric gland-type mucins
- Positive for lobular endocervical glandular hyperplasia - ? Benign counterpart ? precursor ? In-situ form of MDA

References

- Mikami et al. Lobular endocervical glandular hyperplasia is a metaplastic process with pyroic gland phenotype.
- Histopathology 2001: 39; 367-372.
- McCluggage. Recent advances in immunohistochemistry in gynaecological pathology. 2002: 40; 309-326