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In Collaboration with the Jordanian Society of Pathologists

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The XXXII Congress of the International Academy of Pathology

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ABSTRACTS

of

Posters

&

Oral Presentations

All Abstracts are in Alphabetical Order

based on Abstract Nunmber

Posters' Abstracts

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10 Abstract No. 001 Date 15.10.2018 & 16.10.2018	Immunohistochemistry	Abdallah, Dina Alexandria Faculty of Medicine Dept. of Pathology Alexandria Egypt	Poster	Eltaweel, Galila

ABSRACT TITLE:
Metallothionin and Ki 67 expression compared to nuclear score in differentiating adrenocortical neoplasms

ABSTRACT TEXT

Objective: The aim of the present study is to evaluate the role of immunohistochemical expression of Metallothionein and Ki-67 antigen in comparison to histopathology in differentiation between benign and malignant adrenocortical tumors.
Methods: 35 cases were studied: 14 adrenocortical carcinomas, 13 adrenocortical adenomas and 8 cases of normal adrenal cortex to serve as control. All H&E sections were carefully reviewed for Weiss criteria. The 3 nuclear features included in the Weiss system; high nuclear grade, mitosis>5 /50 HPF and atypical mitoses, creating a new score called the nuclear score was evaluated. Immunohistochemical detection of Metallothionein and Ki-67 antigen expression for each tumor was done.
Results: The expression of MT and Ki 67 in all cases of adenoma revealed very weak faint cytoplasmic and nuclear staining respectively. The expression of MT in all carcinoma cases revealed diffuse strong to moderate cytoplasmic staining. While Ki-67 expression revealed diffuse strong to moderate nuclear staining. Tumor size, total Weiss score, Nuclear score, and each of the Weiss criteria except for diffuse pattern and MT expression level showed statistically significant difference between adenomas and carcinomas, where as Ki-67 score showed a marginally statistically significant difference.
Conclusion: The expression of both MT and Ki-67 antigen is significantly higher in adrenocortical carcinoma than adrenocortical adenoma so these markers can be considered as reliable indicators of malignancy in a suspicious adrenocortical tumor. A new nuclear score was created by the present study to show the importance of the nuclear features as a differentiating point between adenoma and carcinoma as well as the prognostic significance of that score in patient survival and clinical outcome.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19 Abstract No. 001 Date 17.10.2018 & 18.10.2018	Hematopathology	Abdel Haleem, Ihsan Mohammed Osman Alzaiem Alazhari University Faculty of Medicine Khartoum North Sudan	Poster	Humeida, Amira Husain, Nazik Elmalaika

ABSRACT TITLE:
B-cell non-Hodgkin`s lymphoma in Sudanese patients clincopathological study

ABSTRACT TEXT

Objective: This study was conducted to classify Mature B-cell type non Hodgkin lymphoma (BNHL) according to WHO classification using immunohistochemistry and to investigate its clinco-pathological pattern among Sudanese patients .
Methods: It was a descriptive prospective two parts study conducted at Radio-Isotope Centre, Khartoum (RICK) from 2008 to 2014. The first part included 1169 patients, based on RICK cancer registry to retrieve the demographic data. The second part was conducted on suspected cases of NHL referred to RICK histopathology department. The H&E stained slides of each case were examined initially. Then the confirmed cases of BNHL (260 cases) were classified according to the 2008 WHO classification of neoplastic diseases of the haematopoietic lymphoid tissue following immunostaining of sections cut from formalin-fixed, paraffin embedded (FFPE) tissue blocks with the lymphoma panel of antibodies .
Results: The study showed that NHL is predominant cancer of male adults. Fifty percent of the paediatric cases occurred between the ages 2-5 years. The Majority of our cases presented with nodal disease. Extranodal affection showed no sex predication but significant age distribution as it was mainly in children. It`s popular site was gastrointestinal tract (GIT) 48.4% followed by the head and neck. GIT extranodal BNHL showed different anatomical patterns between children and adults. The majority of most frequent subtypes in mature BNHL, as reported in WHO classification2008, all appeared in our series, with the following frequency Diffuse large B-cell NHL DLBCL 28%, Small Lymphocytic NHL 20%, Burkitt`s lymphoma (BL) 18%, Follicular Lymphoma 9%, Mantle Cell Lymphoma 5%, Marginal Zone lymphoma 1%. DLBCL is the predominant BNHL in adult and BL is the predominant one in children.
Conclusion: BNHL is one of the commonest types of cancer. The histological pattern and clinical presentation differ between adults and children. The morphological and immunophenotyping pattern are consistent with other studies. Different lymphoma classifications still exist in Sudan and it is high time to unify the classification of NHL according to WHO classification .
Note: IAP Bursary Application
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 001 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Abdel Satir, Azza Histocenter Khartoum Sudan	Poster	

ABSRACT TITLE:
Malignant gastrointestinal neuroectodermal tumour in a 19 years old Sudanese girl

ABSTRACT TEXT

Objective: To subtype a malignant small intestinal tumour in a 19 years old female, who presented with intestinal obstruction.
Methods: H&E sections from paraffin embedded blocks .
a panel of immunohistochemistry including S100 SOX10, ER, P-, CD10 &DOG1 . FISH to confirm the translocation
Results: At first glance the appearance closely mimicked low-grade endometrial stroma sarcoma. However, the immunophenotype (S100+, SOX10+, ER-, PR-, CD10-, DOG1-) excluded this possibility and instead suggested GINET which was then confirmed by presence of the EWSR1 gene translocation by FISH .
Conclusion: GINET should be included in the differential of any unusual small intestinal neoplasm as histology-tailored therapeutic options are becoming available for these rare entities.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 001 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Abdelgayed, Sherein University of Cairo Dept. of Pathology Cairo Egypt	Poster	

ABSRACT TITLE:
Appraisal the effects of Cymbopogon Schoenanthus Extract against reproductive disorders and carcinogenic effects of Formalin in male Albino rats.

ABSTRACT TEXT

Objective: Formaldehyde is commonly used chemical in everyday life and can react with many molecules in the human body. The present study aimed to investigate the protective effects of Cymbopogon schoenanthus (CS) extract against the reproductive and carcinogenic effects of formaldehyde on male rats .
Methods: Albino male rats were divided into equal six groups, first group: served as a control group. Second group: received formalin (100 mg/kg bw). Third group, and forth group: were received CS extract at (50 and 100 mg) respectively. Fifth group and sixth group were received formalin (100mg /kg bw) + CS extract (50mg) and formalin (100mg /kg bw) + CS extract (100 mg) respectively. At the end of the experiment the animals were scarified and blood samples were collected for measurement all tested parameters .
Results: The results showed that the oral exposure to formaldehyde at a dose of 100 mg/kg bw resulted in significant negative effects in all tested parameters, while the CS extract at two doses (50 and 100 mg) alone or in combination with formalin restored the negative effects to normal levels compared with the untreated group. These results confirmed with histopathological examination which held on testis tissues.
Conclusion: Cymbopogon schoenanthus (CS) extract could ameliorate the adverse reproductive and carcinogenic effects of formaldehyde hazards .
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Abdulkader Nallib, Ihab Fundación Instituto de Investigación Sanitaria Santiago de Compostela Spain	Poster	Cameselle Teixeiro, Jose Manuel Antunez Lopez, Jose Ramon Insua Santamaria, Dora Cristina Piso Neira, Magali Caneiro Gomez, Javier Garcia Acuna, Silvia Margarita Sanches Ares, Maria
Abstract No. 001				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Association between PD-L1 expression and driver gene status in non-small-cell lung cancer

ABSTRACT TEXT

Objective: Immunotherapeutic approaches to target the PD-L1/PD-1 have recently show great promise in treating patients with non-small cell lung cancer (NSCLC). However, coexistence of this biomarker with driver oncogene mutations (with targeted therapies) is poorly known. We investigated the association between somatic driver mutations and PD-L1 expression.
Methods: We retrospectively checked paraffin embedded tissue samples from 196 NSCLC patients from our institution: 167 adenocarcinomas, 9 squamous cell carcinomas, 5 neuroendocrine carcinomas, 4 adenosquamous carcinomas and 11 non-small cell lung cancer no otherwise specificied (NOS). The cohort included 108 small biopsies, 44 cell blocks samples and 44 surgical specimens. An immunohistochemical study for PD-L1 expression was carried out using the clone 28-8 (PD-L1 IHC 28-8 pharmDx, Agilent). Mutational screening for EGFR mutations (Cobas EGFR mutation test v2,Roche), as well as, fluorescence in situ hybridization analyses for ALK rearrangements (Vysis ALK Break Apart FISH Probe Kit, Abbot Molecular) and ROS1 rearragments (6q22 ROS1 Break Apart FISH Probe RUO Kit , Abbot Molecular) were also carried out.
Results: We found a PD-L1 expression ≥ 1 in 48% of cell blocks samples, 36% of surgical specimens and 50% of small biopsies. EGFR mutation, BRAF mutation or ALK rearrangement were found in 25 samples. Within these tumors with molecular alterations PD-L1 expression <1% was found in 15 cases and ≥1% in 10 cases.
Conclusion: Our results showed cell blocks samples are appropriated for PD-L1 analysis in daily clinical practice. No significant correlation was detected between PD-L1 expression and these driver mutations approved for targeted therapies.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	Abudalu, Loay King Hussein Cancer Center Amman Jordan	Poster	Ismael, Taleb Ghandour, Khalil Sultan, Iyad Al-Hussaini, Maysa
Abstract No. 001				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Epithelioid angiomyolipoma of the kidney with overexpression of transcriptional factor E3: A case report

ABSTRACT TEXT

Objective: Angiomyolipoma is a rare tumor that is reported in the kidney, liver and rarely other organs. Occurrence in children is rarely and carries a diagnostic challenge
Methods: An 8 year-old female patient who had no remarkable medical history, presented with epigastric mass extending to above umbilicus discovered incidentally by her parents 1.5 months ago. Abdomen and pelvis Computerized tomography demonstrated large well defined rounded highly vascular soft tissue mass related to the right kidney, measures 8.4 x 8 cm longest axial diameters x 12.7cm length. The appearance is mostly suggestive of Wilms tumor (Nephroblastoma). She received 4 courses of chemotherapy, but with no evidence of regression of the tumor .
Results: On that account she underwent right nephrectomy. The histopathological examination doesn't show any microscopic features suggestive of Wilms tumor. The specimen consisted of sheets and nests of large epithelioid cells with abundant eosinophilic and granular cytoplasm with high grade nuclei. The vascular component is composed of thin-walled vessels. Moreover mature adipose tissue were observed. Tumor necrosis was not seen, mitotic figures were less than 1/10 HPFs of tumor cells. The differential diagnosis included epithelioid Angiomyolipoma, MiT family translocation renal cell carcinoma, and clear cell carcinoma. Immunehistochemical staining of the tumor revealed that the tumor cells were positive for human melanoma black-45 (HMB-45), unpredictably TEF-3, Melan-A, INI-1 and smooth muscle actin immunostains, while they were negative to pan-cytokeratins (AE1/E3), CK7, CD10, EMA, AMACR and PAX8 immunostains. Based on those findings, the patient was diagnosed with renal AML.
Conclusion: AML should be considered in the differential diagnosis of children with renal masses, especially if occurring beyond the expected ages of Wilms tumor .
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-05	Education in pathology	Abushahin, Nisreen University of Jordan Dept. of Pathology Amman Jordan	Poster	Almbaideen, Suzan Hassan, Huda Hamdan, Omar Altarawneh, Bushra
Abstract No. 001				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Diagnostic accuracy of dilatation and curettage in uterine tumors: Lessons to learn

ABSTRACT TEXT

Objective: Endometrial cancer is a common gynecological malignancy, with a chief complaint of vaginal bleeding. Dilation and curettage (D&C) prior to performing definite surgical procedure is the gold standard pre-operative diagnostic method. This is a retrospective comparative study that aims is to determine the accuracy rate of D&C in diagnosing cancer at our institution .
Methods: Endometrial cancers with pre-operative D&C diagnosed and underwent definite surgical procedures at our institution during the last 10 years were included. Corresponding slides for pre-operative D&C and final post surgical diagnosis were reviewed for histopathological characteristics. Any pre-operative cervical smears within one year of diagnosis were also reviewed.
Results: 54 cases of endometrial cancer were studied. Mean age =62.5 years. 79.6% of patients were menopausal. 32 had available follow up (mean period = 16.5 months). Most common histopathological types were endometrioid carcinoma (74%); followed by serous carcinoma (11%) and 4 carcinosarcoma (7.4%). Accuracy rate of D&C was 87 %. Cases with discrepancy were 3 endometrioid cancers, and one each of serous carcinoma, leiomyosarcoma, endometrial stromal sarcoma, and placental site trophoblastic tumor .
Conclusion: accuracy rate of D&C in detecting endometrial epithelial cancers is high; but is low for sarcomas. Potential factors that reduce accuracy include interpretation errors, sampling issues, and lack of ancillary immunohistochemistry.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-12	Nephropathology	Abushahin, Nisreen University of Jordan Dept. of Pathology Amman Jordan	Poster	Al-Awwa, Ezzat Almbaideen, Suzan Hassan, Huda Hamdan, Omar Altarawneh, Bushra Osman, Randa
Abstract No. 001				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Podocytes infolding glomerulopathy as a pure cause of nephrotic syndrome: Case report and literature review

ABSTRACT TEXT

Objective: Podocytes infolding glomerulopathy is a rare, recently proposed new disease entity by Japanese researchers. It was originally reported as a secondary finding with other glomerulopathies like membranous nephropathy, lupus nephritis, hepatitis, and connective tissue disease. It usually leads to nephrotic syndrome .
Methods: we report the case of a 44 year old Jordanian female who presented to nephrology clinic with generalized edema and nephrotic range proteinuria. Her medical history is free of Diabetes, hypertension, and other medical conditions. She is not on any medications. Laboratory workup is negative for lupus nephritis, connective tissue disease, serum C3 and C4 are normal. Workup for hepatitis B, C, and HIV is negative. Kidney biopsy is performed and tissue cores examined using light microscopy, immunoflourescence, and electron microscopy.
Results: light microscopy showed mild global glomerular basement membrane (GBM) thickening. There is no evidence of endocapillary hypercellularity, necrosis or crescent formation. The tubules, interstitium, and blood vessels did not display significant histopathological findings. Immunoflourescent microscopy is negative for immunoglobulin and complement deposition. Electron microscopy revealed irregular increase in GBM thickness. The overlying podocytes are prominent and display cytoplasmic vaculation. The foot processes reveal diffuse effacement and microvillous transformation. Multiple microspheres and vesicles along the GBM are also seen, reminiscent of podocytes infolding changes. No electron-dense immune deposits are identified in any of the glomerular compartments.
Conclusion: we propose this as a new case of podocytes infolding glomerulopathy that presents in a non-Japanese woman, and is not associated with any of the previously reported nephropathies. Electron microscopy plays a crucial role in identification and diagnosis of such glomerulopathies.

ESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13	Pathology of infectious diseases	Achusi, Izuchukwu Federal Medical Centre Dept. of Anatomic Pathology Abuja Nigeria	Poster	Abiodun, Olugbenga Adamu, Haroun Olah, Friday
Abstract No. 001				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

A Case report: 43 year old man with Staphylococcus aureus infective endocarditis - a fatal outcome

ABSTRACT TEXT

Objective: Infective endocarditis remains a silent killer in tropical countries where scarce resources prevent early and adequate clinical diagnosis for proper patient management. Our objective is to determine the cause of death in a patient with pre-mortem diagnosis of infective endocarditis.

Methods: Full autopsy was performed on a 43 year old male intravenous drug abuser who died of infective endocarditis. All organs were sampled and examined histologically. Gram stain was also done to confirm blood culture result.

Results: Autopsy findings include large vegetation on the mitral and tricuspid valves with ruptured left papillary muscle tip and mitral valve. Also noted are multiple emboli in the aorta and pulmonary arteries. There is wedge infarcts in the kidneys and severe pulmonary edema and congestion. Histology of the vegetation shows sheets of neutrophils and bacterial colonies admixed with fibrin. Bacterial colonies are gram stain positive.

Conclusion: This case proves that infective endocarditis remains a major cause of morbidity in intravenous drug abusers in the tropics. High index of suspicion in the early stages of the disease and early referral to tertiary centres are important for survival of patients with infective endocarditis.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-11	Molecular pathology	Akhlaq, Maham King Edward Medical University Dept. of Pathology Lahore Pakistan	Poster	Asiri, Abdul Aziz Ilyas, Mohammad
Abstract No. 001				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Cten is Tyrosine phosphorylated and forms an SH2 domain-dependent complex with Focal Adhesion Kinase (FAK) to induce cell motility in colorectal cancer

ABSTRACT TEXT

Objective: We have shown that Cten is oncogenic in colorectal cancer (CRC) and stimulates cell motility and stemness. Here we investigated the mechanisms of Cten activity, in particular the role of the Src Homology 2 (SH2) domain and three adjacent tyrosine residues. And also looked at the downstream targets and binding partners of Cten.

Methods: The SH2 domain of Cten contains a functionally critical Arginine 474 residue and three tyrosine residues (472, 479, 530) of unknown functional significance. Site directed mutagenesis was used to create missense mutations R474A, Y472F, Y479F and Y530F in a Green Fluorescent Protein-tagged Cten (GFP-Cten) expression vector. The functional activities of GFP-Cten, GFP-CtenR474A, GFP-CtenY472F, GFP-CtenY479F and GFP-CtenY530F were evaluated in CRC cell lines HCT116 and RKO (both non-expressors of Cten) using transwell migration, wound healing assay and colony forming efficiency. Western blotting was used to look at the downstream protein levels of ILK, FAK by inducing Cten and its mutants. Immunoprecipitation method was used to look at physical binding partners of Cten.

Results: Compared to GFP-Cten, the mutant proteins GFP-CtenR474A and GFP-CtenY479F had significantly reduced cell motility induction (both transwell migration and wound healing) and colony forming efficiency. When these were expressed in the CRC cell line SW620 in which Cten expression had been deleted (SW620□Cten), GFP-CtenR474A and GFP-CtenR479Fdid not restore functional activity to the same level as GFP-Cten. We have previously shown that GFP-Cten causes up-regulation of both Focal Adhesion Kinase (FAK) and Integrin-Linked Kinase (ILK). We therefore investigated the role of the SH2 domain and tyrosine479 on induction of these target molecules. Compared to GFP-Cten, induction of both FAK and ILK was significantly reduced when the GFP-CtenR474A and the GFP-CtenY479F were expressed in HCT116 or RKO. Similarly, the expression of GFP-CtenR474A or GFP-CtenY479F in SW620□Cten cells showed reduced restoration of FAK and ILK protein expression in comparison with GFP-Cten.

Since SH2 domains are associated with protein-protein complex formation, we next investigated whether this could be a signaling mechanism in Cten. Immunoprecipitation studies showed that GFP-Cten could be found in physical complex with FAK both in the cytoplasm and in the nucleus dovetailing with our recent observations of association of nuclear Cten and nuclear FAK in metastatic CRC. However, the R474A mutation caused a reduction in the formation of this complex. Finally, forced expression of GFP-Cten caused a cadherin switch which was reduced when GFP-CtenR474A was expressed.

Conclusion: In summary, the biological effects of Cten appear to be partly dependent on signaling through its SH2 domain (Arginine 474 and Tyrosine 479). Furthermore, this is the first description of the formation of an SH2 domain-dependent complex between Cten and FAK.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-14	Education in pathology	Akhlaq, Maham King Edward Medical University Dept. of Pathology Lahore Pakistan	Poster	Rehman, Fakeha Mujtabai, Yumna Rehman Bajwa, Rakshindah Niazi, Shahida
Abstract No. 001				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Adopting lean methodology to reduce turnaround time of gastrointestinal biopsies; an experience at King Edward Medical University

ABSTRACT TEXT

Objective: To see the effect of Lean principle to decrease the turnaround time of the gastrointestinal biopsies coming to the surgical pathology laboratory of King Edward Medical University. It also helped us to establish a process of continuous improvement in our laboratory.

Methods: In the beginning, we evaluated total time of 35 gastrointestinal biopsies as per routine. Then by using the principle of lean, we assessed next 35 gastrointestinal biopsies and identified non- value added time in our work flow process. The non-value added activities were recognized from the transportation of the sample till the dispatch of the final report. We used value stream mapping to show each step with their calculated processing time.

Results: We evaluated the turnaround time of gastrointestinal biopsies by using value stream mapping. Before lean implementation, non-value added minutes were 6647 and the process cycle efficiency was 17.14%. After lean implementation the non-value added time was reduced to 510 minutes, which shows removal of 1885 non-value added minutes. Process cycle efficiency was 72.94%. The main non-valid added minutes were mostly identified in transportation, receiving/accessioning to grossing and processing.

Conclusion: Lean principles can be used in a surgical pathology laboratory to remove the non-value added activities and to minimize the total turnaround time.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Al-Ali, Batool King Fahad Specialist Hospital Dammam Saudi Arabia	Poster	Amr, Samir
Abstract No. 001				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Malignant glandular Triton tumor arising in the left radial nerve: A Rare Case Report and Review of the Literature

ABSTRACT TEXT

Objective: Divergent differentiation is a well-known phenomenon in malignant peripheral nerve sheath tumors (MPNST) which occurs approximately in 15% of the cases and usually toward mesenchymal elements. Differentiation towards epithelial components; however , is uncommon, and even rarer is concomitant mesenchymal and glandular differentiation.

Methods: case report:

26-year-old male presented with a history of pain in his left shoulder and an elbow swelling for six months. It was initially diagnosed as neurofibroma at his local hospital and he had an excision with pathology showed MPNST. Six months later, patient referred to our hospital with recurrent swelling on the same location. On examination, there was a large surgical scar on the left elbow about 12 cm. in length and an underlying swelling with left radial nerve palsy.

MRI scans showed multiple variable sized lobulated lesions at the anterolateral aspect of the left lower arm along the distribution of the radial nerve, the largest lesion measures 15.0 x 7.8 cm.

Results: Histopathology slides from the referral hospital were reviewed, the tumor composed of spindle cells arranged in interlacing fascicles. Nuclei were pleomorphic, hyperchromatic, and mitotically active. Large areas of necrosis were present. Some foci in the tumor showed rhabdomyoblastic differentiation, and focal area of well-formed dysplastic glands was present. A diagnosis of MPNST with rhabdomyoblastic differentiation (Malignant Triton tumor) that contained histologically malignant glandular epithelium was made.

The patient refused any surgical intervention. He received three cycles of chemotherapy followed by radiotherapy with marked improvement of his lesions.

Conclusion: We presented a rare case of MPNST with both mesenchymal (rhabdomyoblastic) and malignant glandular differentiation, to our knowledge this the third reported case of divergent malignant glandular differentiation. Surprisingly, our patient is free of disease for 8 years after excision with adjuvant chemotherapy and radiotherapy, which contrasts with previously reported devastatingly poor prognosis of these tumors.

ESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21 Abstract No. 001 Date 17.10.2018 & 18.10.2018	Neuropathology	Al-Areqee, Refaat National Cancer Control Foundation Dept. of Histopathology Taiz Yemen	Poster	Abiodun, Olugbenga Adamu, Haroun Olah, Friday

ABSRACT TITLE:
Cerebral medulloepithelioma : A rare brain tumor in 55 years-old patient

ABSTRACT TEXT

Objective: Introduction: Central Nervous System primitive neuroectodermal tumors (PNET) are a heterogeneous group of embryonal tumors. They have varying capacity for differentiation along neuronal, astrocytic and ependymal lines. PNETs that display features of the embryonal neural tube formation are termed medulloepitheliomas. These are rare tumors with only 36 cases recorded in literature with the peak incidence between six months to five years of age. Medulloepithelioma presenting in the older age group is extremely rare, and only two cases have been reported. We report a rare case of cerebral medulloepithelioma in a 55 year-old women, the first case to be reported in this age group.
Methods: Case presentation: A 55 years old women presented ,in November 2017,with left arm convulsion (focal seizure) without loss of consciousness, started in June/2017. On examination ,she had left arm weakness and paraesthesia. She has normal blood pressure and normal pulse. All biochemical parameters were normal. She had no history of any medical diseases. Preoperative brain magnetic resonance imaging (MRI) revealed a large right parietal intra-axial dominantly cystic mass with non-uniform solid component having cortical location with moderate associated vasogneic edema; mass measure 5x4x3.5cm. The patient underwent left parietal craniotomy and gross total excision(Dec2017)
Results: On histopathology: the tumor had solid nests of immature neuroepithelial cells in characterisei ribbons, tubules, trabaculae, and palisaded arrangement. Moderate mitotic activity is noted.Immunohistochemical stain showed positivity for CD99 and focal positivity for EMA.The tumor cells are negative for pankeratin (AE1&AE3),CK7,CK20,S100 and synaptophysin.The histopathological and immunohistochemical featrues consistent with medulloepithelioma. Postoperative MRI (after 3 months of operation) showed medium size multilobulated irregular marginally enhancing isotense mass in T1and hypertense in T2 consistent with recurrent versus residual brain tumor in the right upper parietal lobe.The patient reffered to radiotherapy. The patient had normal chest,abdominal and pelvic CT scan.
Conclusion: Medulloepithelioma is a rare PNET of childhood with dismal prognosis. Its occurrence in middle age group is extremely rare . This is a the first case of cerebral medulloepithelioma to be reported in the middle age group (55 years old). It is important to exclude metastatic tumors before making this diagnosis. Gross total resection followed by Radiotherapy and Chemotherapy is the current mode of treatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 001 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Ali, Ali Baylor College of Medicine Houston USA	Poster	Elshaikh, Abubaker Ittmann, Michael

ABSRACT TITLE:
Sarcomatoid Carcinoma of the prostate with osteosarcomatous differentiation: A case report

ABSTRACT TEXT

Objective: Sarcomatoid carcinoma with osteosarcomatous differentiation of the prostate is an exceedingly rare tumor of the prostate. Sarcomatoid carcinoma represents less than 1% of all prostate tumors. Many of the reported cases exist in the background of a previous or existing diagnosis of acinar adenocarcinoma. It has been proven that the sarcomatous component is a dedifferentiation of the carcinoma component as they both share the same epithelial origin. The mean time of progression from acinar adenocarcinoma is 3 years. We report a case of prostate sarcomatoid carcinoma with osteosarcomatous differentiation in a 67 year old male. This unique histopathological finding is unusual, and only limited similar cases have been described. This entity of prostate cancer is usually aggressive and associated with a poor overall prognosis.
Methods: We retrospectively reviewed the biopsy of the initial presentation of the patient with prostatic adenocarcinoma. Histopathological examination of the resection specimen was conducted and compared to the initial biopsy. Immunohistochemical staining with prostatic markers including pancytokeratin, PSA, PSAP, and PIN-4. Vimentin was used to highlight the mesenchymal component.
Results: H&E of the biopsy of the prostate initially showed classic acinar adenocarcinoma, Gleason 4+4. Radical prostatectomy specimen showed sarcomatoid carcinoma involving the entire prostate. Multiple areas of sarcomatoid differentiation were noted. The carcinoma and the sarcomatous components closely blend into each other and staining pancytokeratin and vimentin reflects this differentiation pattern. The carcinoma component was also noted to partially stain for vimentin as well.
Conclusion: Sarcomatoid carcinoma of the prostate is a rare tumor that could arise de novo or in the background of a previous acinar adenocarcinoma and is associated with a poor overall prognosis. It has been suggested that prostatic adenocarcinoma treated with radiation carries a higher risk of progression to sarcomatoid carcinoma. However, Hansel and Epstein reported that there is no association between radiation and progression to sarcomatoid carcinoma in the prostate. In our case, the patient was not treated with radiation.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 001 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Alkhalifah, Zahra King Fahad Specialist Hospital Dammam Saudi Arabia	Poster	Amani Joudeh Walid Dridi Ssmir S. Amr

ABSRACT TITLE:
Carcinosarcoma of the gallbladder with extensive chondrosarcomatous component and associated complex karyotype

ABSTRACT TEXT

Objective: Reporting a rare case of carcinosacoma of the gallbladder with extensive chondrosarcomatous component, and associated complex cytogenetic karyotype.
Methods: Case report a 39 years old male presented with sever intermittent pain in the right hypochondrium for the lasted 3 years. . Abdominal examination reveals tender palpable mass in the right hypochondriac region. CT reveals large irregular intraluminal polypoidal enhancing mass noted in the gallbladder measuring 11.5 x 9.5 x 5 cm with ill-defined interface lesion in segment 5 of the liver and extension to the rectum and peritoneal deposits. PET scan revealed metabolically active lesions in the liver and peritoneum. On laparotomy reveals a huge mass originating from the gallbladder and adherent to the liver and transverse colon and occupying most of the right hypochondriac region with multiple small peritoneal nodules were identified. The patient died 6 months following the surgical resection.
Results: A complex karyotype is identified , its composite karyotype: 57~79,XY,+Y,+4,+5,+del(5)(q33),del(5)(q12q31)x2,+7,+7,+8,+8,add(8)(q22),add(12)(p11.2),add(15)(q22),-18,+2~23mar[cp17]/46,XY[2].
The karyotype is complex with presence of several trisomies, few apparent additions/deletions and several markers with unknown origin. EWSR1 gene FISH analysis reveal monosomy EWSR1 gene.
Conclusion: Carcinosacoma of the gallbladder is a very rare tumor with sarcomatous component , it can include malignant cartilage , bone or skeletal muscle. Our case showed a minimal component of adenocarcinoma and extensive component of malignant cartilage, with massive intra-abdominal spread. The tumor had a highly complex karyotype with several triosomies, few apparent addition/deletions.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 001 Date 17.10.2018 & 18.10.2018	Dermatopathology	Alratroot, Jumana King Fahad Specialist Hospital Dammam Saudi Arabia	Poster	Joudeh, Amani Amr, Samir

ABSRACT TITLE:
Basaloid Squamous Cell Carcinoma of The Skin with Monster cells, arising from Syringocystadenoma Papilliferum

ABSTRACT TEXT

Objective: To document a rare case of malignant transformation of Syringocystadenoma papilliferum into squamous cell carcinoma with basaloid features.
Methods: A case report of a 50 years old man, presented with a right upper thigh mass of 7 years. Started as a very small lesion with watery discharge, gradually increased in size with associated serous and bloody discharge.
On examination, the mass was located in the right posterior upper thigh, measuring 6 × 3 cm with dark discoloration and surface ulceration. A core biopsy revealed a Poorly Differentiated squamous cell carcinoma.
A wide local excision of the mass was done. On gross examination, the specimen consisted of a skin ellipse (6 × 3.5 × 3 cm), with an underlying subcutaneous tissue, a central nodule is noted with a punctum. Sectioning of the mass revealed a well encapsulated nodule with variegated white gray tan cut surface and friable soft white tan material.
Results: Histological examination, showed a benign skin adnexal tumor with papillary formation and prominent plasma cell infiltrate, namely syringocystadenoma papilliferum, transforming into high grade squamous cell carcinoma, characterized by islands and nests of highly malignant epithelial cells with central areas of necrosis. Extremely huge single or multinucleated nuclei (Monster cells) with quite atypical mitoses noted in many fields.
Immunohistochemical stains revealed that the tumor cells in in syringocystadenoma papilliferum and SCC were positive for CAM 5.2, CK7,CK 5/6(focal), EMA, and Ber EP4, while both were negative for S-100 protein, CD56, and BCL-2. The neoplastic cells of SCC were positive for both p63, and p16.
Conclusion: This unique case featured three peculiar findings . First, its occurrence in non-sun exposed area in the lower extremities. Second, the occurrence of malignant transformation in a long standing syringocystadenoma papilliferum.Third, the unique transformation into squamous cell carcinoma with basaloid feature, with the presence of huge "monster cells".
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-22 Abstract No. 001 Date 17.10.2018 & 18.10.2018	Mediastinum and thymic pathology	Altalaq, Sukaina King Fahad Specialist Hospital Dammam Saudi Arabia	Poster	Alnashwan Yara Al-Bayat, Methal

ABSRACT TITLE:
Malignant teratoid medulloepithelioma, a rare intraocular tumor in a child: Case report and review of the literature

ABSTRACT TEXT

Objective: Intraocular medulloepithelioma is a rare congenital tumor of the non-pigmented ciliary epithelium. We report a case in a child with unusual presentation following trauma to the right eye.
Methods: A case of a 5-year-old child, diagnosed with intraocular malignant teratoid medulloepithelioma, is discussed primarily from a pathological point of view with review of relevant literature.
Results: A previously healthy 5-year-old boy presented with increasing pain in his right eye and history of trauma to the same eye one year earlier. Ophthalmic examination showed increased corneal diameter and high intraocular pressure rendering the diagnosis of secondary glaucoma. Following failure of the medical treatment, the decision for surgical evisceration was made and the eviscerated eye contents were sent to histopathology. Microscopic examination revealed a tumor with multilayered cords, tubules and cystic spaces along with perivascular pseudorosettes and areas of undifferentiated neuroblastic cells. Islands of hyaline cartilage were also noted. The diagnosis of malignant teratoid medulloepithelioma was established. Three years later, the patient presented with right eye proptosis. Surgical excision of the tumor with partial exenteration was done and histopathology confirmed the recurrence of the disease.
Conclusion: Intraocular medulloepithelioma is a rare congenital tumor of the non-pigmented ciliary epithelium generally diagnosed during childhood. The morphologic appearance is characterized by a combination of primitive neuroepithelium and hyaluronic acid-rich stroma. Although the histologic criteria for malignancy have yet to be firmly established, extraocular extension is thought to be the most important prognostic factor.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-20 Abstract No. 001 Date 17.10.2018 & 18.10.2018	Mediastinum and thymic pathology	Aon Bertolino, Maria Laura Federal Police Hospital Dept. of Pathology Lujan Argentina	Poster	Navia, Daniel Cervetti, Manuel González, Germán Morales, Celina

ABSRACT TITLE:
Histopathological findings in ascending aorta without dilatacion in 119 patients with bicuspid valve. IAP Bursary Application

ABSTRACT TEXT

Objective: the objective of this study was to evaluate the thickness (E) and degrees (G) of histopathological lesion in biopsies of ascending aorta (AAs) without dilatation of patients with bicuspid valve.

Methods: Of a total of 254 patients with a bicuspid valve, 119 patients operated on for bicuspid valve replacement and AAs diameter ≤ 40 mm were selected by echocardiography. 70% of the patients were men, with a mean age of 57.5 ± 13.5 years, and similar clinical characteristics. During valve replacement surgery, a sample of AAs of 1.5 cm x 0.5 cm was obtained. They were fixed in 10% formaldehyde. The thickness of the wall was measured, processed for optical microscopy and stained with H & E, Masson
trichrome and Alcian blue. To establish the G, the histopathological findings of the intimal, adventitia and middle layer (elastic fibers, collagen and smooth muscle, proteoglycans and inflammatory infiltrate) were studied. G 0: without injury; G1: 0-10%; G2: 11-25%; G3: 26-50%; G4: 51-100%. Thickness of the aortic wall: 0 to 4 mm with interval of 0.5 mm.
Results: our histopathological data show that 46% of the AAs presented an E between 1.5 - 2 mm and 42% of them corresponded to G3 with a percentage less than 50% of damage to the aortic wall.
Conclusion: We could conclude that the walls of the AAs of patients with bicuspid valves without aortic dilation at the time of surgery would have a favorable evolution in the short and long term follow-up.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 001 Date 15.10.2018 & 16.10.2018	Cytopathology	Ayadi, Rahma Charles Nicole Hospital Dept. of Pathology Tunis Tunisia	Poster	Ksentini, Mariem Romdhane, Emna Sassi, Asma Blel, Ahlem Aloui, Raoudha Gharbi, Sarra Ben Romdhane, Neila Ines Nadia, Znaidi Rammeh, Soumaya Fereh, Feten

ABSRACT TITLE:
The efficiency of fine-needle aspiration cytology in the diagnosis of head and neck masses

ABSTRACT TEXT

Objective: Head and neck masses are a common presentation in daily practice and can be challenging to both clinicians and cytopathologists. Fine needle aspiration cytology (FNAC) is broadly adopted as a longstanding tool for the diagnosis of these masses. Its sensitivity and specificity reporting in the literature are widely variable.
The aim of the present study was to assess in our institutional experience the effectiveness of FNAC in the diagnosis of head and neck masses

Methods: This retrospective study was undertaken in the Cytology Unit of Pathology Department (Charles Nicolle's hospital in Tunisia). The study included a total of 1262 patients who presented with a palpable head and neck swelling and referred to our unit for FNAC without ultrasound guidance from January 2013 to December2016
Results: There was a female predominance with 810(64.2%) female patients and 452(35.8%) male. The median age was 42years old (1–90). The fine needle aspirations (FNAs) were non conclusive in 224(17.7%) cases. Of all FNAs, lymph nodes were the most common location (n=734, 58.1%), followed by thyroid (n=409, 32.4%) and salivary glands(n=92, 7.3 %). Of all the cases, 265 were available for cytohistological correlation including 111 lymph nodes, 105 thyroid glands, 42 salivary glands, 5 cysts and 2 soft tissue and skin lesions. A total of 7 false negative (FN) and 6 false positive (FP) FNACs were identified. Overall sensitivity and specificity of FNAC for a malignant diagnosis were 92% and 94.4%, respectively. The salivary gland group had the highest rate of FN (2.8%). All FP were reported in the thyroid group. Salivary glands as well as lymph nodes had the best specificity (100%).
Conclusion: Fine-needle aspiration cytology for head and neck masses has high diagnostic accuracy. However, it mainly depends on the anatomic location of the mass.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 001 Date 15.10.2018 & 16.10.2018	Breast pathology	Fouad Wafi, Khalil Egypt	Poster	Ali Mohamed, Mie El Saeed Bassiony, Nadia

ABSRACT TITLE:
GATA3 expression in different stages of breast cancer and its correlation with clinicopathological parameters

ABSTRACT TEXT

Objective: To determine the diagnostic role of GATA3 for detection of breast origin at different pathological stages and correlate its expression with other clinicopathological parameters.
Methods: This retrospective study was conducted on 85 cases of breast carcinomas divided into 3 groups; group 1, confined to the breast [31 cases]; group 2 with LN metastases [33 cases], and group 3 [21 cases] represented metastatic breast cancer. Manual tissue microarray blocks were constructed. Immunohistochemistry of GATA3 was done
Results: GATA-3 revealed positive nuclear reaction in 45 cases [53%]. However,a punctate cytoplasmic reaction was encountered in other 32 cases [37.6%]. 8 cases(9.4%) were completely negative for GATA3. Only a significant correlation was found between GATA 3 and luminal A molecular subtype as well as ER positive status. In group [1] there was a significant correlation with surgical stage IIA, while for group [2] there was a significant correlation with lobular histologic type. For Group [3] No significant correlation was found between GATA expression and age, ER, PR, or HER 2. There was a significant correlation between negative GATA-3 and Ki 67 more than 14 % [p =0.016]. Similarly, there was a significant correlation between cytoplasmic expression of GATA 3 and Ki67 more than 14%[p =0.045], as well as Her 2 molecular subtype[p =0.007]
Conclusion: GATA-3 isn't highly sensitive marker for breast and it should be used as part of panel for detection of breast origin. It is an important marker for differentiating metastatic lobular carcinoma from other similar tumors. Punctate cytoplasmic reaction may represent a form of GATA3 mutation that needs further studies
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-01 Abstract No. 001 Date 15.10.2018 & 16.10.2018	Bone pathology	Gonlusen, Gulfiliz Cukurova University Medical Faculty Adana Turkey	Poster	Tuncer, Recep Deveci, Mehmet Ali Erdogan, Kivilcim Bagir, Emine Ozbarlas, Serdar Erdogan, Seyda

ABSRACT TITLE:
The importance of clinicopathologic correlation of fibrodysplasia ossificans progessiva

ABSTRACT TEXT

Objective: Fibrodysplasia ossificans progessiva (FOP) represents a rare disease of chronic heterotopic ossification of soft tissues.
Methods: We presented three cases of FOP with clinicopathologic features diagnosed at our department since 2000.
Results: All cases were females and they were diagnosed at the age of 9, 1 and 7 years old according to the order of application time. The first case diagnosed as heterotopic ossification with biopsy material that was composed of spindle cells and ossification areas and diagnosed as FOP with clinical, radiological and pathological findings. The initial biopsies of last two cases showed only spindle cells areas that diagnosed as rhabdomyosarcoma and myofibroblastic tumor respectively.
Conclusion: The clinicopathologic correlation is very important for FOP diagnosis. Morphologically FOP has a wide spectrum of differential diagnosis of benign and malignant soft tissue tumors particularly in biopsy materials of the early lesions.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-04 Abstract No. 001 Date 15.10.2018 & 16.10.2018	Digital pathology and telepathology	Plesea, Iancu Emil Carol Davila University of Medicine Dept. of Pathology Bucharest Romania	Poster	Serbanescu, Mircea-Sebastian Ciovica, Viorel Stefan, Alina Gradinaru, Adiana Leavitt, Matthew O Plesea, Razvan Mihail

ABSRACT TITLE:
Assessment of correlation between tumor architecture expressed by Gleason system and intratumoral vascular network through fractal analysis

ABSTRACT TEXT

Objective: Assuming that the stromal architecture follows the gland architecture our objective is the assessment of stromal vascular distribution in relation with tumor architecture using the fractal dimension (FD) as a descriptor feature.
Methods: The studied material consisted of 184 areas with individual patterns of Gleason system selected from 90 patients with total prostatectomy. The tissue fragments were grouped in paraffin blocks using a dedicated microarray technique. Two serial sections were cut and stained with Gömöri technique, and CD34 immunomarker to assess stromal architecture and vascular network respectively. The images were binarized using a variable user-defined threshold approach with color focus for CD34 staining and intensity focus for the Gömöri staining.
Images were classified using Gleason's grading system: 2 (n=21), 3A (n=22), 3B (n=22), 3C (n=21), 4A_CR (n=15), 4A_FU (n=22), 4B_CR (n=18), 4B_FU (n=18), 5A (n=5), 5B (n=20); CR = cribriform, FU = fused.
The FD was computed for each binary image using a box-counting algorithm. The averages of the two computed values were used to compute a scatter plot.
Results: In 3B, 4B fused and 4A fused patterns the tumor architecture has a higher degree of self-smilarity correlated with a homogenous distribution of the tumor vascular network.
In patterns 2, 3A and 5B the tumor architecture tends to be more homogenous, the vascular network has a more disordered distribution within the tumor.
Cribriform patterns 4A and 4B and, in a lesser degree, 5A pattern form a third group, with both tumor architecture and intratumoral network have a lower self-similarity.
Conclusion: The FD proves to be a good tool for assessing stromal architecture. In the same time, similar Gleason architectures seem to form clusters with similar FD values.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-09 Abstract No. 001 Date 17.10.2018 & 18.10.2018	History of pathology	Zubritsky, Alexander Moscow Russia	Poster	

ABSRACT TITLE:
Dmitry Ivanovich Golovin - famous Russian pathologist-oncologist

ABSTRACT TEXT

Objective: This work has the purpose to collect and systematize the biographical data for Professor Golovin in accordance with the questionnaire I have developed. Born on August 9, 1918 in Krasnodar. Married. Graduated from the1 Leningrad SMI (1939); defense of the PhD "Experimental fibrinous pleurisy in frogs and rabbits (to the comparative pathology of inflammation)" (1949), doctorate - on the topic "About Metaplasia of Epithelium". Professor (1956); the organizer of the Moldovan Scientific Society of Pathology and the chief pathologist of the Moldavian SSR (1954-58); introduced many innovations both in the educational process and in the work of prozektura: programmed control, the creation of macro - and micropreparations museum, etc. Honored scientist of the RSFSR (1980); 5 doctoral and 30 candidate theses were defended under his guidance; awarded with many orders and medals. Scientific interests: oncomorphology, clinical and morphological direction of the pathologist, etc. Author of 90 scientific works, including some chapters of Great Medical Encyclopedia, a multivolume guide on pathological anatomy, 9 monographs and 1 Atlas of human tumors. Member of the CPSU (1944), Leningrad Scientific Society of Pathologists (1958), the first chairman of the Moldavian Scientific Society of Pathologists. Motto: "Knowledge is power". Distinctive feature: high demands in professional work to itself and employees, kindness, responsiveness, honesty, integrity, commitment, high professionalism and general erudition, business and energetic person. Hobbies: Lover of music (preferred works by SS Prokofiev and PI Chaikovsky), fiction (preferred works by Alexander Pushkin and Leo Tolstoy, fond of detective novels), nature and country walks, tied to domestic animals, in particular, to their own airedale terrier; motorist: traveling around the country by car. Died suddenly on December 21, 1981 in Leningrad at the age of 63 years from myocardial infarction. Buried at the cemetery "Bogoslovskoe" of St.Petersburg near the graves of his mother and mother-in-law.
Methods: No
Results: No
Conclusion: No
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 002 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Abdel Magid, Ibtihalat Elnema National Health Laboratory Dept. of Histopathology Khartoum Sudan	Poster	Ibrahim, Omayma Zulfu, Azza Hassan, Ahmed Ahmed, Osman

ABSRACT TITLE:
Role of p57 immunnohistochemical staining in the diagnosis of complete and partial hydatidiform molar pregnancy in sudanese patients

ABSTRACT TEXT

Objective: To investigate the utility of p57 immunnohistochemical (IHC) staining in the differentiation between complete and partial molar pregnancy in Sudanese patients.
Methods: This was a descriptive cross-sectional study included 32 patients diagnosed histologically as partial (15, 46.8%) or complete (7, 21.8%) molar pregnancy or without specification (10, 31.2%) at the National Public Health Laboratory (STACK), Khartoum, Sudan during the year 2015. Patients' clinical information was retrieved from records and histopathological reports. Immunohistochemical testing for p57KIP2 was done using monoclonal antibodies to p57 on formalin fixed paraffin embedded tissue blocks (FFPE) and examined by two histopatholgists.
Results: Mean age (±SD) was 29.6 (±8.36) and ranged from 16 to 46 years. Out of the 15 cases diagnosed histologically as partial mole, 13 (86.6%) cases were p57 positive and 2 (13.3%) cases were p57 negative. Out of the 7 cases diagnosed as complete, 5 (71.4%) cases were positive and 2 (28.6.%) cases were negative for p57. Out of the 10 not specified cases, 4 cases (40%) were positive and 6 (60%) cases were negative for p57.
Conclusion: The positive predictive value of p57 IHC staining is 86.66%, while the negative predictive value is 28.57%. p57 is a useful IHC marker to differentiate between partial and complete molar pregnancy.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Abdelrahman Mahmoud National Liver Institute Dept. of Pathology Shebin El-Kom Egypt	Poster	Elazab, Dina Elkholy, Shimaa
Abstract No. 002				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Splenic cord capillary hemangioma: A case study

ABSTRACT TEXT

Objective: Abstract (For IAP Bursary Application):
The aim of this study is to shed some light on this uncommon neoplasm and to help in its proper diagnosis since it could be misdiagnosed clinically as a malignant neoplasm, and to include and differentiate it from other benign vascular lesions of spleen such as hamartoma or sclerosing angiomatoid nodular transformation (SANT).
Methods: This study presents a 42-year-old male patient, who underwent splenectomy at our institute (National Liver Institute, Menoufia University, Egypt), after the detection of a splenic focal lesion, that was diagnosed radiologically as lymphoma. Pathological assessment of the splenic mass was done (gross and microscopic evaluation). Immunohistochemical study using CD34 and CD8 was also performed.
Results: The received spleen measured 18.5x11.5x9 cm with a smooth outer surface and a preserved notch. Serial cuts revealed a rounded, firm, dark red mass measured 9x9x8 cm. The mass was well demarcated from the splenic tissue and showed a central whitish stellate scar with intervening fine fibrous septa. Histopathological evaluation revealed variable sized nodules which were surrounded by fibrous tissue, these nodules contained abundant small sized blood vessels and large areas of hemorrhage. The stoma in between the nodules showed dense fibrous tissue, hemosiderin deposition and mild lymphoplasmacytic infiltration.
The small sized blood vessels within the nodules showed marked positivity for CD34 and negativity for CD8, that indicates the absence of CD8-positive splenic sinuses inside these nodules.
These findings differentiate between CCH and SANT, as the latter shows positivity for CD8 in the sinusoidal blood vessels. In classic hamartoma, CD8-positive sinuses predominate.
Conclusion: The morphologic appearance and immunohistochemical profile of this lesion is unique in our experience and represent a new category of vascular lesions in spleen, a splenic cord capillary hemangioma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10	Immunohistochemistry	Abdelzaher Eman Faculty of Medicine Dept. of Pathology Alexandria Egypt	Poster	Abdullah, Shery Kamel, Nahla Algebaly, Omar
Abstract No. 002				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
The expression of gata3 in urothelial urinary bladder carcinoma: An immunohistochemical study

ABSTRACT TEXT

Objective: Urothelial carcinoma (UC) of the urinary bladder is the ninth most common cancer worldwide, accounting for 3% of the global cancer incidence. Approximately 80% of these patients present with non–muscle invasive bladder cancer (NMIBC). GATA3 is one of the most recent diagnostically helpful immunohistochemical markers for UC. The published literature lacks comprehensive reports on the impact of GATA3 expression on the prognosis of patients with UC.
Methods: We evaluated the immunohistochemical expression of GATA3 and Ki-67 in 50 Egyptian patients with non-muscle invasive urothelial carcinoma. Ten non-neoplastic bladder tissue specimens served as a control group. We statistically analyzed the association between GATA3 and Ki-67 expression with pathological variables and patients' outcome.
Results: GATA3 expression was significantly downregulated in urothelial carcinoma cases compared to the control group and it showed a significantly lower expression in association with high grade tumors and tumor progression. The predictive performance of GATA3 in predicting tumor grade, malignancy and the probability of progression was good with a total accuracy of 72% , 68% and 72%, respectively.
Ki67 expression was significantly upregulated in UC cases compared to the control group. Higher proliferative activity was significantly correlated with high tumor grade, non-papillary growth pattern, and lamina propria invasion. Ki-67 expression did not influence tumor recurrence and progression. The predictive performance of Ki-67 in predicting tumor grade and malignancy was good with a total accuracy of 72 and 74% respectively. Ki-67 was fair in predicting stage with an accuracy of 62%.
Conclusion: We conclude that GATA3 downregulation and higher proliferative activity are implicated in UC tumorogenesis, loss of differentiation and aggressiveness. GATA3 down expression could predict progression in NMIBC with an accuracy of72% and thus it constitutes a potentially promising novel prognostic marker in patients with urothelial carcinoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Adoke, Kasimu Ahmadu Bello University Dept. of Pathology Zaria Nigeria	Poster	Kabir, Balarabe
Abstract No. 002				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Adenoid cystic carcinoma presenting as macroglossia of the tongue: A unique case

ABSTRACT TEXT

Objective: Adenoid cystic carcinoma (ACC) is a malignant neoplasm that originates from the major and minor salivary glands. It represents about 1-2% of head and neck cancers. ACC is a slow growing tumour with diffuse invasion and tendency to metastasis to the bone and lungs. We present a rare case of solid variant of ACC presenting as diffuse enlargement of the tongue in an elderly female.
Methods: A 95 year old woman presented with enlargement of the tongue causing difficulty in eating and speacking, she also could not to work for 2 weeks. A consult was sent by the dental and maxillofacial unit for FNAC (Fine needle aspiration cytology). On examination, there was diffuse enlargement of the tongue with no visible tumour on palpation. FNAC and subsequent biopsy of the tongue was done.
Results: FNAC showed singles and clusters of basaloid cells with hyperchromatic nuclei and globules of basement material (Giemsa and H&E) stains. Histology shows infiltrating malignant basaloid cells growing in nests and solid sheets. Little focus of perineural invasion and abnormal mitosis was seen. The diagnosis was ACC carcinoma on FNAC and ACC solid variant on histology with possible bone metastasis.
Conclusion: ACC can present as macroglossia of the tongue. Careful details on cytomorphology of the cells can help in accurate diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Ahmed, Syed Salahuddin Singapore General Hospital Singapore	Poster	Iqbal, Jabed Ong, Clara Chong Hui Lim, Jeffrey Chun Tatt Yeong, Joe Poh Sheng Li, Huihua Thike, Aye Aye Tan, Puay Hoon
Abstract No. 002				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Glucose transporter-1 (GLUT-1) expression correlates with higher histologic grade triple negative breast cancers

ABSTRACT TEXT

Objective: Tumour hypoxia, a key factor in development of malignancy, leads to increased expression of an array of proteins including glucose transporter-1 (GLUT-1) through hypoxia-inducible factor 1 (HIF-1) which enable tumour cells to survive the harsh tumour microenvironment. GLUT-1 expression is increased in triple negative breast cancer (TNBC) which refers to a subset of aggressive breast cancers lacking expression of oestrogen receptor (ER), progesterone receptor (PR) and human epidermal growth factor receptor 2 (HER2). These tumours are associated with poor prognosis, distinct metastatic potential and limited therapeutic options. We investigated the expression of GLUT-1 in TNBC by immunohistochemistry (IHC) and correlated its expression with the clinical parameters.
Methods: A total of 296 TNBCs were identified. IHC using GLUT-1 (clone SPM498, Biocare CM408B) in a dilution of 1:25, was performed on 4-µm tissue microarray sections. GLUT1 expression was assessed in the tumour cell membranes. Disease free survival (DFS) and overall survival (OS) were defined as time from diagnosis to disease recurrence/death of breast cancer for events, respectively, and date of diagnosis to date of last follow up for censored cases. GLUT-1 expression was correlated with clinicopathological parameters and clinical outcomes.
Results: Twelve cases were excluded due to loss of tissue. Using median H-score of 100, 103 (36%) tumours showed GLUT-1 staining. GLUT-1 positivity was significantly associated with high histologic grade ($p<0.001$). There was a trend of increased expression of GLUT-1 in younger patients ($p=0.0279$) with increased tumour size ($p=0.0913$). GLUT-1 expression did not adversely affect the DFS and OS.
Conclusion: GLUT-1 expression was significantly associated with aggressive tumour traits in TNBC. However further studies are warranted to explore role of GLUT-1 as potential therapeutic target in these aggressive breast tumours.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Albalushi, Abdulaziz Ali Oman Medical Speciality Board Dept. of Histopathology Alsuwaiq Sultanat of Oman	Poster	Shalaby, Asem
Abstract No. 002				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Rare case report: 6 years old with bladder inflammatory myofibroblastic tumor

ABSTRACT TEXT

Objective: Inflammatory myofibroblastic tumor (IMT) is a distinctive neoplasm composed of myofibroblastic and fibroblastic spindle cells, accompanied by inflammatory infiltration of plasma cells, lymphocytes, and eosinophils. IMTs rarely occur in the urinary bladder. It is important to distinguish this tumor from other malignant spindle cell tumors. Herein, we report a 6 YEARS old child who presented with 3 months history of vague abdominal pain with on/off fever and loss of appetite. Computed tomography showed large solid mass in lower abdominal cavity measuring 8 x 6 x 5 cm with suspicious paraaortic lymph nodes. Computed tomography guided biopsy showed features consistent with IMT. The patient underwent a laparotomy with resection of the bladder tumor, partial cystectomy, paraaortic lymph nodes biopsy and partial omentectomy. The resected tumor specimen revealed a proliferation of spindle-shaped cells on a background of plasma cells and lymphocytes. Immunohistochemical staining showed the tumor to be positive for anaplastic lymphoma kinase (ALK) and smooth muscle actin (SMA).
Methods: .
Results: .
Conclusion: .
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	Al-Hashimi, Fatima Salmaniya Medical Complex Histopathology Department Manama Bahrain	Poster	Diaz-Cano, Salvador
Abstract No. 002				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
RET/PTC1 Rearrangement in Hashimoto's Thyroiditis: Canonical WNT Expression Upregulation for Neoplastic Promotion

ABSTRACT TEXT

Objective: More than half a century has passed since the association between papillary thyroid carcinoma (PTC), and Hashimoto's thyroiditis (HT) has been posted. The discovery of the RET/PTC oncogene thirty years later has further strengthened this argument, followed by the associations made between hyalinizing trabecular adenoma (HTA) and both PTC and HT. Numerous researchers studied these relationships, with some debating a valid link.
Methods: This case of a 28-year-old woman with HT-associated PTC and a co-existing HTA, offers a unique opportunity to study these three diseases together in the same microenvironment. Total thyroidectomy specimen was routinely examined on H&E, and fresh tissue was analysed for gene expression.
Results: Fresh tissue analysis for gene expression showed that all three expresses RET/PTC1 transcripts, while this was not seen in the control normal thyroid tissue. There was also an increased expression of AKT, ERK1, nuclear β-catenin and TCF4 in both the HTA and PTC sampled tissue. AKT plays a central role in regulating cell proliferation and survival by inhibiting apoptotic processes, while ERK1 leads to cell proliferation. Both β-catenin and TCF4 are linked to the canonical WNT/β-catenin pathway.
Conclusion: This study is the first to conduct a biological analysis of these three diseases in a single specimen. The expression of RET/PTC1 highlights the link between inflammatory processes such as HT and neoplastic diseases such as HTA and PTC. The limited expression of TCF4, AKT, ERK1, and β-catenin supports the notion that the canonical WNT/β-catenin pathway plays a pivotal role in the development of this neoplasm subtype. To date, gene expression alone is not sufficient to make a distinction between benign and malignant thyroid tumors. Studying tumor morphology remains the gold-standard method for diagnosis and analyzing these processes is essential in developing drugs and predictive tests for treatments to inhibit this pathway in thyroid cancer.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Al-Marzooqi, Saeeda Sheikh Khalifa Medical City Abu Dhabi United Arab Emirates	Poster	Al Absi, Hebah Konstantinopoulou, Sofia Al Junaibi, Adel Abdullah, Mohammad
Abstract No. 002				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Type I regressed pleuropulmonary blastoma in a 10-year-old boy: A case report

ABSTRACT TEXT

Objective: Pleuropulmonary blastoma (PPB) is a rare pulmonary tumor of infancy and early childhood. It is divided into 3 distinct types; type I (cystic), type II (cystic/solid) and type III (solid). In 2008, type-I regressed (Ir) was found to deviate from the progression pathway expected in type I lesions and presented in later childhood. It lacked the primitive rhabdomyoblastic cells and had a favorable clinical outcome. Due to limited awareness and difficulty in diagnosis of this entity, confusion with other cystic lung lesions in childhood has been an issue in establishing follow up data.
Methods: A 10-year-old boy presented with recurrent episodes of dry cough, wheezing and progressive dyspnea. He was born prematurely at 27 weeks of gestation and had prolonged oxygen therapy. A right lung cyst was detected at birth and diagnosed as congenital lobar emphysema. He had multiple hospital admissions for respiratory infections. His dyspnea has worsened necessitating steroid and leukotrienes inhibitors. A CT scan showed right upper lobe cystic lesion with internal septations. A thoracoscopic cystectomy was performed as a diagnostic and therapeutic procedure. Microscopy revealed a multilocular cystic lesion with delicate fibrotic septae. The lining epithelium consisted of flattened-cuboidal cells and rare respiratory-type lining epithelium. There were foci of subepithelial condensation by of bland uniform spindle mesenchymal cells lacking mitoses, strap-cells and rhabdomyoblasts. There was absence of cyst communication with background pulmonary tissue. Immunohistochemistry revealed positive CK AE1/AE3 in lining epithelium and negative desmin and myogenin in subepithelial mesenchymal cell condensation. The case was diagnosed as Pleuropulmonary blastoma type 1-r.
Results: A clinical decision favored regular radiological follow-up due to lack of overall survival benefit of chemotherapy in this type.
Conclusion: Pleuropulmonary blastoma type 1-r highlights the potential for regression or failure to progress of type 1 along the dysplastic pathway to types II-III.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Al-Obaidy, Khaleel Indiana University Dept. of Pathology Indianapolis USA	Poster	Idrees, Muhammad
Abstract No. 002				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Monophasic synovial sarcoma of the urinary bladder: A case report

ABSTRACT TEXT

Objective: Synovial sarcoma (SS) is a malignant mesenchymal neoplasm that shows both epithelial and mesenchymal differentiation. It occurs predominantly in young adults and has been shown to occur at almost any anatomic site. SS is considered to be a biphasic tumor; however, monophasic forms are not uncommon. SS originating within the genitourinary tract is exceedingly rare.
Methods: Herein, we describe a case of synovial sarcoma arising within the urinary bladder. To the best of our knowledge, this is the first report in the English literature at this location.
Results: The patient is an 80-year-old female with a past history of invasive ductal carcinoma of breast status post mastectomy 4-years prior to presentation to the urology clinic for evaluation of gross hematuria. A CT scan showed 1 cm mass in the right lateral bladder. The patient underwent transurethral resection of bladder tumor and subsequent cystectomy a month later. Microscopic examination of TURBT specimen showed a hypercellular spindle cell neoplasm, organized in poorly-formed fascicles in the wall of the urinary bladder. The cells had scant cytoplasm with hyperchromatic nuclei and brisk mitotic activity. Occasional necrosis and calcifications were seen. The cystectomy specimen showed a small focus of residual tumor at the transurethral resection site. No conventional urothelial carcinoma in situ or invasive carcinoma was present in either specimen. Immunohistochemical stains showed expression for TLE1, BCL-2, and CD99 in tumor cells while AE1/A3 pan-cytokeratin, GATA-3, CAM-5.2, CD34, S100, CD45, CD138, and desmin were negative.
Conclusion: The morphologic and immunohistochemical features seen in this case are that of synovial sarcoma. Pure mesenchymal tumors of the urinary bladder are rare. The diagnosis should only be rendered after thorough examination and exclusion of other tumors generic to bladder.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13 Abstract No. 002 Date 15.10.2018 & 16.10.2018	Pathology of infectious diseases	Atanda, Akinfenwa Bayero University Dept. of Pathology Kano Nigeria	Poster	Haruna, Sanusi

ABSRACT TITLE:
Infections mimicking malignancy: A teaching hospital experience

ABSRACT TEXT

Objective: To evaluate the protean presentation of infections mimicking malignancy. This will serve to heighten clinical and pathological indices of suspicion and prevent unwarranted aggressive management.
Methods: A 19-year (1999-2017) review of all morphologically diagnosed infection-related lesions in which malignancy was clinically suspected was conducted.
Results: 364 cases of schistosoma hematobium-related lesions were diagnosed in the study period. Of 55 cases from the gastrointestinal tract one gastric, 8 colonic and 8 rectal cases were suspected to be malignant. Weight loss, mucoid stools (±blood) and endoscopic polyps seen in 100%, 58% and 25% were the most common features respectively. Malignancy was suspected in 23 (61%) of 38 genital cases and apart from firm non-tender organomegaly, young age, predominantly below 20 years, characterized 15 of the genital lesions. Of 3 prostatic lesions PSA as high as 9.3ng/ml was found while the single ovarian case was in a 30 year old female. An inguinal lymph node with suspicion of lymphoma was also found. History of episodes of hematuria was reported in only 39% of genital cases. Careful review and serial sections were required especially in gastro-intestinal lesions.
Twenty one cases of Actinomycetoma of the lower limbs and oropharynx were mistaken for melanoma, squamous carcinoma and sarcoma. Mean age was 33±17 years and limb swelling and ulceration were the most frequent findings.
Ten cases of atypical Mycobacterium tuberculosis mimicking malignancy included 3 testicular cases and 2 each from ovary, breast and uterus and 1 from the jaw. Mean age was 37±14 years. Of 3 fungal lesions one each was of brain, skin, and bone. All were males with mean age 21±7 years.
Conclusion: While careful pathologic evaluation is paramount for accurate diagnosis, clinical history of residence in endemic areas, male gender, young age and protracted history of illness are the most useful features when evaluating these cases.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 002 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Ayari, Asma Salah Azaiez Institute Dept. of Pathology Tunis Tunisia	Poster	charfi, lamia sallemi, rym boujelben, nadia sahraoui, ghada doghri, raoudha ben hamida, naziha mrad, karima driss, maha

ABSRACT TITLE:
Neuroendocrine Hepatic Metastasis: A single Center Experience (Abstract for an IAP bursary application)

ABSRACT TEXT

Objective: The liver is the most common site of metastatic disease for neuroendocrine tumors (NETs) and its involvement develops in 46% to 93% of patients with neuroendocrine malignancies. In addition, neuroendocrine hepatic metastases (NEHM) can lead to decreasing long-term survival. The aim of our study is to notice epidemiologic, clinical and histological aspects of NEHM.
Methods: In this 17-years study (2001 - 2018), thirty five liver NETs were extracted from the pathology files of the department of pathology of Salah Azaiez Institute (Tunisia). After classification based on the world health organization guidelines, the patients were evaluated according to their sex, age, and proliferative index (mitotic index, Ki-67).
Results: The mean age of patients was 56 years. The sex ratio was about 1,5. The diagnosis of NEHM was performed in hepatic biopsies in the majority of cases (86%) and in metastasectomy specimens in 14 % of cases. The primitive site was identified in only 19 patients (54%). In the other cases, it remained unknown. It was pancreatic in 6 cases (17,1%), colorectal in 3 cases (8,5%), pulmonary in 5 cases (14,2%) and ileal in 3 cases (8,5%). We noted one case of gastric primitive NET and one case of gallbladder primitive NET. 12 cases were grade 1. Grade 2 was noted in 6 cases. The new entity of well differenciated G3 was applied to 6 cases that were before recognized as neuroendocrine carcinoma (well differenciated tumor with ki-67 > 20%). Neuroendocrine carcinoma was noted in 8 cases and 2 cases remained not assessable because of cramped material.
Conclusion: Hepatic metastasis is one of the most significant prognostic factors for patients with NETs and it usually initiates the clinical presentation.
Complete imaging, clinical, and pathological studies can help to identify the primary origin of the liver-NETs and to improve the patient's management.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 002 Date 17.10.2018 & 18.10.2018	Dermatopathology	Ayari, Asma Salah Azaiez Institute Dept. of Pathology Tunis Tunisia	Poster	Chelly, Ines Zehani, Alia Chelly, Baya Azouz, Haifa Doghri, Raoudha Haouet, Slim Kchir, Nidhameddine

ABSRACT TITLE:
Acquired elastosic hemangioma: A distinct variant of hemangioma

ABSRACT TEXT

Objective: We present a case of an acquired elastosic hemangioma (AEH), a cutaneous vascular proliferation relatively recently described as a variant of hemangioma. The objective of this case report is to demonstrate the role of histological examination to diagnose this lesion and to distinguish it from other vascular proliferations.
Methods: We report the case of a 64 years old woman presented with a cutaneous lesion of the cheek. Clinical examination showed an erythematous, nodular, well circumscribed lesion. A punch biopsy was performed for a histological examination.
Results: Microscopic analysis of the biopsy showed a vascular proliferation confined to the mid-dermis made of capillaries disposed in parallel to the epidermis and covered with regular proeminent endothelial cells .The epidermis was unremarkable. These vessels were surrounded by collagenic tissue where solar elastosis was remarkably present.
Immunohistochemical staining with CD34, HHV8 and SMA showed a strong expression of CD34 by the endothelial cells, a neagtive expression of HHV8 and a peripheral annular positivity around the vessels of SMA.
Conclusion: AEH is a distinctive clinicopathological variant of hemangioma that include a well defined, band-like proliferation of small capillary vessels in a background of solar elastosis. Immunohistochemistry can be helpful in many situations to exclude other vascular proliferations.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 002 Date 15.10.2018 & 16.10.2018	Molecular pathology	Aziz, Sabahat Dow Univ. of Health Science Dept. of Molecular Pathology Karachi Pakistan	Poster	Roome, Talat Razzak, Anam Sharafat, Shaheen Nadeem Alam, shams

ABSRACT TITLE:
Association of TLR-2 and Dectin-1 polymorphism with viral/fungal infections in liver transplant patients in Pakistan

ABSRACT TEXT

Objective: Pattern Recognition Receptors (PPRs) including Toll-like receptors (TLRs) and non-Toll-like Dectin-1 receptor, widely expressed by immune cells and play a key role in the immune recognition to fight against fungal, bacterial or viral infections. The aim of the study to determine the association of single-nucleotide polymorphisms (SNPs) in TLR2 and Dectin-1 with Candida colonization, Invasive Aspergillosis and Cytomegalovirus (CMV) replication in recipients and donors of liver transplantation (LT) in Pakistani population.
Methods: In this case control study, TLR2 (2258A/G) and Dectin-1 (714T/G) were identified in LT (15 recipients and 15 their respective donors) and 50 healthy volunteers from Pakistani population. Blood samples from LT recipients at 2nd, 4th and 6th week afterward 4 and 6 months intervals was collected for CMV DNA quantification by real time PCR. Urine and mouth wash for Invasive Aspergillosis (IA) and Candida colonization while sputum only for Invasive Aspergillosis (IA), was taken from LT recipients twice in a month (at 2nd and 4th week) during the first six month after transplant and analyzed by culture technique.
Results: In this study, using Kaplan-Meier estimation (P = .044), homozygosity for TLR2 (2258A/G) and Dectin-1 (714T/G) was marginally associated with CMV disease in liver transplant recipients that impairs the function of this receptors. Patients bearing the TLR-2 & Dectin-1 gene homozygous polymorphism were more likely to be colonized with Candida species, compared with patients bearing wild-type Dectin-1. The SNPs in both receptors showed 0.9-fold increased risk of developing candida and IA after transplantation.
Conclusion: Within the limits of this study, TLR-2 and Dectin-1 gene polymorphisms are associated with viral or fungal infection in recipients of LT and are expected to be one of the causes of post-transplant complications.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Barbosa, Barbara Sao Paulo Brazil	Poster	Saieg, Mauro
Abstract No. 002				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Impact of fine-needle aspiration in non-diagnostic and indeterminate thyroid nodules

ABSTRACT TEXT

Objective: The objective of the present study is to assess the impact of repeat fine-needle aspiration in thyroid nodules primarily classified as non-diagnostic and indeterminate, with the evaluation of the diagnostic resolution rate after the reassessment of the nodule.
Methods: We retrospectively collected all cases of thyroid FNA at our institution in the last five years that had one or more repeat aspirations of the same nodule, calculating the percentage of samples with change in the diagnostic category after the reassessment of the nodules. Additional collected data included genre, age and month interval between the repeat aspirations.
Results: One hundred and seventy-eight specimens from 167 patients (140F, 27M) with a median age of 56 years (range 11-90) were included in the study. In 155 samples, only one repeat aspiration was performed, with an 8-month interval in average. For the remaining 23 samples, two repeat aspirations were performed, with an average interval of 6 months between the first and the second procedures and an average of 11 months between the second and the third aspirations. Among the 86 cases primarily classified as non-diagnostic, 25 (29.1%) remained in the same category after the first reassessment and only 18 (20.9%) after the second repeat aspiration. Among the 40 indeterminate cases, only 10 (25%) retained its status after the second aspiration, with no change after the second repeat.
Conclusion: Repeat aspiration of non-diagnostic and indeterminate thyroid nodules had a positive impact in both groups, with diagnostic resolution rates of 80% and 75%, respectively. The present study therefore endorses the use of this technique in such cases, as preconized by the Bethesda System for reporting thyroid cytopathology.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-12	Nephropathology	Bashir Hassan, Fatima National Health Dept. of Histopathology Khartoum Sudan	Poster	
Abstract No. 002				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Clinicopathological features of 108 cases of renal cancer in adult Sudanese patients

ABSTRACT TEXT

Objective: Renal cell carcinomas are associated with high mortality and morbidity in developing
countries . The objective of this study is to investigate the histopathological pattern of renal cell carcinoma, the clinical presentation , the mode of surgical procedure, grading the tumors by using Fuhrman grading and staging the tumors by using TNM staging system.
Methods: This is a descriptive retrospective case series study of 108 adult renal cancer patients conducted within the period from 2013 to 2015 from different histopathology departments in Khartoum /Sudan .
Data was collected from the patients request forms and patients files including personal, clinical and pathological data. Formalin fixed paraffin embedded blocks of processed histopathology specimens were recut, stained and re-examined by two histopathologists . Thehistopathological type, tumor grade and clinical stage of the patients were recorded.
Results: The study included 108 patients, 59 were males and 49 females, with a M: F ratio of
1.13:1.0. The youngest patient was 19 years and the eldest was 86 years.
The clinical presentation included loin pain in 35.2% ,abdominal mass in 31.4% ,hematuria in 22.9% and 4.8% were incidental finding during routine ultra sonography examination.
Two types of surgical procedures were performed: nepherctomy and partial nepherctomy in 92 and 11 patients respectively. Eleven patients had needle biopsy only
Microscopic examination of the slides identified 7 histological types of renal cancer. These were clear cell RCC in 71.2%, Papillary RCC in 18%, Sarcomatoid RCC in3.8%, Chromophobe in 0.9%, Collecting Duct RCC in 0.9%, Transitional Cell carcinoma in 4.5% and Squamous Cell Carcinoma in 0.9%
Using Fuhrman grading system showed grade II, III, I and IV in 48, 29, 16 and12 patients
respectivelyTNM staging system showed stage III, II, I and IV in 41, 30,13and 8 patients respectively.
Conclusion: Sudanese patients show a variety of histopathological features for renal cancer.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Ben Abdeljelil, Nouha Fattouma Bourguiba Hospital Monastir Tunisia	Poster	Ben Khalifa, Sarah Njima, Manel Chouchane, Sara Chiba, Dorra Hadhri, Rim Zakhama, Abdelfateh Njim, Leila
Abstract No. 002				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Primary Gliosarcomas: A retrospective study of 19 cases

ABSTRACT TEXT

Objective: Gliosarcoma is a very rare brain tumor classified by the World Health Organization as a variant of glioblastoma, therefore a grade IV tumor. The aim of the present study is to investigate the clinical and pathologic features of of this tumor.
Methods: Using a retrospective review, 19 patients seen at 3 Tunisian neurosurgery centers between 1990 and 2015 with a pathology-confirmed diagnosis of cerebral gliosarcoma were identified.
Results: The mean age of the patients was 47 years and the female -to male -ratio was 1,7. Clinical symptoms included signs of intracranial hypertension (14/19), motor impairment (9/19),seizures (3/19) and frontal syndrome (2/19). Preoperative CT scans or MRI was performed in all patients. The maximum diameter ranged from 3 to 8 cm (mean = 5.1 cm). The locations included frontal (43%),parietal (37%), temporal (10%) and occipital (5%) areas and the posterior fossa in one case (5%) .
Eighteen patients underwent tumor resection, which was classified as gross total in 6 patients (32%); subtotal in 9 patients (47%) and partial in 3 patients (16%).
Histologic examination showed a biphasic pattern in all cases. The glial component had characteristics of glioblastoma, cellular atypia, an increased mitotic rate, necrosis, and expression of fibrillary acidic protein(GFAP). The mesenchymal component had groups of spindle-shaped atypical cells with a high mitotic index.
Sixteen patients had follow-up data available. Four patients are still alive and 12 patients died of the disease within 11 months in average after the operation (mean duration of survival = 9 months).
Conclusion: Gliosarcoma is a highly aggressive tumor accounting for 1.8 -8% of all glial tumors. It is composed of both malignant glial and sarcomatous elements. Diagnosis is based on histology and GFAP immunostain. Treatment is always surgical and prognosis is closely linked to the quality of resection.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-05	Education in pathology	Ben Slama, Sana Mongi Slim Hospital Anatomie Pathologique Tunis Tunisia	Poster	Bacha, Dhouha Walha, Marwa Ben Jemaa, Nadia Lahmar, Ahlem Ben Romdhane, Hayfa
Abstract No. 002				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Pathology teaching: Survey of 86 Faculty of Medicine Tunis' students

ABSTRACT TEXT

Objective: The aim of our study is to analyze medical students' (of Faculty of Medecine of Tunis) opinion on pathology curriula and teaching. Furthermore, we submit proposals to improve insufficiencies.
Methods: A survey was conduted among 86 medical students. This survey allowed to assess medical students' judgment.
Results: Almost 2/3 of students felt quite satisfactory basic knowledge in pathology and the majority found laboratory courses interesting and changed their views on the importance of the place of the pathology in medical practice. A third of the students could choose pathology as residency.
Conclusion: New curriculum must include active learning methods providing interactivity with students. The teaching of pathology can be integrated in other disciplines in order to make positive exposure of pathology for medical students.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-20	Mediastinum and thymic pathology	Bourhroum, Najoua Ibn Sina Universitary Hospital Rabat Morocco	Poster	Znati, Kawtar Bernoussi, Zakya
Abstract No. 002				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Anterior mediastinal teratoma - A case report with literature review

ABSTRACT TEXT

Objective: Germ cell tumors are predominantly found in the gonads, and the most common extragonadal site is the anterior mediastinum . Mediastinal germ cell tumors account for 15 % of all mediastinal tumors in adults and 24 % in children . Of the tumors of the anterior mediastinum, benign cystic teratomas have excellent prognosis after complete surgical excision
Methods: We report a case of such rare tumor in a young adult female of 18 yrs old who presented with persistent cough of one and half month duration. Computed tomography of the chest confirmed the diagnosis as anterior mediastinal teratoma. Patient underwent a right anterolateral thoracotomy. Intraoperatively there was a large mass in the anterior mediastinum extending to right hemithorax. The mass was compressing the great vessels, adherent to chest wall, pericardium, and lung. Complete excision of the mass done. Patient underwent uneventful recovery. Histopathology reported as benign cystic teratoma.
Results: Germ cell tumors are uncommon neoplasms that usually arise in the gonads. The most common extragonadal site is anterior mediastinum. It is estimated that only 1–3 % of all germ cell tumors arise in the mediastinum. Germ cell tumors account for 15 % of adult anterior mediastinal tumors and 24 % of all pediatric anterior mediastinal tumors. Teratomas are equally present in men and women with an age range from 1 to 73 years, and average age at presentation is 28 years. There is now general acceptance that extragonadal germ cell tumors represent malignant transformation of germ cell elements within these sites without a gonadal primary focus. A theory to account for extragonadal germ cell tumors was proposed by Fine [, who suggested that there was an error in migration of primitive germ cells along the urogenital ridge. Histologically mediastinal germ cell tumors are classified as teratomas which may be mature or immature, teratoma with malignant elements, teratocarcinoma, seminoma, and nonseminomatous tumors.
Benign teratomas are often asymptomatic and are discovered on chest radiograph obtained for unrelated reasons. If symptoms are present, they are due to mass effect and may cause cough, dyspnea, or chest pain. Teratomas may rarely cause superior vena cava syndrome. Rarely the patient may have expectoration of hair (trichoptysis) and is pathognomonic symptom. CT with IV contrast is the imaging modality of choice with a suspected germ cell tumor. Benign teratomas are usually rounded with sharp margins. They often contain variable amount of fat, soft tissue density, cystic areas, calcification, and bone or teeth. A fat fluid level may be seen in cystic teratomas.
Complete resection is curative for a benign teratoma, and there is no role for adjuvant chemotherapy or radiotherapy
Conclusion: Even though anterior mediastinal teratomas are uncommon tumors, complete excision of the tumor without any surgical complication is possible in most of the cases. Hence, these tumors can be cured by surgical excision.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-22	Ocular pathology	Burkadze, George Tbilisi State Medical University Dept. of Pathology Tbilisi Georgia	Poster	Muzashvili, Teona
Abstract No. 002				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Unusual case of iris melanocytic lesion

ABSTRACT TEXT

Objective: Uveal melanoma is a rare malignancy that arises from melanocytes within the uveal tract of the eye. The median age of diagnosis is approximately 62 years; however, the peak age for diagnosis is after 70 year.
Methods: However, in our practice, we had early age case of iris melanoma. Pacient was male 28 years old. Postoperative material was 3x2.5x1 cm in size, dark color. Histological slides was stained by the Hematoxylin-eosin technology. Also was used immunohistochemistry.
Results: Histologically, there was dense cellularity, about 70% of cells filled with melanin pigment, epitheloid type cells and moderate grade nuclear polymorphism. There were no atypical mitotic figures and necrotic focus. Main field of tissue stroma was less cellular, vascular networks, defined as back-to back closed vascular loops, without epithelial type cysts. There was no invasion into adjustment soft tissue. Was done immnohistochemistry staining method, using of monoclonal antibody such as S100 (clone polyclonal), HMB45 (monoclonal), Melan A (clone A103), ki67 (clone MM1) p53 (clone DO7), AE1/AE3 (clone AE1/AE3). Results Showed us: S100 negativity, HBM45 was diffuse positive, Melan A- focally positive, AE1/AE3-negative, Ki67 was 3% and P53 negative results.
Conclusion: Finally, there were not revealed mark cellular polymorphism, invasion into adjustment soft tissue, necrotic fields and atypical mitotic figures, also proliferative index was low and S100 was negative. However was seen vascular networks, defined as back-to back closed vascular loops, HMB45 was diffuse positive, without epithelial cysts this type of lesion was assessed as iris in situ melanoma (iris melanocytoma)

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-01	Bone pathology	Gonlusen, Gulfiliz Cukurova University Medical Faculty Adana Turkey	Poster	Erdogan, Kivilcim Deveci, Mehmet Ali Ozbarlas, Serdar
Abstract No. 002				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Primary malignant mesenchymoma of bone (A case report and literature review)

ABSTRACT TEXT

Objective: Malignant mesenchymoma is a very rare neoplasm that is composed of two or more unrelated malignant mesenchymal components. There are roughly 20 cases of bone in the literature.
Methods: We report an extremely rare case of primary malignant mesenchymoma of bone consisting of rhabdomyosarcoma and osteosarcoma arising in the left iliac bone of the 18-year-old boy.
Results: Herein we present an exceedingly rare case of malignant mesenchymoma of bone in initial biopsy and review the literature
Conclusion: Malignant mesenchymoma should be kept in mind because of the rarity, different histogenesis of this tumor and uncertain management and prognosis.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Mokni, Moncef CHU Farhat Hached Dept. of Pathology Sousse Tunisia	Poster	Abdessayed, Nihed Abdessayed, Nihed Bel Haj Khlifa, Aya Zahmoul, Thouraya Baccouche, Atika Sriha, Badreddine
Abstract No. 002				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
An unusual splenic hemangioma

ABSTRACT TEXT

Objective: Hemangiomas are rare, although they are the most common tumor of the spleen seen especially in adults aged 30 to 50 years, most of them less than 2 cm and are discovered accidentally. It can be revealed by splenomegaly with hypersplenism. The littoral cell angioma is exceptional and develops from the vessels of the red pulp of the spleen.
Methods: A 48 years old female admitted with splenomegaly and hypersplenism. The patient underwent splenectomy with simple operative follow-up.
Results: The spleen weighs 1624 g and measures 22 x 18 x 9 cm. It is lobulated, with a frequently hemorrhagic appearance per spongy place. Microscopically, the lesion is poorly limited at the periphery, sometimes surrounded by a pseudo-capsule, corresponding to a vascular proliferation. The vessels are of irregular size and shape, dilated or reduced to simple capillary slits, arranged in an anastomotic network. The endothelial cells are non-atypical and form small papillary tufts in the lumens. The immunohistochemical study confirms the vascular nature of this proliferation, showing tumor cell positivity for CD31, CD34 and D2-40.
Conclusion: littoral cell angioma is a benign vascular tumor specific to the spleen that can occur at any age. The circumstances of discovery are essentially represented by isolated splenomegaly and / or the appearance of abdominal pain. The phenotype of these tumors is very particular associating a double vascular and histiocytic phenotype

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-14	Quality and accreditation in surgical pathology	Rashid, Sameera Hamad Medical Corporation Doha Qatar	Poster	Al-Bozom, Issam
Abstract No. 002				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Customer satisfaction in Histopathology: A quality control survey

ABSTRACT TEXT

Objective: Customer satisfaction surveys are a routine device used to assess performance in many industries. Surveys are also routinely used in hospitals to check physician and patient satisfaction. While External proficiency testing ascertains that the laboratory individuals and equipment are up-to-date and give accurate results, the data obtained through physician surveys helps design local guidelines and workflow best suited for that institute and its needs.
Methods: The survey questionnaire was made online with 15 questions in total and was electronically mailed to all Consultant and Specialist physicians in Hamad medical corporation. Around 3500 emails were sent out but only 105 surveys were filled in two months' time. The survey included questions pertaining to quality of histopathology services and information regarding the participant.
Results: The overall satisfaction was highest for Multidisciplinary presentations (96%) and lowest (77%) for timeliness of reporting. The overall satisfaction was above 90% for clarity and format, Diagnostic accuracy and pathologists' responsiveness to problems. Thirty six percent of the people rated MDT presentations as excellent while 46% of the people thought overall quality of professional interaction was good. The areas of improvement, as per this survey, was timeliness of reporting and notifications of significant abnormal results (overall satisfaction 79%). Majority of the people who took the survey (36%) were from internal medicine and half were members of multidisciplinary meetings (49%). The survey was aimed at senior doctors hence only consultants and specialists were requested. Seventy-one of percent of the participants were from Hamad general hospital, while rest were from the other hospitals under HMC.
Conclusion: Unlike biochemistry and microbiology laboratories, Histopathology lab staff maintains a close relationship with clinicians as reporting is not possible without adequate clinical information, orientation and radiological findings. Quality control surveys allow pathology staff target areas most in need of improvement and plan systems and measures that improve the clinician-pathologist relationship and maximize quality of histopathology services.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-09	History of pathology	Zubritsky, Alexander Moscow Russia	Poster	
Abstract No. 002				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Questionnaire portrait of the Russian pathologist-parasitologist, scientist, and educator Professor Nikolai Alexandrovich Zubov

ABSTRACT TEXT

Objective: This work has the aim to collect and systematize the biographical data on Professor Zubov according to the questionnaire prepared by me.
Methods: No
Results: Born on March 22, 1927 in the village «Kamenny» of Keushinsky Native Council. Graduated from secondary school and Omsk State Medical Institute (1951); cycle of improvement, Pathology Department under the leadership of NA Kraevsky with simultaneous listening to the course of lectures of famous parasitologist-clinician NN Plotnikov (1956), Central Institute for Advanced Medical Education, Moscow; full-time postgraduate study, Pathology Department, Omsk State Medical Institute (1958-61); defense of PhD thesis on theme "Pathomorphology and some issues of pathogenesis of primary liver cancer in human opisthorchiasis" (1963), doctor's thesis – "Pathological anatomy of opisthorchiasis and its complications" (1973). Head, Clinical and Morphological Laboratory, Tyumen Research Institute of Regional Pathology, Tyumen; Head (1968-90), Pathology Department, Sverdlovsk State Medical Institute. Chief Pathologist of the Sverdlovsk Regional Health Department (1968–90); Professor (1974); awarded with jubilee medals "To mark of the 100th birthday of Konstantin Skryabin", "For Merits in Science" and various diplomas. Scientific interests: Pathogenesis and pathological anatomy of parasitic diseases, features of frostbites in conditions of radiation sickness, epidemiology and morphogenesis of primary liver cancer in a large industrial zone, geographical pathology of malignant Tumors in the Eastern Transbaikalia, features of modern septic endocarditis. Author of more than 100 scientific works, including 2 monographs and 4 educational-methodical manuals. Member of the CPSU (1965), the Board of the All-Union Society of Pathology, Chairman of its Sverdlovsk branch; member of the editorial board of journal "Archive of Pathology. Motto: To burn always, to burn everywhere! Distinctive feature: Scientific erudition, benevolence, responsiveness, demanding to yourself and others. Hobbies: Travelling, fishing.
Conclusion: Died on May 11, 2008 in Tyumen on the 82th year of his life from coronary heart disease. Buried at the cemetery "Chervishevskoe-1" of Tyumen.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Abdul Aziz, Mardiana Universiti Teknologi MARA Faculty of Medicine Sg Buloh, Selangor Malaysia	Poster	Omar, Effat Abdul Rahman, Sabariah
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Intestinal infections identified on histological examination: Case series from a laboratory receiving samples from a hospital specializing in infectious diseases

ABSTRACT TEXT

Objective: Colorectal samples are one of the commonest specimens received in the anatomic pathology laboratory. The indications for sampling vary from benign inflammatory conditions to confirmation of suspected malignancies. In the setting of infection-related inflammation, most of the time the microorganisms are not visualized but occasionally they may be histologically identifiable.
The objectives of this study are to identify histologically demonstrable microorganisms in colorectal specimens (biopsies and resections) in our institution and to correlate with clinicopathological characteristics.
Methods: All colorectal biopsies and resections reported in our laboratory from January 2014 – March 2018 were included. All cases with histologically demonstrable microorganisms were selected. The histological findings were correlated with the clinical history available.
Results: A total of 1175 colorectal biopsies and resection specimens from 828 patients were included. Samples from 21 patients (2.5%) showed histologically identifiable microorganisms on histopathological examination (HPE). There was no specific site predilection. Majority of the patients was between 41-50 year-old (n=11, 52.4%); 16 were males (76.2%). History of immunosuppression was present in 13 cases (Retroviral disease (RVD) =12, immunosuppressive therapy=1). The infections identified were: Cytomegalovirus (CMV)=15, amoeba=2, Mycobacteria spp.=2, fungal=1, and spirochaete=1. The histological changes ranged from almost normal, to severe inflammation with ulceration. For the CMV-positive cases, viral inclusions were identified in all cases except one. Ancillary studies were employed in 18 cases (85.7%).
Conclusion: Cases with demonstrable microorganisms are uncommon. CMV is the most common identifiable infection by histopathological examination (HPE). History of immunosuppression should prompt careful evaluation and exclusion of opportunistic infections. As the degree of inflammation and HPE features varies, a high level of suspicion must be maintained at all times. Use of ancillary studies aid detection in challenging or unsuspected cases.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Abushahin, Nisreen University of Jordan Dept. of Pathology Amman Jordan	Poster	Almbaideen, Suzan Hassan, Huda Hamdan, Omar Altarawneh, Bushra
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Differential expression of androgen receptor in type I and type II endometrial carcinomas

ABSTRACT TEXT

Objective: Endometrial cancers (EC) are among the most common gynecological malignancies. Molecular studies established a dual model of putative EC types (type I and type II). Hormonal expression in EC had been extensively studied, however, literature about Androgen Receptor (AR) expression and impacts in EC are sparse.
Methods: AR expression by IHCs in 66 EC cases (51 type I-EC and 15 type II-EC) was tested. Histological typing was verified according to conventional diagnostic criteria. Only primary EC were included with no neo-adjuvant or hormonal therapy prior to primary surgery. Histologic score (HS) was calculated as: stain intensity (SI) x percentage of positive tumor cells (PP). SI was graded 0-3. PP was graded 0 to 4. Statistical analysis was performed and P<0.05 considered significant.
Results: Mean age= 60.3 years. Follow up periods ranged from 6 to 112 (average= 51.7 months). 11 patients had recurrent disease (secondary follow up ranging from 4 to 24 months). The final outcome was: AWD 7; AWND 38; DOD 3; DOC 1; and 3 lost to follow up.
AR positivity was present in 71.4% of type I-EC, and 36.3% of type II-EC (p=0.054). Mean AR. HS was 3.31 in type I- EC, and 0.36 in type II-EC (±SD 3.692; 0.505). AR positivity and AR.HS were higher in type I-EC (p=0.000), and with lower grade type I-EC (p=0.000). No significant correlation however was identified between AR positivity and AR.HS with tumor stage (p= 0.307; 0.098), recurrences (p= 0.182; 0.202) or final outcome (p=0.212; 0.081).

Conclusion: Results agree with those in recent literature that AR expression may be associated with better differentiated endometrial cancers and may be a potential therapeutic target in such cases.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-11	Molecular pathology	Aichele, Juliane K. Technical University Munich Munich Germany	Poster	Hart, Christian Fuezesi, Laszlo Dwornicza k, Bernd Dockhorn-Dwornicza k, Barbara
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Fast and easy liquid testing of cell-free tumor-DNA (ctDNA) in patients with colorectal cancer stage I to IV

ABSTRACT TEXT

Objective: In colorectal cancer (CRC) all-RAS and BRAF status is of predictive and prognostic relevance in disease management and the early knowledge may enable a more personalized treatment in particular with regard to targeted therapies. The current gold standard is the determination of RAS and BRAF status in surgical specimen. Liquid biopsy may become a powerful tool for innovative management of CRC patients providing minimal-invasive diagnostic procedures for the detection of molecular biomarkers.
Methods: 109 CRC patients (UICC stage I to IV) were included into the study. From all therapy-naive patients plasma samples for ctDNA analysis were stored at -80°C before processing. Mutation status was known from 76 (69%) patients by NGS sequence analysis of FFPE material. 35 patients harbor RAS or BRAF mutations (32%) in primary tumor material.
Fully automated liquid biopsy testing was performed by Idylla Biocartis System based on qualitative real-time PCR for expanded RAS and BRAF panel (21 mutations in KRAS, 18 mutations in NRAS and 5 mutations in BRAF) for all patients with known mutation and on 33 plasma samples of patients with unknown FFPE mutation status. NGS were performed in part to compare to Idylla retrieved results.
Results: Overall, samples from 32/35 patients with known RAS/BRAF status satisfied eligibility criteria. Results from Idylla RAS/BRAF testing showed a high degree of concordance with 14 in 17 plasma samples UICC stage III (80%) and IV (85%) with equivalent RAS/BRAF mutational status compared to FFPE. 11 plasma samples have been tested by NGS and were concordant. In 12 plasma samples from UICC stage IIIC and IV with unknown mutation status 6 (50%) show RAS/BRAF mutations analyzing ctDNA. In 18 plasma samples UICC stage IIA/B 4 (22%) liquids were identified positive for ctDNA. In 38 samples of UICCI one plasma sample was positive in ctDNA analysis.
Conclusion: Idylla real-time PCR assay for liquid biopsies is a sample-to-result real-time PCR analyzing expanded RAS and BRAF mutation panels and compares favorably with NGS based assays as well as with standard-of-care tissue based mutation testing. It is a new option in routine clinical practice to complement tumor tissue genotyping in personalized treatment strategies by using plasma samples as a diagnostic target.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Aldera, Alessandro University of Cape Town Dept. of Anatomical Pathology Cape Town South Africa	Poster	Skead, Garret
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Myxoinflammatory fibroblastic sarcoma showing progression to undifferentiated pleomorphic sarcoma: A morphologic review of 4 cases

ABSTRACT TEXT

Objective: Myxoinflammatory fibroblastic sarcoma (MIFS) is a low-grade neoplasm which typically involves acral sites and has a low metastatic potential. It is thought that progression to undifferentiated pleomorphic sarcoma (UPS) is an extremely rare event. Recently however, cases of MIFS with high-grade morphology and aggressive behaviour have been described.
Our primary objective is to evaluate the morphological features of a series of MIFS cases that demonstrated aggressive clinical behaviour and progression to UPS, and to ascertain whether there are histomorphological features that can predict likelihood of progression.
Methods: This is a retrospective observational study performed on archival material. We searched our electronic laboratory database and identified four cases of MIFS that were diagnosed at Groote Schuur Hospital between 2003 and 2014, and showed progression to UPS. The haematoxylin and eosin (H&E) stained slides were reviewed by light microscopy.
Results: The tumours of four patients were reviewed, occurring at acral sites (3) and distal thigh (1), all four of which recurred. The mean size of the tumours was 10.75cm (range 3 - 20cm). Three tumours showed multiple recurrences and required amputation. All four tumours initially showed predominantly unequivocal classic MIFS morphology. Variable proportions (mean 33%, range 10-50%) of high-grade spindle cell sarcoma were also identified on review of the initial excision specimens, with features of increased mitotic activity (median 4 per 10 high power fields), atypical mitoses, and abrupt transition to areas morphologically indistinguishable from UPS. The final excision specimens showed predominantly areas of UPS (mean 81.25%, range 80-98%) with focal areas of classic MIFS.
Conclusion: The results of this case series suggest that MIFS progression to UPS may be more common than previously thought, and we have documented the importance of recognising subtle features which may predict likelihood of recurrence and progression. Awareness of this phenomenon and accurate reporting may prompt more aggressive initial surgical treatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10	Immunohistochemistry	Al-Dughaishi, Malika Sultan Qaboos University Dept. of Pathologty Muscat Sultanat of Oman	Poster	Shalaby, Asem Adbel Moety, Shayma Al-Sinawi, Shadia
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Expression of programmed death ligand-1 in breast cancer with correlation to molecular subtypes

ABSTRACT TEXT

Objective: The aim of our study was to investigate the expression of PDL1 in women presenting to a tertiary center in Oman (Sultan Qaboos University Hospital) and to correlate it with the molecular subtypes, different clinicopathological parameters and clinical outcome. This is the first study performed in Oman about the role of PDL1 in breast carcinomas.
Methods: We studied the expression of PD-L1 in 55 breast carcinoma specimens using immunohistochemistry (IHC) on tissue microarray (TMA) with the use of commercial anti- PDL1 antibody. Chi-square and long-rank tests were used to determine the correlation of PD-L1 expression with the molecular subtypes, patients' parameters and clinical outcomes.
Results: Twenty-seven out of 55 cases (51.9%) showed membranous expression of PD-L1 ranging from mild (n=17) to moderate expression (n=10). PD-L1 was associated with positive family history (p= 0.023) and high cellular marker of proliferation Ki-67% (p= 0.04), but was not correlated with clinicopathological parameters, receptor status and molecular subtypes. PD-L1 was associated with better relapse-free survival (RFS) in overall population (p= 0.028) but was not correlated with overall survival (OS).
Conclusion: The high positivity rate of PD-L1 may support the use of immunotherapy in treatment of breast carcinomas. In addition, PD-L1 may be considered as a potential marker for prognosis. Further validation with a larger sample of population and use of different types of antibodies is warranted.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	Al-Hussaini, Maysa King Hussein Cancer Center Amman Jordan	Poster	Sultan, Hala Shebli, Yasmeen
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Amyloid Goiter, a diagnosis to consider with thyroid enlargment

ABSTRACT TEXT

Objective: Amyloid accumulation in the thyroid gland leading to a clinically detectable thyroid enlargement is a rarely described condition.
Methods: We report a case of a 53 year old female patient, who underwent thyroidectomy due to diffuse thyroid enlargement. Ultrasound showed a moderately diffusely enlarged thyroid gland. Thyroid function tests were suggestive of a mild hyperthyroidism.
Results: Gross examination of the thyroid revealed a diffusely enlarged gland. The right lobe measured 8X5X3.5 cm, the left lobe 4.5X3.5X2 cm and the isthmus 7X4X3.5cm. The cut surface showed smooth pale yellow cut surface with no nodules. Microscopy showed diffuse infiltration of the thyroid parenchyma by eosinophilic amorphous material, which stained intensely with Congo-red special stain and showed a strong apple-green birefringence under polarizing light, consistent with amyloid deposition. Associated extensive fat metaplasia was identified. The rest of the thyroid parenchyma showed atrophic follicles with flattened epithelium. Scattered inflammatory cells were seen in the interstitium. No evidence of medullary thyroid carcinoma was seen despite of extensive sampling. Further investigation revealed mild anaemia and borderline kidney function tests. Bone marrow was negative for multiple myeloma. No other associated systemic disease could be identified.
Conclusion: Amyloid infiltration into the thyroid gland is a rare cause of thyroid enlargement. Medullary carcinoma has to be ruled out. Systemic disease including multiple myeloma and systemic inflammatory disease like familial Mediterranean fever and inflammatory bowel disease are rarely associated with amyloid goiter, either isolated or in association with systemic deposition. In rare instances, no definite underlying cause can be identified.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Al-Obaidy, Khaleel Indiana University Dept. of Pathology Indianapolis USA	Poster	Grignon, David
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Amyloidosis of the urinary bladder: A case report

ABSTRACT TEXT

Objective: Amyloidosis is a heterogenous group of disorders caused by deposition of misfolded proteins as insoluble eosinophilic material in the extracellular tissues of the body, leading to impairment of organ function. The amyloid deposits can be systemic or localized. Localized amyloidosis accounts for 10-20% of cases. It can be seen in many organs including the genitourinary system, most commonly as an incidental finding in the seminal vesicles. Urinary bladder involvement by amyloidosis is rare and a few cases have been reported in the literature.
Methods: Herein, we describe a case of localized amyloidosis involving the urinary bladder.
Results: The patient is a 72-year-old female who presented to the urology clinic for evaluation of urinary irritation symptoms. A large bladder tumor was resected on cystoscopy and submitted to pathology. Microscopic examination revealed multiple fragments of bladder tissue lined by benign urothelium with underlying chronic inflammatory cells infiltrate. The lamina propria is markedly occupied by an abundant hyalinized, acellular extracellular material. A Congo red histochemical stain showed salmon-pink color on Congo red stain and apple-green birefringence on polarization.
Conclusion: The morphologic and histochemical features seen in this case are diagnostic of amyloidosis. Primary localized amyloidosis within the urinary bladder can cause a mass lesion and that may mimic neoplasia on cystoscopy. A higher level of awareness of this entity is required by pathologists and clinicians for accurate patient management.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13	Pathology of infectious diseases	Atanda, Akinfenwa Bayero University Dept. of Pathology Kano Nigeria	Poster	Haruna, Sanusi
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Is schistosoma hematobium rather an incidental finding in carcinoma of the bladder?

ABSTRACT TEXT

Objective: Several studies have suggested schistosomiasis is a risk factor for cancer and squamous carcinoma of the bladder. This study aims to test this hypothesis.
Methods: A 19-year (1999-2017) review of all cases of carcinoma of the bladder with or without schistosomiasis were reviewed.
Results: 364 cases of schistosoma hematobium-related lesions were diagnosed in the study period. Three (1%), 38 (10%), 55 (15%) and 268 (74%) were from the dermatological, genital, gastrointestinal and urinary systems respectively. Four (2%) of the urinary tract schistosomiasis cases were from the urethra, 36 (13%) from the ureter and 228 (85%) from the bladder. Though m:f ratio of bladder schistosomiasis was 20:1, no significant mean age difference (35.7 versus 36.5 years respectively) was found. Overall, carcinomas with schistosomiasis were seen in 32 cancers, 4 (13%) from the genital and 28 (87%) from the urinary tracts. Even though there were 59 carcinomas of the ureter and 4 from the urethra, schistosomiasis was not co-morbid with any of them. Mean age of all carcinomas of the bladder was 56±17 years and showed no statistically significant age difference between cases with or without schistosomiasis (p=0.2). Male: female ratio for carcinoma of the bladder was 8:1 with mean ages 56±15 and 54±16 years respectively. While 27 of 410 carcinomas were co-morbid with schistosomiasis among males, none of the 51carcinomas among females had schistosomiasis. Thus, there was no significant gender-related difference among the cases [p=0.06 (Fischer's); p=0.1 (Yate's corrected)]. Similarly, no statistically significant difference was found among 13 of 275 transitional, 14 of 166 squamous and 1 of 20 adenocarcinomatous cancers of the bladder showing co-morbidity with the parasite (p=0.3).
Conclusion: The data suggests schistosomiasis may rather be incidental in bladder cancer and that other more important factors may be responsible. However, further studies are required to clearly characterize these.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Ayadi, Rahma Charles Nicole Hospital Dept. of Pathology Tunis Tunisia	Poster	Gargouri, Feten Mansouri, Nada Msakni, Issam Laabidi, Besma Bouziani, Ammar Bougrine, Fathi
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Cytodiagnosis in lung pathology: Cyto-histological confrontation about 133 cases

ABSTRACT TEXT

Objective: Early diagnosis of lung cancer plays a pivotal role in reducing lung cancer death rate. Cytological techniques are safer, economical and provide quick results. Bronchoscopic washing, brushing and fine needle aspirations complete tissue biopsies in the diagnosis of lung cancer. The aim of our work was to evaluate the rate of diagnostic agreement between biopsy and bronchial cytology.
Methods: We carried out a retrospective study of 133 cytological specimens (any technique combined) coupled with biopsies over a study period of 1 year (2017), recorded in the department of pathology of the military hospital of Tunis. Sensitivity, specificity, positive and negative predictive value was done using standard formulas.
Results: The cytological and histological results were compatible in 88 cases (66.2%). There were 65 cases of benign lesions and 23 cases of malignant lesions. Bronchial cytology was more specific than sensitive in the detection of lung cancers (72% versus 53%). Positive and negative predictive values ranged from 48% to 76%. The proportion of false negatives was 47%. The false positive cytology could be explained by the small size of the biopsy specimen, which did not allow a suitable histological diagnosis. The concordance rate with the first control biopsy drops to 42% (13/31). The decrease in concordance is explained by the treatment received by the patient after biopsy.
Conclusion: The cytology is a highly sensitive and specific test for diagnosis of carcinoma lung. It can be used as a quick and reliable diagnostic method for diagnosis of lung malignancy. If the cytological and histological results are discordant, it is imperative to repeat these two examinations. Indeed, the concordance rate raises with the repetition of the biopsy games.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Bacha, Dhouha Tunisia	Poster	Bouhamed, Marwa Walha, Marwa Ben Slama, Sana Lahmar, Ahlem
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Non alcoholic fatty liver disease: Application of the different scores on a series of 53 hepatic biopsies

ABSTRACT TEXT

Objective: The aim of this study was to apply NAS score (NAFLD Activity Score), SAF score (Steatosis, Activity, Fibrosis) and FLIP algorithm in a series of hepatic biopsies, according to their etiologies.
Methods: It is a retrospective study of 53 hepatic biopsies with steatosis lesions. NAS, SAF scores and FLIP algorithm were performed.
Results: Steatosis had occurred in a viral context B or C in 11 cases including 6 patients with NAS <3 and absence of steatohepatitis (NASH) in the FLIP algorithm, S2A0F0 in 2 patients and S1A1F1 in 4 patients. For the 5 other patients, NAS score was equal to 4, S2A2F1 in 2 patients without the diagnostic of NASH in the FLIP algorithm and S3A1F2 in 3 patients with the diagnosis of NASH.
Steatosis had occurred in a metabolic context in 32 cases. NAS was <3 in 2 patients, S1A1F0 without the diagnostic of NASH. NAS was equal to 4 in 7 patients, S2A2F1 in 2 patients without the diagnostic of NASH in the FLIP algorithm, and S2A2F0 in the 5 others with the diagnosis of NASH. For the 23 other patients, NAS was >4, S3A2F1 in 8 patients, S2A3F1 in 11 patients and S3A3F2 in 4 patients. For these patients, the diagnosis of NASH was made in the FLIP algorithm.
Steatosis accompanied an autoimmune or drug induced hepatopathy in 10 patients. NAS was <3 in 8 patients, S1A1F0 and equal to 3 in 2 patients, S2A1F1. For these patients, the diagnosis of NASH wasn't performed in the FLIP algorithm.

Conclusion: The etiological evaluation of NAFLD reveals the predominance of metabolic causes. The NAS and SAF classifications are complementary. Both should be mentioned for the diagnosis of NAFLD. The FLIP algorithm was in concordance with the NAS score for the diagnosis of NASH, mainly in metabolic causes.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	Ben Jamaa, Nadia Tunisia	Poster	Mansouri, Safouane Cheour, Mariem Bouzguenda, Souhir Sahraoui, Mariem Ben Cheikh, Nahed Kacem, Samia Lahmar, Ahlem Masmoudi, Aida
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Congenital malformations at the neonatal resuscitation of the maternity and neonatology center of Tunis : A year summary

ABSTRACT TEXT

Objective: Identify the main congenital malformations registered at the CMNT in 2016 to create a preliminary draft of an institutional register of malformation, in anticipation of a regional one.

Methods: This is a retrospective descriptive study conducted at the department of neonatology at the CMNT. It's a summary of congenital malformations registered at the CMNT during the year 2016 (from January 1st, 2016 until December 31st, 2016).
Results: 175 new born children had congenital malformations. The malformations found were dominated by poly-malformations (22.29%), followed by chromosomal aberrations (21.14%), cardiovascular malformations (16.00%), and malformations of the nervous system (11.43%). The congenital malformations impacted 11.67‰ of births with 1.23 sex ratio. 53% of the parents were living in unfavourable socioeconomic conditions. The average paternal and maternal ages were respectively 38.70 and 32.20 years. Two thirds of the mothers were primiparous with one fifth of them having a history of miscarriage. The prenatal ultrasound was positive in two thirds of the cases. A quarter of the pregnancies were accompanied by dysgravidie mainly gestational diabetes. 57.71% of the new born children were at ended term, one sixth were from consanguineous parents, 87.42% of the pregnancies were well monitored and two thirds of them had a caesarean section. Half of the studied cases were normotrophic. Half of the cases passed away, with half of which survived only seven days after birth.
Conclusion: Congenital malformations are at the basis of morbidity and major mortalities. The early detection of pregnancies prone to develop these anomalies is executed by armed supervision. The best treatment for these malformations is prenatal diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Ben Romdhane, Neila Ines Tunis Tunisia	Poster	Blel, Ahlem Romdhane, Emna Ksentini, Meriem Gharbi, Sarra Ayadi, Rahma Aloui, Raoudha Znaidi, Nadia Ferah, Faten Rammeh, Soumaya
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Diagnostic value of fine-needle aspiration cytology in tuberculous cervical lymphadenitis

ABSTRACT TEXT

Objective: This study assesses the diagnostic contribution of fine-needle aspiration cytology (FNAC) in the diagnosis of tuberculous lymphadenitis (TL) in comparison with histology and bacteriology findings.
Methods: This is a descriptive and retrospective study of 937 FNAC specimens from 851 patients with cervical lymph nodes. The FNAC findings were compared to histopathology and bacteriology.
Results: Of the 937 aspirates, the cytopathological diagnoses consisted of 426 (55.9%) TL, 185 (24.3%) reactive lymphoid hyperplasia, 18 (2.3%) suppurative inflammation, 78 (10.2%) malignant metastatic tumor, and 54 (7%) lymphoma. Of the 426 TL cases, 171 were diagnosed by FNAC combined with bacteriological examination. In this group, 22 cases were found to be positive on Ziehl-Neelsen stain and 16 by culture. A histopathology report was available for 62 cases. Compared to histopathology, the overall diagnostic sensitivity, specificity, positive predictive value (PPV), and negative predictive value (NPV) of FNAC in the diagnosis of cervical TL were, respectively, 96.77, 100, 100, and 96.67%. When comparing bacteriology to histopathology, these values were 97.44, 100, 100, and 91.67%.
Conclusion: The present study showed that FNAC is a sensitive and specific tool for the diagnosis of cervical tuberculous lymphadenitis .
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Ben Khalifa, Sarah Fattouma Bourguiba Hospital Dept. of Pathology Monastir Tunisia	Poster	Bdioui, Ahlem Belhajkhalifa, Aya Mhiri, Marwa Yaakoub, Sarra Baccouche, Atika Bourigua, Ayda Mokni, Moncef
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Amelanotic melanoma arising in an area of SLURP-1 mutated Mal de Meleda: A case report

ABSTRACT TEXT

Objective: Mal de Meleda (MDM) is a rare inherited autosomal recessive genodermatosis characterized by palmoplantar keratoderma (PPK) caused by mutations in the SLURP-1 gene. Development of malignant melanoma (MM) in this disease is highly unusual, and only three previous cases have been published.
Methods: We report a new case of MM developing on a hyperkeratotic area on the ankle of a patient with MDM.
Results: An 78-year-old man presented to dermatology department with a tumoral lesion on his right ankle of 4 months' duration. He had a protracted history of PPK, with onset in early infancy. Homozygous SLURP-1 mutations (c.82delT) was revealed on sequence analysis. Physical examination revealed extensive palmoplantar hyperkeratosis covered with scales around the hyperkeratotic area, and a skin-colored macule, 1 cm in size, with a central ulcer on the patient's right ankle. Enlarged inguinal lymph nodes were detected.
Complete removal of the tumoral lesion was performed, and histopathological examination showed a dermal proliferation of large atypical melanocytes, with extensive epidermal ulceration. The preserved epidermis was hyperplastic with marked hyperkeratosis. Mitotic count was 3 mitoses/ mm2 and Breslow index (BI) was 9 mm. Immunohistochemical stains for SP100 , Melan-A and HMB-45 confirmed the diagnosis.
Conclusion: We report an additional case of MM arising in a patient with MDM. Whether this association is casual or related to a higher risk of developing skin malignancies is not clear, and further investigation is necessary.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-22	Ocular pathology	El-Daba, Somaia Ahmed Ain Shams University Dept. of Pathology Cairo Egypt	Poster	Reda, Ahmed Shaaban, Yasmine
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Using Immunofluorescence To Investigate An Associated Specific Humoral Immune Response Role in Climatic Droplet Keratopathy

ABSTRACT TEXT

Objective: Background: Climatic droplet keratopathy (CDK) is a degenerative corneal disease of unknown etiology characterized by spheroidal deposits starting at the peripheral cornea, suggested to be UV-degraded protein materials escape from limbal vessels with some of its components had been identified, but the exact composition still remains unknown. Aim: Find out if there is any associated specific immune role (immune complexes) in climatic droplet Keratopathy (CDK) through immune fluorescent study that can provide a new therapeutic strategy in the prevention as well as progression of the condition
Methods: A total of 22 case of Climatic Droplet Keratopathy (CDK) who underwent keratectomy or scraping were incorporated in this study.Twenty of them were subjected to immunofluorescent study using IgG, IgA, IgM and Complement 3 and the remaining 2 cases were subjected to electron microscopic study.
Results: Although, the electron microscopic study showed extracellular electron dense like globules in the superficial corneal stroma just benetah the epithelium that may simulate the immune complex humps of immun-mediated glomerulonephritis, the immunofluorescent examination for all studied cases revealed total negative stain for all studied markers (IgG, IgM, IgA and C3).
Conclusion: This work suggests the absence of specific immune response in climatic droplet eratopathy.
Policy of full disclosure: I apply for bursary

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-20	Mediastinum and thymic pathology	Ezenkwa, Uchenna University College Hospital Dept. of Pathology Ibadan Nigeria	Poster	Salami, Ayodeji Adeoye, Adewunmi Ogunbiyi, Olufemi
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Postmortem heart weights of apparently healthy adult Nigerian decedents

ABSTRACT TEXT

Objective: Organ weights at postmortem examination of deceased Nigerians are compared with that of Caucasians to determine pathologies and cause of death. Indigenous data is needed because of the differences in race and lifestyle.
Methods: This is a ten-year cross-sectional retrospective study. Postmortem findings and summarized clinical notes of deceased Nigerians archived in the Department of Pathology, University College Hospital Ibadan, from January 1, 2008 to December 31 2017 were reviewed. Inclusion criteria were age ≥18≤70 years, traumatic or sudden unexpected death with no pathology in the heart, and no history or postmortem features of hypertension. Data on Age, gender, cause of death, body length and heart weights were retrieved. Descriptive statistics, student t-test and regression analysis was done using SPSS 20. Confidence limit was set at $p < 0.05$.
Results: Seventy-nine cases fulfilled all the criteria comprising of 60 males and 19 females with mean age of 39.1±14years and 37.4±11.1years respectively. The mean heart weights for males and females differed significantly with a mean of 309.8±40g (220-405g) and 260.5±36g (200-325g) respectively ($p<0.000$). The mean body length for males and females also differed significantly with mean of 1.7±0.1m and 1.6±0.1m respectively ($p<0.000$). However, there was non-significant difference in age between males and females ($p>0.05$). Multiple regression analysis suggests that only gender is a likely predictor of heart weight ($p<0.001$).
Conclusion: Heart weights of adult Nigerians are similar to those of Caucasians. A multicenter study is needed to establish a national normogram.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-05	Education in pathology	Fiacre, Byiringiro Mugabe University of Rwanda Dept. of Anatonical Pathology Kigali Rwanda	Poster	
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Bilateral hip tumoral calcinosis in an elderly woman: A case report

ABSTRACT TEXT

Objective: Tumoral calcinosis (TC) is a very rare form of ectopic calcium deposits that form large cystic or rubbery masses characterized mainly around large joints. Age at diagnosis varies from 15 to 70 years (mean 34 years); there is no sex predilection. Two main types are primary TC which is an autosomal recessive disorder and secondary TC which is commonly associated with renal failure. Clinical and imaging findings usually mimic a malignant process. It is important to arouse the awareness of the medical team about TC and the pivotal role of histopathology in final diagnosis. We report a unique case TC in an elderly woman.
Methods: A 64-year female patient presented with a 20-year history of bilateral hip joint masses. She was at last referred to a teaching hospital in Rwanda for work-up and management. She had no history of renal failure. Clinical examination showed large irregular bilateral hip joint masses. Laboratory investigations were uneventful. Imaging showed bilateral hip joint calcified masses. Biopsy was performed, specimen sent for histopathology.
Results: Gross examination showed a tan-whitish fragment of tissue of 4x3x1cm, with solid and cystic areas on cut section. Microscopy showed heterogeneous lesions consisting of large cystic cavities without lining epithelium, filled with calcium deposits. The intervening stroma was fibrotic and mixed with calcifications. The findings were consistent with TC. Complete surgical removal of the masses was done; the outcome was good, with no recurrence at 2-year follow-up.
Conclusion: TC is a rare disease, but an important differential diagnosis to malignant tumors in large joints. A multidisciplinary approach is paramount in reaching adequate diagnosis and thus appropriate management, as it was our experience with this first TC case reported in Rwanda.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-12	Nephropathology	Gupta, Pallavi Sir Ganga Ram Hospital Dept. of Pathology New Delhi India	Poster	
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Histopathological and clinical features of renal involvement in plasma cell neoplasms: 5 year experience from a tertiary care centre

ABSTRACT TEXT

Objective: To determine spectrum of histopathological changes and clinical features of renal involvement in patients with plasma cell neoplasms.
Methods: A 5 years retrospective study was conducted in department of pathology from January 2013 to December 2018. Out of 2250 kidney biopsies 24 patients with renal manifestations of plasma cell neoplasms were identified from records. Histopathology slides stained with H & E stain, PAS stain and congored stainswere reviewed for these patients and clinical data was obtained from electronic records. Electrophoresis findings, biochemical findings, light chain assay and Immunofluorescence findings were also recorded from pathology data base.
Results: Renal pathologic spectrum comprised of light chain cast nephropathy in 15 cases, 11 of which were accompanied by interstitial nephritis and 4 cases also had tubulopathic changes in renal tubules. Many of the cases also showed foreign body giant cell reaction around the casts. Of these 12 cases presented with acute renal failure and 3 cases presented with rapidly progressive renal failure(RPRF). Mean age of patients was 59 ±2 years and majority were males. The men serum creatinine at presentation for these patients was 5.54±0.67 mg/dl and spot P/C (protein to creatinine ratio ranged from 0.7 to 11.1. Only 3 of these cases had a known history of multiple myeloma and remaining cases were first picked up on renal biopsy and immunofluorescence studies with further confirmation by bone marrow and serum/immunofixation electrophoresis. 11 cases showed Lambda light chin restriction and 4 cases showed Kappa restriction.There were 8 cases of primary amyloidosis which presented with pedal oedema and nephrotic range proteinuria. Many of these patients had frothy urine and 1 patient also had back ache at presentation. 2 patients had history of diabetes. Mean age of these patients was 51.3±6.1 years and mean spot P/C ratio was 14±2.5. Serum creatinine at presentation ranged from 1-2.7 mg/dl. None of the patients were known cases of myeloma and diagnosis was established based on renal biopsy and immunofluorescence studies. Further confirmation was done by bone marrow examination and electrophoresis studies. 7 of these cases showed Lambda light chin restriction and 1 case showed Kappa restriction. There was a single case of Monoclonal immunoglobulin deposition disease (MIDD) who presented with pedal oedema and acute renal failure. On investigation was found to have nephrotic range proteinuria spot P/C ratio 8.5 and serum creatinine of 6.5 mg/dl. Renal biopsy and electron microscopy confirmed a diagnosis of MIDD. Later immunofixation electrophoresis confirmed IgG-Kappa phenotype.
Conclusion: Renal involvement is common in patients with plasma cell neoplasm. Majority of patients are males and above the age of 50 years. Renal biopsy plays an important role and often provides the first clue in diagnosis of myeloma as was seen in our study. Patients with light chain cast nephropathy presented with acute renal failure/ RPRFand is often accompanied by interstitial nephritis with majority showing Lambda light chain restriction. Primary amyloidosis cases have nephrotic presentation with predominant lambda light chain restriction on renal biopsy. MIDD is also an important pathological manifestation of myeloma with usually Kappa light chain restriction.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Gupta, Kirti PGIMER Dept. of Histopathology Chandigarh India	Poster	Jogunoori, Swathi Radotra, Bishan Kumar, Narendra Kumar, Rakesh
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Molecular subclassification of medulloblastoma and its correlation with histological variants

ABSTRACT TEXT

Objective: The WHO classification of CNS neoplasms (2016 update) recognizes four histological variants and genetically defined molecular subgroups within medulloblastoma (MB), Recently, three immunohistochemical markers have been established as surrogate markers to identify the four genetic subgroups. We aimed to stratify MB cases into molecular subgroups using three immunohistochemical markers conventionally accepted for molecular stratification. Demographic profiles, imaging details and survival outcome was compared within these molecular subgroups and histological variants.
Methods: Our cohort included sixty-five MB cases diagnosed over last 8 years. A detailed histological analysis was performed to identify the histological variants which were stratified into molecular subgroups using YAP1, GAB1, and β-catenin. Further, TP53 mutation was assessed using immunohistochemistry in WNT and SHH subgroups. The clinical details and survival outcome was retrieved from radiotherapy records.
Results: The age ranged from 2-40 years with M:F ratio of 1:1.3. Among the histological variants, classic was seen in majority (36.9%) followed by classic-biphasic and nodular desmoplastic (N/D). Large cell anaplastic (LCA) and MB with myogenic/melanotic differentiation constituted 10.7% and 7.6%, respectively. TP53 mutation was detected in two cases (3.07%) of SHH subgroup (n=20), and a single case (1.5%) amongst WNT subgroup. Group 3/Group 4 (G3/G4) accounted for majority of tumors (50.7%), followed by SHH (30.7%), WNT (10.7%) and MB with myogenic/melanotic differentiation (7.6%). Best outcome was observed for WNT, followed by G3/G4 and SHH subgroups on Kaplan-Meier curve. Tumors harboring TP53 mutation were very less to draw statistical conclusions; however a trend towards poor outcome was observed.
Conclusion: The panel of three antibodies could reliably stratify MB cases into its molecular subgroups and our study proves the efficacy of incorporating this cost-effective, minimal panel into routine practice. Further stratifying the tumors on basis of c-myc amplification could probably resolve the survival differences we observed across the three molecular subgroups.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Luma-Ad, Maria Aurora Tagbilaran City Philippines	Poster	Almocera, Emelisa
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Kimura disease, a rare benign entity of a 14 year-old Filipino male: A case report and review of literature

ABSTRACT TEXT

Objective: To present a case of Kimura disease (KD) of a 14 year-old male presenting with multiple suboccipital subcutaneous masses with review of literature. It is one of the rare forms of benign chronic inflammatory disorder that involves subcutaneous tissue in the head and neck region and still with unknown etiology. KD is reported especially rare in the Philippines, though over 200 cases are reported globally.
Methods: A case report of KD in Governor Celestino Gallares Memorial Hospital, a tertiary teaching training hospital.
Results: FNAB shows Suspicious for a Lymphoproliferative Lesion. Subsequent biopsy reveals hyperplastic lymphoid follicles with focally enlarged germinal centers, vascular proliferation, significant eosinophils in between follicles and eosinophilic abscess. Pertinent lab findings evidently demonstrate peripheral eosinophilia and strikingly high serum IgE. The histopathologic results concluded to Kimura Disease and prompted oral prednisone treatment.
Conclusion: KD must be included as one of the differentials. Though it has distinctive histologic features, additional lab tests are vital to discriminate with other benign or reactive inflammatory disorders.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Mokni, Moncef CHU Farhat Hached Dept. of Pathology Sousse Tunisia	Poster	Abdessayed, Nihed Abdessayed, Nihed Bel Haj Khlifa, Aya Baccouche, Atika Bourigua, Aida Yacoub, Sara Zahmoul, Thouraya Sriha, Badreddine
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
An unusual finding in systematic placental histologic examination

ABSTRACT TEXT

Objective: The histologic examination of placental tissu has been systematic since a while. It is mostly important when fetal or mother diseases are discovred during pregnancy and may give rise to a premature birth.
Methods: Here in we report the case of a 34 years old female without a past medical history admitted in obstetrical emergency for bleeding and severe anemia in 28 weeks of pregnancy. Biological analysis revealed a severe anemia and thrombopenia with precense of blasts. The decision was to make an early delivery of the child and to adress a patient to hematology department since the diagnosis of acute lymphoblastic leukemia (ALL).
Results: Microscopic examination of the placenta demonstrated the presence of leukemic blasts in the maternal placental circulation, without invasion of chorionic villi.The patient underwent a systemic chemotherapy with a good reposnse. Clinical course dosen't show evidence of reccurence.
Conclusion: A diagnosis of acute leukemia in pregnancy is a rarity, illustrated by a recent case series describing 23 patients between 1962 and 2016 in the Mayo Clinic. In this case, the placenta served as a barrier against maternal leukemia transfer, but in the very rare event that the placental barrier fails.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-14	Quality and accreditation in surgical pathology	Rehman, Fakeha King Edward Medical University Dept. of Pathology Lahore Pakistan	Poster	Haider, Muhammad Saqlain Bajwa, Rakhshindah Anwar, Muhammad Raheel Sarwar, Muhammad Zeeshan Numeri, Fatima Rashid, Zayed
Abstract No. 003				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Root cause analysis of pre-microscopic errors in anatomical pathology using eindhoven classification

ABSTRACT TEXT

Objective: To evaluate pre-microscopic errors, a study was conducted in anatomical pathology laboratory of King Edward Medical University, Lahore, Pakistan
Methods: Error rate was analyzed in all the pre-microscopic processes including requisition, grossing, fixation, processing, embedding, microtomy, staining and cover slipping. Defects per million opportunities were calculated to determine sigma metric value in every step from requisition to slide preparation. Root cause analysis was done using Eindhoven classification model of errors.
Results: A total of 2420 samples were collected and analyzed in this study. Initially error frequencies and percentages in each step from receiving of specimen and generation of code to slide preparation were calculated. Errors were reported in all stages of the surgical specimen handling process, with the most common errors reported in grossing, floatation of tissue sections and routine Hematoxylin and eosin staining. By using six sigma metrics reference table we calculated the defects per million opportunities and sigma metrics for errors that occur at every step of specimen processing in anatomical pathology. Root cause analysis was done using Eindhoven classification model. All the errors; and especially those errors with high frequency of detection were subjected to root cause analysis. This analysis revealed that contributing factors in major were due to lack of organization, inappropriate process flow and poor knowledge and unawareness of facts regarding patient safety. Technical failures were mainly due to either lack of appropriate materials, equipment and software. Organizational failures occurred because of absence of protocols and procedures, and also accommodating persons with unprofessional behavior.
Conclusion: Errors were found almost at every step of sample processing. Development of standard procedures and protocols with training of the staff to have an effective implementation of these protocols will help in controlling the errors. However, efforts are needed both on organizational and individual level to promote a patient safety culture.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Abolhasani, Maryam Iran University of Oncopathology Research Center Medical Science Tehran Islamic Republic of Iran	Poster	Sadeghi, Asieh Asgari, Mojgan Mehrazma, Mitra Madjd, Zahra Zare Mirzaie, Ali
Abstract No. 004				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Using CD 24 and CD 44 stem cell markers as prognostic factors of colorectal cancers

ABSTRACT TEXT

Objective: We aimed to evaluate cancer stem cell markers CD 24 and CD 44 in colorectal cancers in association to tumor characteristics and clinical data.
Methods: The immunohistochemical staining for CD 24 and CD 44 was performed on tissue microarray paraffin embedded blocks of colorectal cancers by envision method. We used the H-score system for immunostainings which calculates the score by multiplying the intensity of staining (0, 1, 2, 3) by percent of cells stained (0-100). Then the results were categorized into three groups: H-score <100, 100-200 and >200. The collected data was analyzed by SPSS software.
Results: A total of 410 colorectal cancer specimens were suitable for scoring for CD 24. H-score of 200 (48.8%) specimens were below 100, 124 (30.2%) between 100 and 200 and 86 (21%) more than 200. There were statistically significant associations between H-score of CD 24 staining and metastasis (p value: 0.048), lymphovascular invasion (p value: 0.003), perineural invasion (p value: 0.003) and age (p value: 0.045). There was also statistically significant association between intensity of CD 24 staining and size of tumor (p value: 0.001). A total of 393 colorectal cancer specimens were suitable for scoring for CD 44. H-score of 289 (73.5%) specimens were below 100, 82 (20.9%) between 100 and 200 and 22 (5.6%) more than 200. There were no significantly statistically associations between H-score of CD 44 staining and age, sex, grade, stage, size, metastasis, lymphovascular and perineural invasions of colorectal cancers. We further categorized the patients into 2 groups: patients below 60 years old and patients with 60 years old or more. There was statistically significant result between CD 44 H-score and metastasis in patients below 60 years old (p value: 0.003).
Conclusion: CD 24 and CD 44 can be used as prognostic markers for colorectal cancer.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Adouni, Olfa Salah Azaiez Institute Tunis Tunisia	Poster	Bouhajja, Leila Zawati, Imen Goucha, Aida Bettaeib, Ilhem El Mokh, Haithem Boubaker, Samir Gamoudi, Amor
Abstract No. 004				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Clinico-pathological features of primary thyroid lymphoma: A report of four cases

ABSTRACT TEXT

Objective: The aim of this study was to describe the ethiopathogenic, anatomo-clinical and evolutive characteristics of primary thyroid lymphoma (PTL).
Methods: This was a retrospective study of four cases of PTL over a period of 10 years from 2005 to 2015 collected in the department of pathology of Salah Azaiez institute.
Results: There were 2 men and 2 women with a median age of 76,5 years. They presented with an anterior basi-cervical swelling that increased rapidly in volume associated with compressive signs, Clinically, it was a goiter in 3 cases and a voluminous and unique nodule in 1 case. Cervical and jugulo-carotid lymphadenopathy were present in 3 cases. Clinical and biological hypothyroidism was present in 1 case. Recurrent paralysis was present in 2 cases. The cervical ultrasound performed in 3 cases showed a suspect voluminous nodule in one case, a suspect multinodular goiter of the thyroid in one case and a diffuse increase of thyroid lobe in the last case. The cervical scintigraphy, performed in two cases, showed one or more cold nodules. The cervical CT performed in one case showed a hypodense and multinodular thyroid. Perithyroid extension was present in 3 cases. Treatment was surgical in the 4 cases, followed by chemotherapy in one case and radiotherapy in one case. The histological examination coupled with immunohistochemical study conclude to diffuse large B cells lymphoma (DLBCL) CD20+ in four cases. In one case, this DLBCL was developed on chronic lymphocytic thyroiditis (CLT) lesions and on MALT lymphoma in another case.
Conclusion: PTL is a rare tumor, which develops most often on a preexisting CLT. The diagnosis is histological, and the treatment is based on chemotherapy and radiotherapy more rarely surgery.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Ali, Ali Baylor College of Medicine Houston USA	Poster	Lazar, Alexander J. Wang, Wei-Lien
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Loss of H3K27me3 expression in Chordoma

ABSTRACT TEXT

Objective: Background:
Chordomas are a rare and aggressive bone tumors of notochord origin which affect axial skeletal bones, predominantly the sacrum and base of skull. Aside for alterations involving brachyury, these tumors have relatively quiescent genomes leading some to suggest that epigenetic mechanisms may be involved. One epigenetic mechanism that has recently been explored in sarcomas is loss of H3K27 trimethylation. Loss, as demonstrated by immunohistochemistry, is an important mechanism for tumor growth/survival in malignant peripheral nerve sheath tumors (MPNSTs). These tumors harbor mutations in genes involved in the polycomb receptor complex 2 which regulates histone methylation. Recently, other studies have reported occasional loss in other spindle cell soft tissue tumors. The role of H3K27me3 expression has not been extensively studied in bone tumors like chordomas.
Methods: Methods:
Tissue microarray from one hundred eleven formalin-fixed paraffin embedded decalcified chordoma specimens were prepared from 93 patients (including 78 primary, 27 recurrent and 8 metastatic tumors). Anti-H3K27me3 (Cell Signaling, clone C36B11, 1:200) immunohistochemistry was performed by autostainer. Both extent and intensity of labeling were recorded. Loss of expression was defined as <10% of tumoral cells labeling with positive internal control (lymphocytes, stromal or endothelial cells). Tumors which lack positive internal control were not included.
Results: Results:
92 cores were analyzable (54 primaries; 34 recurrent; 4 metastases). Loss of H3K27me3 was seen in 19/92 (21%) cases (16/54, 29.6% primaries; 3/34, 0.08% recurrent and 0/4, 0% metastases). Several samples exhibited heterogeneous loss of H3K27me3.
Conclusion: Conclusion: Chordomas can lose H3K27Me3 occasionally and suggests that a subset of the tumors can also have dysregulation of polycomb repressor complex 2. Additional analysis to explore its prognostic significance is underway. The biological underpinnings of this loss also warrants further investigation.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Al Ajmi, Radiya Sultan Qaboos University Pathology Muscat Sultanat of Oman	Poster	Al Kalbani, Moza Al Sukaiti, Rashid
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Mucinous adenocarcinoma and carcinoid tumor arising within an ovarian mature cystic teratoma, a rare case report

ABSTRACT TEXT

Objective: Mature cystic teratoma (MCT) is the most common germ cell tumor of the ovary. Malignant transformation of a MCT is an uncommon complication, occurring in approximately 1-3% of all MCTs. A mucinous adenocarcinoma or carcinoid tumor arising within a MCT is uncommon and the combination of both as synchronous malignancies in a single MCT is even rarer.
Methods: An 18-year-old Omani lady was found to have a left ovarian cyst. MRI showed a large complex cyst arising from the left ovary. The patient underwent laparotomy with left salpingo-oophorectomy, omentectomy and peritoneal washings.
Results: Gross examination of the specimen showed a cyst measuring 13cm in maximum dimension with an intact capsule. It was filled with yellow fluid admixed with cheesy material. The inner surface was smooth with a few solid areas, the largest measured 4cm.Microscopy showed an ovarian cyst with the typical morphology of MCT. The solid areas revealed an architecturally complex but morphologically bland mucinous proliferation with occasional goblet cells. Given the architectural complexity, this was regarded as a grade I mucinous adenocarcinoma arising within a teratoma. A focus of carcinoid tumor, measuring 9mm in maximum dimension, was also noted.
Conclusion: Clinically, MCT with malignant transformation cannot be readily differentiated from benign MCT or other ovarian tumors. Preoperative diagnosis of malignant tumors arising in MCT is very difficult and definitive diagnosis in such cases is most often rendered postoperatively. 2 to 11% of mature cystic teratomas have been found to be associated with mucinous tumors. Carcinoid tumor arising within MCT is rare, accounting for less than 5%. Therefore coexistence of both mucinous adenocarcinoma and carcinoid tumor within an ovarian MCT is an extremely rare phenomenon, especially in young woman. The case was discussed in the hospital tumor board, decision was treatment is complete and follow up was recommended.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Al-Obaidy, Khaleel Indiana University Dept. of Pathology Indianapolis USA	Poster	Idrees, Muhammad
Abstract No. 004				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Symplastic leiomyoma of scrotum: A case report

ABSTRACT TEXT

Objective: Smooth muscle tumors of the scrotum are very rare and accounted for 2% of the paratesticular soft tissue neoplasms (0.06% of orchiectomies) diagnosed at our institution. Most of the time, the diagnosis is clear as either leiomyoma or leiomyosarcoma; however, challenge arises when leiomyoma with atypical features are encountered. In the scrotum, these cases are extremely rare with only few cases reported in the literature.
Methods: Herein, we describe a case of symplastic leiomyoma of scrotum.
Results: The patient is a 72-year-old male who presented to the urology clinic for evaluation of hydrocele and subcutaneous nodule within the midline ventral scrotum that was present for few years. Grossly, the nodule measured 2 cm with spherical white, whirly cut-sections. Microscopic evaluation displayed a well-demarcated nodule composed of intersecting bundles of spindle cells. The cells exhibited elongated nuclei with blunt ends and well-defined cytoplasmic borders. Foci of tumor cells displayed marked atypia with irregular, bizarre and giant nuclei, multinucleation, nuclear and cytoplasmic inclusions and nuclear hyperchromasia; however, mitotic figures or necrosis were not identified.
Conclusion: The histologic features are those of symplastic leiomyoma. The foci with atypical changes are considered degenerative in nature. Due to rarity of this entity, especially in this location, awareness is required by pathologists and clinicians for accurate patient management.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Atiq, Aribah Shaukat Khanam Cancer Hospital Dept. of Histopathology Lahore Pakistan	Poster	Hassan, Usman Loya, Asif Akhtar, Noreen
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Utility of p63 and p40 in distinguishing in distinguishing polymorphous adenocarcinoma and adenoid cystic carcinoma

ABSTRACT TEXT

Objective: Adenoid cystic carcinoma and polymorphous adenocarcinoma are primarily the tumors of minor salivary glands. Both tumors show morphological similarities. However, both show considerable difference in treatment and prognosis, which raises the need to distinguish these two entities. In this study, we discuss the utility of two immunohistochemical stains, p63 and p40, in different possible combinations for diagnosis of adenoid cystic carcinoma and Polymorphous adenocarcinoma.
Methods: Immunohistochemical stains, p63 and p40, were performed on 47 cases of adenoid cystic carcinoma and 23 cases of polymorphous adenocarcinoma.
Results: 36 out of 47 cases of adenoid cystic carcinoma displayed p63+ve/p40+ve profile, however 22 out of 23 cases of polymorphous adenocarcinoma displayed p63+ve/p40-ve profile. Only one case of adenoid cystic carcinoma showed p63-ve/p40+ve profile. p63-ve/p40-ve profile is seen in 10 cases of adenoid cystic carcinoma.
Conclusion: On combining all possible immunoprofile combinations, p63+ve/p40+ve profile appears to be most sensitive profile for adenoid cystic carcinoma and p63+ve/p40-ve profile is the most sensitive profile for polycystic adenocarcinoma
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10	Immunohistochemistry	Ayadi, Rahma Charles Nicole Hospital Dept. of Pathology Tunis Tunisia	Poster	Blel, Ahlem Arfaoui, Amira Ksentini, Mariem Aloui, Raoudha Gharbi, Sarra Ben Romdhane, Neila Ines Znaidi, Nadia Rammeh, Soumaya
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
EGFR mutation status in Tunisian patients with pulmonary adenocarcinoma case report

ABSTRACT TEXT

Objective: Evaluate mutation status of EGFR in Tunisian patients with pulmonary adenocarcinoma.
Methods: Mutational analysis of pulmonary adenocarcinoma concerned exons 18–21 of EGFR by real-time polymerase chain reaction (Real time-PCR) using the Therascreen EGFR RGQ PCR mutation kit.
Results: A series of 26 formalin fixed and paraffin embedded (FFPE) archived tissues were obtained from Tunisian patients with pulmonary adenocarcinoma at Department of Pathology in Charles Nicolle Hospital of Tunisia. The samples corresponded to 17 biopsies and 9 lung resection specimens. The population consisted of 3 females (12%) and 23 males (88%). The average age was 58 years. Smoking status was provided for 15 patients. All cases were classified as: 7 solid, 6 lepidic, 4 acinar, 2 colloid, 1 papillary, and 3 invasive mucinous adenocarcinomas. In three cases, the histological suptype was not available. Activating EGFR mutations were found in 3 men (11.5%). One patient had exon 20 insertion, the second had G719X (A/S/C) point mutations in exon 18, and the third had a deletion in exon 19.
Conclusion: Our data Were consistent with most European findings with a particularity: the mutations detected were uncommon.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Bakhiet, Salih Peterborough City Hospital Cellular Dept. of Cellular Pathology Leeds United Kingdom	Poster	Sheahan, Kieran
Abstract No. 003				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Myocardial bridging as a cause of death in a young athlete (A case report)The bridge is no longer protective

ABSTRACT TEXT

Objective: Myocardial bridging is defined as a congenital coronary anomaly characterized by a portion of coronary artery undertaking a "tunnelled" intramural course underneath a "bridge" of overlying cardiac muscle. The calibre of this tunnelled coronary vessel gets narrowed by the squeezing effect of the cardiac muscle compression in systole, resulting in a haemodynamic discrepancy knows as 'milking effect'. Historically, myocardial bridgings have been reported as asymptomatic condition and mostly observed at post-mortems. Recently, several studies have reported serious clinical complications including: myocardial ischemia, ventricular septal rupture, acute coronary syndrome, arrhythmias, and sudden cardiac death.
Methods: A 24 year-old-athlete has suffered breathing difficulties when he awoke early morning. He was brought by ambulance to the emergency department at St. Vincent's University Hospital where he was pronounced dead on arrival. He had no significant previous illness and no medication history of note. His social history indicates that he was a popular athlete and there was no suspicion of illicit drug use.
On hospital post-mortem examination, the body appeared to be of well-built muscular young man. Cardiac examination revealed no significant cardiomegaly or myocardial hypertrophy. Myocardial bridging on the Left Anterior Descending coronary artery (LAD) was observed with 6mm intramural depth and of 30mm intramural course. The possibility of hypertrophic obstructive cardiomyopathy (HOCM) has been excluded as both the interventricular wall and the wall of the left ventricle were approximately 16mm each. Remarkably, the histology examination revealed mild to severe atherosclerosis involving all the coronary vessels including the bridged one. Histologic evidence of early acute myocardial infarction (contract bands) was also identified. The toxicology report was negative.
Conclusion: Myocardial bridging may cause acute myocardial infarction; therefore, it should be evaluated as a cause of sudden death in young athletes. This case has demonstrated, for the first time that the tunnelled segment of the bridged coronary vessel may not have protective effect against atherosclerosis contradicting well documented studies in published medical literature.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Bal, Amanjit PGIMER Histopathology Chandigarh India	Poster	Poddar, Rupika Das, Ashim Singh, Gurpreet
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
DNA repair proteins as predictors of pathological response to neoadjuvant chemotherapy (NACT) in locally advanced breast cancer

ABSTRACT TEXT

Objective: Locally advanced breast cancer(LABC) is treated with preoperative chemotherapy that aims at shrinking the breast tumour followed by surgery. Existing variables like tumour size, grade, lymph node status, and molecular phenotype etc. are unable to successfully predict response to NACT. This study aims to determine the pathological changes following NACT and to evaluate the role of DNA repair proteins in predicting the pathological response to NACT.
Methods: Cases of LABC, diagnosed on core needle biopsy, having received 8 cycles of anthracycline and taxane based chemotherapy followed by lumpectomy/mastectomy were included (n=120). The Residual cancer burden was calculated using MD Anderson online protocol. DNA repair proteins(P53, BRCA1 and TOPO2A) was assessed using immunohistochemistry. High resolution melt (HRM) analysis was used to screen hot spot P53 mutations(Exon 5,6 and 7).
Results: The complete pathological response was seen in 23.3% cases, and residual tumour was seen in 76.7 % of which 7.8% cases belonged to RCB-Class I, 35.8% to RCB Class II and 37.5% cases to RCB class III. Molecular phenotype did not show significant association with NACT response. Loss of BRCA 1 expression, and high P53 and TOPO2A expression was associated with higher grade tumours. However all three biomarkers when assessed individually did not show any correlation with molecular phenotypes, ki67 index and RCB class. The tumours expressing TP53 showed trend of poor response to NACT. HRM analysis showed point mutations in exon 5 of P53 gene in 2/14 cases(R175H). Loss of BRCA1 and associated higher expression of TP53, was associated with poor NACT response.
Conclusion: Expression of DNA repair proteins did not predict the response to NACT, when assessed individually. Since action of these molecules it at genetic levels, protein expression might not be a reliable indicator for assessing NACT response, thus further studies involving molecular testing need to be undertaken
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	Ben Hammouda, Seifeddine Medtaher Maamouri Hospital Dept. of Pathology Nabeul Tunisia	Poster	Emna Chelbi, Salwa Nechi Amel Douggaz, Abir Chaabène
Abstract No. 004				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Quality Assessment Of Intraoperative Frozen Section In The Diagnosis Of Thyroid Tumors

ABSTRACT TEXT

Objective: To evaluate the accuracy of intra-operative frozen section (FS), made in our department, in the diagnosis of thyroid tumors.
Methods: We retrospectively reviewed all thyroid specimens sampled for FS analysis made in our department during one year (2016).
Results:
Of 77 patients who underwent thyroid lobectomy, 69 (89.6%) were female and the mean age was 48 years (15 – 78). The answer of FS was malignant in 4 cases (5.2%), benign in 40 cases (51.94%) and referred in 33 cases (42.86%). FS and final diagnosis agreed in 41 cases (53.25%) and disagreed in 3 cases (3.9%) and it was always false-negative. Sixteen cases of thyroid carcinoma (20.78%) were diagnosed (15 papillary carcinomas and one medullary carcinoma). The sensitivity of the FS in the diagnosis of thyroid carcinoma was 25%, the specificity was 100%, the positive predictive value of 100% and the negative predictive value was 83%. The diagnostic efficiency was 85.7%.
Conclusion: Our study shows a low rate of discordant diagnoses (3.9%) which is similar to the main published series. The high deferred diagnosis rate (42.86%) is usually due to problems of sampling. This can be explained by the recent individualization of "noninvasive follicular thyroid neoplasm with papillary-like nuclear features". Thus, the invasive character can only be identified after having examined the entire capsule and which is impractical in the settings of FS. Despite all these difficulties, our indices of diagnostic value and performance of FS in the diagnosis of thyroid carcinoma remain globally consistent with the data of the literature.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Dermatopathology	Ben Rejeb, Sarra Salah Azaiez Institut Tunis Tunisia	Poster	Charfi, Lamia Boujelben, Nadia Sahraoui, Ghada Abbes, Imen Ben Hamida, Naziha Mrad, Karima Driss, Maha
Abstract No. 004				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Cyclin D1: A usefull marker for langerhans cell histiocytosis

ABSTRACT TEXT

ABSTRACT TEXT:
Objective: Langerhans cell histiocytosis (LCH) is a rare disorder of unkonw ethiopathogenesis. Diagnosis is based on identification of CD1a positive histiocytic infiltrate. Activation of the mitogen-activated-protein-kinase(MAPK) is constantly observed in LCH and therefore downstream markers such as cyclin D1 may be useful marker for LCH. The aim of this study was to investigate the expression of cyclin D1 in LCH.
Methods: We assessed the immunohistochemical expression of cyclin D1(cloneE08218) in series of 16 cases of confirmed LCH. Expression of Cyclin D1 was scored as weak, moderate and strong nuclear staining and results were interpreted by two pathologists. The percentage of positivity was assessed.
Results: The mean age of patients was 13.7 years old with male to female ratio of 1,3. The most common involved site was bone (n=9; 56, 3%), followed by lymph node (n=5; 31,2 %) and skin (n=2; 12,5%). All cases showed nuclear staining for cyclin D1 with variable intensity. It was assessed moderate in 43,8% (n=7) and strong in 56,2% (n=9). The percentage of positive cells was >50% in 13 cases and <50% in 3 cases.
Conclusion: Our results have shown that all cases of confirmed langerhans cell histiocytosis from various sites express cyclin D1. This finding may be attributed to MAPK pathway activation that has been described in LCH. Otherwise, cyclin D1 is not significantly expressed in reactive Langerhans cell proliferations. Therefore, cyclin D1 immunohistochemistry may be useful as diagnostic marker and in excluding non-neoplastic mimics of LCH.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Ben Jamaa, Nadia Tunisia	Poster	Ben Hammed, Yousri Cheour, Mariem Bouzguenda, Souhir Sahraoui, Mariem Ben Cheikh, Nahed Kacem, Samia Lahmar, Ahlem Masmoudi, Aida
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Contribution of fetopathological examination in neonatal deaths

ABSTRACT TEXT

Objective: We proposed to highlight the contribution of fetopathological examination in the establishment of the cause of death to improve the management of future pregnancies.
Methods: We conducted a retrospective and descriptive study in the neonatology and fetopathology departments of the Maternity and Neonatology Center of Tunis. Our Study carried out over a period from January 2011 to December 2016. We included all newborns admitted to the Neonatal Resuscitation Unit of the Neonatal Department who died there before the 28th day of life and in whom a fetopathological examination was performed.
Results: We collected 53 cases, of which only 34 corresponded to our inclusion criteria. Sex ratio was 1.8. 50% of mothers were aged between 20 and 29 years old. Consanguinity was present in 38% of cases. Regarding the causes of neonatal deaths, we observed the dominance of respiratory pathologies (31%) then palliative cares with 18%. Next come neurological causes and heart disease with 9% respectively. Other causes include inherited diseases of metabolism (6%) and sudden deaths (6%). A total conformity between fetopathological and neonatological examinations was noted in 27% of the cases, a partial agreement in 40%, a total unconformity in 27% and in only 6% of the cases the fetopathological examination didn't show any abnormalities.
Conclusion: To conclude, we emphasize of the importance of fetopathological examination in the determination of the cause of neonatal deaths by providing an exhaustive diagnosis essential to the management of future pregnancies and to provide a psychological comfort to the family and to the medical profession.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Hepatopathology and Biliary System	Ben Slama, Sana Mongi Slim Hospital Tunis Tunisia	Poster	Walha, Marwa Belkacem, Oussama Bacha, Dhouha Lahmar, Ahlem
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Pathological response of colorectal liver metastases treated after induction treatment

ABSTRACT TEXT

Objective: Mortality for colorectal cancer is mainly due to liver metastases, surgical resectability of metastases. Pathological response is an important prognostic factor.
The aim of the study was to evaluate tumor response by Tumor regression grade (TRG) according Rubbia-Brandt et al and correlation with survival. To establish chemotherapy-related liver injury.
Methods: Thrity-eight patients resected for colorectal cancer liver metastases after neoadjuvant chemotherapy were enrolled in this study. Tumor regression grade (TRG) according to Gradding Rubbia-Brandt et al. was evaluated.
Results: Sex ratio was 1.5 with an average age of was 55 years. Twenty-five patients were in stage IV (65.7% of patients with synchronous liver metastases). Overall survival was 62% at 12 months, 42% at 24 months and 21% at 36 months. Thirty-four patients (89.5%) received Oxaliplatin and nine (23.7%) irinotecan. Twenty patients (52.6%) had no histologic response (TRG 4 and 5), nine (23.7%) had a major response (TRG 1 and 2) and nine had a partial response (TRG3). Survival was more important with major pathologic response than with partial response or no response. No statistically significant relation was found between survival and the different types of response. Chemotherapy-related liver injury were present in 21 patients (55.2%).
Conclusion: Scoring system with three grades are currently recommanded to evaluate pathological response and new histopathological data are proposed. Larger studies are required to validate these items and their utility for therapeutic decisions.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-11	Molecular pathology	Elbjeirami, Wafa King Abdullah Medical City Laboratory and Blood Bank Makkah Saudi Arabia	Poster	El-Taani, Hani El-Khatib, Hani Al Shaikh, Abdulaziz Elsamany, Shereef
Abstract No.				
004				
Date				
15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Frequency of KRAS, NRAS, and BRAF mutations in colorectal cancer in Saudi patients: A single-institution experience

ABSTRACT TEXT

Objective: Mutations in RAS, and BRAF are commonly present in colorectal cancer (CRC) worldwide, but no data about RAS mutations outside KRAS exon 2 is available for Saudi CRCs. We, therefore, analyzed the mutation frequencies of KRAS, NRAS, and BRAF along with association of age, gender, and tumor location in CRC patients from Makkah region as representative of Saudi population.
Methods: This was a retrospective study of 94 CRC patients, who attended Oncology clinic at KAMC from January 2017 to present. Genomic DNA was isolated from FFPE tumor samples, and analyzed for mutations of KRAS exons 2, 3 and 4, NRAS exons 2, 3 and 4, and BRAF exon 15 using hybridization-based strip assay.
Results: KRAS mutations were detected in 40 out of 94 (43%) tumor samples, of which 35 (87.5%) had mutations in exon 2, and 5 (12.5%) in exon 4. The majority of KRAS exon 2 mutants were found in codon 12 (n=31; 89%) followed by codon 13 (n=4; 11%). The most common KRAS mutations were Gly12Asp (30%) and Gly12Val (23%). Of the 54 wild-type samples tested for additional mutations, six samples were mutant for NRAS (11%), and two for BRAF (4%). Patients with RAS mutations did not harbor BRAF mutation. KRAS mutations were not associated with patient age, and gender. However, 54% of KRAS mutations were found in right-sided CRC as compared to 38% being left-sided CRC. NRAS mutations, although small in number (n=6), were mainly found in females (n=5; 83%) in older age group (>50 yrs old; n=5; 83%), and in left-sided CRC. BRAF mutations were too rare to attain significant associations in this study.
Conclusion: To the best of our knowledge, this is the first study reporting KRAS, NRAS and BRAF mutation frequency in Saudi representative population, for which results appear similar to reported frequencies in Western population.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	El-Daba, Somaia Ahmed Ain Shams University Dept. of Pathology Cairo Egypt	Poster	
Abstract No.				
004				
Date				
15.10.2018 & 16.10.2018				

ABSRACT TITLE:
A cytomorphological study of the atrophic pap smear and its diagnostic challenges

ABSTRACT TEXT

Objective: Highlight all cytomorphological diagnostic challenges that can be seen in atrophic Pap smear, correlate them with their histopathological picture and provide different ways to overcome these challenges
Methods: : This study incorporated 65 atrophic ThinPrep smears, their available cell blocks, HPV DNA results and tissue specimens for some suspicious cases. Revision of their available clinical data and previous/repeated Pap results was done.
Results: Fourty nine cases (75.38%) were diagnosed as negative for intraepithelial lesion or malignancy (NILM) with 3 of them were associated with endometrial cell clusters (4.61%), 2 cases (3%) were diagnosed as atypical glandular cells (AGC). Both were further assessed by examination of their cell blocks and their excised polyps. One showed ciliated metaplasia and the other showed endocervical polyp atypia. Thirteen cases (20%) were diagnosed as atypical squamous cells of undermined significant (ASC-US) as they showed hyperchromatic crowded disorganized squamous cell groups (in most of them),and/or koilocytotic like cells,and/or atypical parakeratotic like cells. Eight of them were proved to be reactive atypia of atrophy as they showed negative HPV DNA results. One case (1.5%) was diagnosed as squamous cell carcinoma and was further assessed by cell block. In addition, of the negative 3 cases (4.61%%) were presented with previous ASC-US diagnosis and proved to be NILM. Fungal infection and bacterial vaginosis were also found in 12.3% and 7.69% respectively.
Conclusion: The atrophic Pap smear may mimic SIL , however the orientation to all cytomorphological changes that may develop with atrophy, associated pathological findings as endocervical polyp or ciliated metaplasia, HPV DNA examination, cell block preparation, and repeated smear after local estrogen application will help in solving these challenging cases
Policy of full disclosure: I ask for Bursary

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13	Pathology of infectious diseases	El-Hajj, Rana American University of Beirut Dept. of Experimental Pathology Beirut Lebanon	Poster	
Abstract No.				
004				
Date				
15.10.2018 & 16.10.2018				

ABSRACT TITLE:
EAPB0503: an immunomodulatory drug analog as promising treatment for cutaneous leishmaniasis

ABSTRACT TEXT

Objective: Cutaneous Leishmaniasis (CL) is one of the most uncontrolled spreading neglected diseases. It has been lately introduced to Lebanon following the displacement of refugees from Syria. Therapeutic interventions for CL are variable, however, the high risk for spread of drug-resistant parasites is elevated. In this study, we investigated the efficacy of an Imiquimod analog, EAPB0503, against promastigote and amastigote stages of L.tropica and L.major.
Methods: Promastigotes of both strains were treated with different concentrations of Imiquimod or EAPB0503, for up to 72hours, and their anti-promastigote activity was determined by a blinded count. For the anti-amastigote activity, human macrophages were infected and treated with 0.1 µM of both drugs, and their mechanism of action was checked by RT-PCR, western blot and confocal microscopy.
Results: Imiquimod and particularly EAPB0503 showed a leishmanicidal activity against both stages of L.tropica and L.major. This activity seemed to be mediated by the upregulation of TLR-7, resulting in the activation of the NF-κB canonical pathway, thus the production of protective pro-inflammatory cytokines, and the down-regulation of anti-inflammatory cytokines. The most prominent activity of EAPB0503 is mediated by the activation of TLR8 and TLR9 promoting resistance to the infection, as well as the downregulation of TLR1, TLR2 and TLR6 helping in susceptibility to the infection.
Conclusion: EAPB0503, showed a more potent leishmanicidal activity in vitro than Imiquimod against L.tropica and L.major. These results warrant an in depth in vivo preclinical study and highlights the potential clinical activity of this compound.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Hedhli, Raoueh Faculty of Medicine of Tunis Tunisia	Poster	Chelly, Ines Ghachem, Dorra Zehani, Alia Haouet, Slim Kchir, Nidhameddine
Abstract No.				
004				
Date				
17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Papillary tumors of the pineal region: Primitives or metastases

ABSTRACT TEXT

Objective: very rares tumors which may be primitive or secondary
Methods: A 60-year-old man who has been complaining for a month of persistent headache. An MRI was performed showing a tumor of the pineal region
Results: The histological examination of biopsies performed showed a malignant tumor proliferation of papillary architecture in the majority, with marked nuclear atypia.
3 diagnoses were evoked: a primitive papillary tumor, a metastasis or a choroid plexus tumor. An immunohistochemical study was carried. Tumor cells were markedly and diffusely labeled with pancytokeratin, CK7, TTF1, EMA. They were negative for PS100, CD56 and P53. Ki67 was estimated to be 70 %.
The diagnosis is that of a cerebral metastasis of the pineal region of an adenocarcinoma of probable pulmonary origin.

Conclusion: Papillary tumors of the pineal region are rare. Their treatment varies from excision followed by radiotherapy for primary tumors due to the high risk of local recurrence to palliative treatment in the case of advanced cancer metastasis
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-12	Nephropathology	Hussein Kandora, Fatima National Public Health Histopathology Dept. of Histopathology Khartoum Sudan	Poster	Mekki, Salwa Abdel Satir, Ali
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Lupus nephritis in Sudan

ABSTRACT TEXT

Objective: The aim of this study was to identify the histological patterns of lupus nephritis according to WHO classification with correlation to the demographic data and clinical features.
Methods: This was a descriptive case series hospital based study; conducted in renal biopsies obtained at 3 histopathology centers during the period from January 2011 to December 2013.The study included sixty biopsies with proven lupus associated nephritis. Patients' data were collected from patient's files using predesigned data collection sheet.Formalin fixed paraffin embedded blocks of processed specimens were recut, stained and reviewed. SPSS and Windows office 2010 were used in data analysis.
Results: The study included 60 patients, 23 (38.3%) were children (age < 16 years) and 37 (61.7%) were adults (> 16 years). The patients' age ranged from 5 to 50 years with mean age of adults being 31.1years +/- 9.4 SD while in children it was 12.5years +/- 2.4 SD. The female to male ratio was 11: 1. Proteinuria was the commonest clinical presentation in adults detected in 48% of the patients, while in pediatrics the commonest presentations was both proteinuria and renal failure seen equally in 39.1 % of cases. WHO class IV, II, III, V and I were detected in 28, 19, 8, 3 and 2 cases. Patients with class IV presented mostly with impaired renal function. Tubular atrophy and interstitial fibrosis were detected in 34% and 15% respectively, the latter showed statistically significant relationship with renal failure (P<0.04).
Conclusion: Proteinuria was the commonest presentation and class IV was the commonest class of lupus nephritis in Sudan. Despite the economical limitations in Sudan WHO classification can be followed in patient evaluation which makes it comparable to reports from literature.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-05	Education in pathology	Kakkar, Nandita PGIMER Chandigarh India	Poster	VASISHTA, RAKESH KUMAR KUMARI, SAVITA VARMA, SUBHASH SURI, VANITA CHOUDHARY, NEELAM KUMAR, PRAVEEN SINGH, SURJIT
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
101 Medical Autopsy Cases (Adult and Pediatric) from PGIMER, Chandigarh, India; What did we learn from them?

ABSTRACT TEXT

Objective: There is a sharp decline in medical autopsies world wide. At PGIMER, Chandigarh, India, we do approximately 550 Medical Autopsies per year of which 350 belong to the pediatric age group. This study was conducted to highlight the benefits of medical autopsy.
Methods: We compiled 101 autopsy cases (49 adult and 52 pediatric), most of which had featured in the Clinicopathological conferences of the institute.
Results: The final autopsy diagnosis of these 101 cases put them into the following categories - hematologic disorders- 10, malignancies- 5, infections- 12, hepatobiliary/ pancreatic disorders- 16, cardiovascular disorders-7, systemic vasculitides-13, primary renal mucormycosis-2, histiocytosis-4, primary immunodeficiency-3, congenital nephrotic syndrome-2, storage disorder-1, pediatric renal cystic disease (developmental/genetic)-26.
Conclusion: Medical autopsies are an excellent teaching tool for the entire medical fraternity via Clinicopathological conferences. It is the best way to learn histopathology, it clinches the final diagnosis, which tells the clinician where they went wrong, deciphers new diseases in a particular geographic area, confirms various infections / malignancies and unveils new complications of established diseases / treatments. In MTP's done for congenital malformations's, autopsy establishes the correctness of the radiological findings, thus providing peace to the parents by proving that their decision for MTP was correct. In fetal and neonatal autopsies, by establishing the cause of death, it helps in planning the next pregnancy.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Ijere, Ifeoma University of Nigeria Dept. of Morbid Anatomy Enugu Nigeria	Poster	Nzegwu, Martin Nzegwu, Victor Olusina, Bankole
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Uveal Tract Melanoma presenting as an abscess (PAN OPTHALMITIS) Masquerade Syndrome in a 77 year old Nigerian man

ABSTRACT TEXT

Objective: To report a case of Masquerade syndrome a rare finding in Nigeria.Masquerade syndrome label has been applied to a group of disorders that mimic ocular inflammatory disease. Although some benign conditions can be considered masquerade syndromes, most often the term refers to malignant entities.
Methods: Case report of a 77 year old man who presented with left corneal abscess and resulted to a painful blind eye.
Results: MACROSCOPY: Specimen consists of an enucleated eye, measuring 3x3x3cm. The cornea shows a fluctuant area of greyish white discolouration. (abscess). 1 block.
MICROSCOPY Sections show a malignant proliferation of melanocytes with atypical nuclei derived from the iris invading the deeper tissues with inflammation. The retinal layer is spared.
DIAGNOSIS Malignant Melanoma of the Iris masquerading as Iriditis. This is a typical case of Masquerade Syndrome. S -100 and Tyrosinase immunotyping will confirm this lesion.
Malignant proliferation of pigment forming atypical melanocytes in the deeper tissues of the iris and ciliary body.
Ocular melanomas include lesions of the uvea, conjunctivas and eyelid. Grin-Jorgensen et al . (1967) report that more than 85% of all ocular melanomas are uveal, and these are the tumours that most frequently masquerade as inflammation as inthis case. Classical diagnostic features are those of reports of flashes of light or scotomas (Grin-Jorgensen et al . 1967). If the macular is affected, the patient may describe metamorphopsia, an increase in hyperopia, or a decrease in myopia. When masquerading as ocular inflammation, uveal melanoma may present as unilateral uveitis as in this case. Iris lesions may produce anterior chamber cell and flare. Ciliary body melanomas may produce dilated episcleral vessels, classically termed 'sentinel vessels. Patient did well following evisceration and is undergoing radiotherapy and chemotherapy.
Conclusion: To raise awareness with a high index of suspicion in cases of panopthamitis which could be a uveal tract melanoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-20	Mediastinum and thymic pathology	Razzak, Anam Dow Univ. of Health Science Pathology, Dow International Dept. of Pathology Karachi Pakistan	Poster	Roome, Talat Ali, Perbhat Zaheer, Lubna Abidi, Lubna Faizi, Shaheen Raza Shah, Muhammad
Abstract No. 004				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Anti-atherosclerotic effect of opuntiol and its silver nanoparticle against foam cell formation via nuclear factor #B signaling

ABSTRACT TEXT

ABSTRACT TEXT:
Objective: Atherosclerosis is an inflammatory disease, characterized by the accumulation of macrophage-derived foam cells in the vessel wall and accompanied by the production of a wide range of chemokines and cytokines predominantly regulated by Nuclear Factor κB Pathway. The present study addresses the anti-atherogenic and anti-inflammatory potential of opuntiol (OP) and its silver nanoparticle (OP-AgNPs) against oxidized low-density lipoprotein (ox-LDL)-induced macrophage foam cell formation and cytokine production including TNF-α, IL-1β and MCP-1.
Methods: Murine peritoneal macrophages were collected after 72 hours of peritonitis and kept in overnight incubation. The supernatant was removed after 24hrs and the adherent macrophages further incubated with ox-LDL (50μg/ml) followed by treatment with OP (1, 5 & 10μg/ml) and OP-AgNPs (0.5, 1 & 3μg/ml). After 24 hours of treatment, Oil Red O staining was performed to observe the inhibitory effect of treatment against foam cell formation under light microscope. mRNA expression of TNF-α, IL-1β and MCP-1 was determined though real-time PCR and NFkB expressions was examined by ELISA in ox-LDL-induced macrophage foam cells.
Results: The nano-formulation was successfully characterized through Atomic force microscopy (AFM) and Dynamic light scattering (DLS) analysis. A total of 65 ±3.6% of murine macrophages cells displayed foamy characteristics with oil red staining of lipid droplets after incubation with ox-LDL for 24 h, however OP and OP-AgNPs treatment significantly reduced the foam cell formation in a dose-dependent manner. Additionally, OP and OP-AgNPs significantly inhibited the mRNA expressions of ox-LDL-induced TNF-α (63-85%), IL-1β (55-78%) and MCP-1 (59-83%) cytokine production indicating that the compound has potential to effect at transcriptional level. The treatment also significantly suppressed ox-LDL induced IκB-α degradation and nuclear p65 expression in macrophages, indicating that opuntiol could inhibit the activation of NF-κB signaling during atherogenic phenomenon.
Conclusion: It can be concluded that opuntiol and opuntiol coated silver nanoparticle potentially interfered with ox-LDL-induced macrophage foam cell formation and cytokine production including TNF-α, IL-1β and MCP-1 via NF-κB signaling, thus can be considered for the development of novel anti-atherogenic agent to encounter the future challenges in cardiovascular ailments.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-14	Quality and accreditation in surgical pathology	Rehman, Fakeha King Edward Medical University Dept. of Pathology Lahore Pakistan	Poster	Malik, Faiza Bajwa, Rakhshindah Niazi, Shahida Sarwar, Muhammad Zeeshan Mujtabai, Yumna Rehman Naumeri, Fatima Hameed, Samreen
Abstract No. 004				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Addendum, amended and discrepant Surgical Pathology reports; experience at a university affiliated tertiary care hospital in Lahore, Pakistan

ABSTRACT TEXT

Objective: To analyse the addenda, amendments and discrepancies in surgical pathology and the causative factors at our institution.
Methods: All discrepant reports with related originally dispatched reports for cytology and surgical pathology cases at a tertiary care pathology laboratory at King Edward Medical University, Lahore, during a six-month period, from September 2017 to February 2018, were reviewed and 254 specimen were analyzed for this study. Secondary reviews, analysis of amended reports, addendum with indications and correlation studies (cytology-histology) were used to scrutinise the cases. We did root cause analysis of these cases using Eindhoven model of classifying errors and distributed them according to the phase of the routine testing.
Results: Diagnostic discrepancies constituted a major bulk of discrepant report resulting in amendments in surgical pathology reports. We observed that 64.1% of the errors were encountered in analytical phase, whereas 20.4% and 15.3% of errors were seen in pre-analytical and post-analytical phases of the routine testing. Discrepancy was mainly detected as a result of secondary review from referral laboratories with indication being physician's dissatisfaction with initial diagnosis. The majority of errors were seen in reporting breast, skin, lymph nodes and endoscopic biopsies.
Conclusion: With the growing demand of health care delivery there is need to improve our diagnostic centres to approach an affordable, timely and accurate diagnosis. Patient safety culture needs to be adopted by both resident and reporting pathologists. Individual factors are mainly attributed to cultural attitudes and educational constraints. Lack of intra-departmental consultation, failure to acquire proper clinical information with inappropriate communication with requesting physician were major constraints in providing a good quality report. Technical errors need to monitored and minimized to a negligible extent. Quality controls need to be monitored at every step from requisition till report dispatch.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Ali, Hala Taibah University Dept. of Pathology Almadena Saudi Arabia	Poster	Mohamed, Rabab
Abstract No. 005				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Adult-type granulosa cell tumors are unusually frequent in Almadina region

ABSTRACT TEXT

Objective: This study aims to describe the pattern of ovarian neoplasms in Al-Madina region in Saudi Arabia and to investigate the rise in the number of cases in certain types of ovarian malignant tumours which has been observed.
Methods: A retrospective descriptive histopathological assessment for all primary malignant ovarian tumors diagnosed from January 2011-December 2016 in the Maternity and Children Hospital, Al-Madina region, was conducted after recruitment of their H&E-stained tissue slides and formalin-fixed paraffin-embedded blocks. Due to the observed rise in the rate of Adult-granulose cell tumours(AGCTs), tissue sections from these specimens were stained immunohistochemically with BRCA-1.
Results: 301 ovarian specimens were identified. 217/301 were neoplastic specimens while 84/301 were non neoplastic. Neoplastic specimens were: 135/217 (63) benign, 16 /217 (7%)borderline and 66/301(30%) malignant neoplasms. The malignant tumours were as follows:41/66 (60%) surface epithelial, 17/66 (26%) sex cord stromal and 8/66 (14%) germ cell tumours. The frequency of was unusually high 16/66 (26%(of all malignant ovarian neoplasms. Altered BRCA-1 expression was seen in only 2 specimens of the AGCTs.
Conclusion: Malignant ovarian neoplasms accounts for 30% of neoplastic ovarian specimens. In spite of the overall low frequency of malignant ovarian tumors in Al-Madina region, a remarkably frequent AGCTs was observed. Those tumours did not show significant altered expression of BRCA-1. Further studies are mandatory to explore the underlying molecular causes behind their observed high frequency.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Abushahin, Nisreen University of Jordan Dept. of Pathology Amman Jordan	Poster	Osman, Randa Amr, Yousef Alabbadi, Mousa Al-Chalabi, Mohammad
Abstract No. 005				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

GIST with rhabdoid differentiation in a woman with breast cancer: A case report and literature review

ABSTRACT TEXT

Objective: In studies of Jordanian population, GISTs comprised 45% of the intra-abdominal mesenchymal tumors. however, only less than 5% of GISTs are associated with tumor syndromes. Recent studies are being published that highlight the association of sporadic GIST with other types of cancer, including breast cancer.
Methods: We here report a case of gastric GIST, epithelioid type, grade 1 with rhabdoid morphology in a patient with a history of breast cancer.
Results: A 76 year old female with a previous history of breast cancer presented with abdominal pain and a clinical picture of acute appendicitis. CT scan showed a heterogeneous subserosal lesion at stomach greater curvature. The patient underwent appendectomy (which revealed suppurative appendicitis) in addition to stomach wedge resection. Histopathological examination of the gastric tumor showed a mixture of spindle and epithelioid cell proliferation, some with perinuclear vacuoles, along with prominent hyalinization, edema, and hemorrhage. Multinucleated florrete like giant cells were noted. There were cells with bizarre morphology and rhabdoid like appearance, other areas exhibit cells inside lacunae simulating chondroid like material. The tumor seemed to replace most of gastric mucosa and extend down < 1 mm away from inked serosal surface. Vascular invasion was identified in a large serosal vessel. The mitotic count reaches a maximum of 4/50HPFs. There is no evidence of necrosis. The tumor cells were immunohistochemically positive for CD117, DOG-1 and CD34 while negative for desmin, myogenin, S100, ER, CD31, CK7 and CK20 (Figure 1).
Conclusion: GIST with Rhabdoid Differentiation are infrequent tumors, the co-existence of it with breast cancer is even more unique.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Ali, Sara Shandi University Dept. of Pathology Khartoum Sudan	Poster	Abdelmagid, Ibtihalat Abdelhaleem, Ihsan
Abstract No. 005				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Histopathological patterns of Hodgkin lymphoma among Sudanese patients

ABSTRACT TEXT

Objective: This study aim to detect the frequency and the histopathological patterns of Hodgkin Lymphoma in Sudanese patients.
Methods: This is a descriptive cross sectional analytic study, conducted at histopathology department in RICK, Sudan, during the period of January2009 to December 2013. Patient`s data were collected from records. Representative selected pieces of tissues were processed and Slides were stained by routine haemotoxyline-eosin and immunohistochemistry stains (CD45, CD15, CD30, CD3 and CD20)
Results: this study included 64 cases, their age ranged from 3.5 to 60 years. The most affected age group appeared to be children and teenagers (25%) with a median age of 31 years with male predominance in 71.9% among both children and adults. 96.8% of the patients presented with nodal enlargement, mainly cervical group representing 38.7%, while extranodal involvement was seen in 3.1% of the cases as ceacal mass, multiple abdominal masses and splenomegaly
The predominant class was classical Hodgkin lymphoma seen in 99% of cases with the dominance of nodular sclerosis subtpe seen in a 34.3%, while NLPHL was found 1% so considered as rare entity.
The common immunohistochemistry marker with positive reaction was CD30 noted in 98.4%, followed by CD15 in 81%. MUM-1 had positive reaction noted in 34.3%, in spite it has a stronger reaction seen in 95.4% of cases, while CD30 and CD15 has less intense reaction (76.1% and 78.9% respectively).
Conclusion: Hodgkin lymphoma is more predominant in males in the second decade. The common Histopathological variant is nodular sclerosis of classical Hodgkin Lymphoma. Immunohistochemistry is important for confirmation of diagnosis and differentiation of classical HL from NLPHL.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Alnashwan, Yara King Fahad Specialist Hospital Dammam Saudi Arabia	Poster	Amr, Samir Abdulhadi, Khaled
Abstract No. 005				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Metastasizing Malignant Granular Cell Tumor of the Anterior Abdominal Wall, with Prolonged Survival

ABSTRACT TEXT

Objective: To present a rare case of malignant granular cell tumor of the abdominal wall with metastasis to the lung and inguinal lymph node with prolonged survival.
Methods: Case report: A 50-year-old female presented to a peripheral hospital with progressively enlarging mass in the anterior abdominal wall of one year duration. On physical examination, a 7 x 6 cm firm irregular subcutaneous mass was felt in the right lower paraumbilical area of the anterior abdominal wall. Wide local excision with safety margins of the tumor was done.
Results: Microscopic examination revealed well defined but non-encapsulated subcutaneous mesenchymal neoplasm composed of irregular islands of large cells with mostly round to oval pleomorphic vesicular nuclei, with markedly granular cytoplasm, and several large eosinophilic globules. The nuclear-cytoplasmic ratio was variable. Many foci of tumor necrosis and scattered mitotic figures, 4 per 10 HPF at a magnification of 200 were identified.
Immunohistochemical stains showed the tumor cells to be strongly positive for vimentin, S100 and CD68. Stains for CK, SMA, desmin, and myoginin were all negative. Ki-67 proliferative index was 3-5%. PAS stain highlighted the granules and the eosinophilic globules within the cytoplasm of tumor cells. Follow-up of her CT scan showed bilateral multiple lung nodules and a large inguinal mass. Ten years later, she had persistent metastatic disease. However, the patient is still alive up to this date.
Conclusion: Conclusion: Malignant granular cell tumor (MGCT) is a rare high-grade sarcoma of Schwann cell origin accounting for 0.2 % of all sarcomas. Abdominal wall is unusual site for MGCT; nine cases were reported in the literature. It have 39% mortality rate in 3-year interval. Our patient had a prolonged survival in spite of the presence
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Al-Obaidy, Khaleel Indiana University Dept. of Pathology Indianapolis USA	Poster	Idrees, Muhammad
Abstract No. 005				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Urothelial carcinoma with lymphoepithelioma-like differentiation: A case report

ABSTRACT TEXT

Objective: Urothelial Carcinoma (UC) is known for its divergent differentiation. Lymphoepithelioma-like carcinoma closely resembles the nasopharyngeal lymphoepithelioma; however, no EBV association has been reported. It can be pure or admixed with conventional UC or other variants. Most patients present with high stage disease.
Methods: Herein, we describe a case of urothelial carcinoma with lymphoepithelioma-like (UC-LEL) differentiation.
Results: The patient is a 67-year-old male who presented to the urology clinic for evaluation of urinary irritation symptoms. A large bladder tumor was resected on cystoscopy and submitted to pathology. The specimen consisted of multiple fragments of irregular tan-brown firm tissues with a maximum aggregated dimension of 4.5 cm. Microscopic examination showed multiple fragments of bladder tissue containing sheets of malignant cells with syncytial growth pattern in a background of lymphohistiocytic infiltrates that extensively infiltrated the muscularis propria. The cells showed significant nuclear pleomorphism with high nuclear-to-cytoplasmic ratio, prominent nucleoli and brisk mitotic activity. Areas of conventional urothelial carcinoma and carcinoma in situ were also seen. On immunohistochemical staining, the tumor cells showed strong and diffuse positive staining for cytokeratin 7 and p53, focal staining for cytokeratin 34βE12, and negative staining cytokeratin 20, p63, EBV and LCA.
Conclusion: The morphologic and immunohistochemical features seen in this case are consistent with urothelial carcinoma with lymphoepithelioma-like differentiation. UC-LEL differentiation is rare and has been reported to be associated with better response to chemotherapy; therefore, evaluation of histologic specimens and reporting of such existence may prove benefit for patient's management.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Bellakhdhar, Mouna Farhat Hached Hospital departement Department Sousse Tunisia	Poster	Omri, Malika Ghammem, Monia Mestiri, Sarra Meherzi, Abir Kermani, Wassim Mokni, Moncef Abdelkefi, Mohamed
Abstract No. 005				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Schwannoma of the nasal cavity: A case report and literature review

ABSTRACT TEXT

Objective: The nasal cavity is a common site for polypoid lesions, particularly those of inflammatory nature, however nerve sheath tumors are a rare presentation. Most of these lesions arise from the branches of the trigeminal nerve. The pathologists should be aware of such a presentation in this rare location. Careful assessment of these lesions is important to exclude malignancy. we aim to study clinical presentation, anatomopathological features and treatment of nasal cavity Schwannoma .
Methods: we present a case of nasal cavity Schwannoma
Results: A 25-year-old female was referred to our department with a 3-year history of progressive right-sided nasal obstruction and rhinorrhoea. There was no history of anosmia, facial pain, headache and recent nasal trauma. Patient was neither suffering from any comorbid diseases nor reported any such family history. Anterior rhinoscopy revealed a single, large, purplish, smooth, nontender, firm, and soft tissue mass occupying the entire right nasal cavity. The mass was not seen on posterior rhinoscopy, and there was no palatal bulge. The rest of the otorhinolaryngological, head and neck, and general physical examinations were unremarkable.
Contrast-enhanced computed tomography showed a homogeneous mass measuring 6cm, completely occupying the anterior half of the right nasal cavity. The right ethmoid sinus was involved, and there was no evidence of bone destruction or intracranial extension.
The patient underwent surgical excision of the mass via the Rouge Denker approach under general. The histopathological diagnosis was benign schwannoma. The postoperative period was uneventful, and the patient remained free of recurrent lesion 5 years postoperatively
Conclusion: Schwannomas are benign peripheral nerve sheath tumors that rarely involve the nasal cavity and often present clinically as nasal polyps. The radiology of the lesion usually reflects the indolent nature of this tumor with no bone destruction or soft tissue invasion. The treatment involves complete surgical excision with no reported cases of recurrence after surgery.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Ben Romdhane, Neila Ines Tunis Tunisia	Poster	Blel, Ahlem Arfaoui Toumi, Amira Ksentini, Meriem Gharbi, Sarra Ayadi, Rahma Aloui, Raoudha Znaidi, Nadia Ferah, Faten Rammeh, Soumaya
Abstract No. 005				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
ALK protein expression in pulmonary adenocarcinoma: A Tunisian series

ABSTRACT TEXT

Objective: Detection of ALK rearrangement by fluorescence in situ hybridization (FISH) or reverse transcriptase polymerase chain reaction (RT-PCR) is considered to be the standard procedure, but each with its own limitation. We assess immunohistochemical profile of ALK protein in a series of Tunisian patients with lung adenocarcinoma.
Methods: ALK protein expression was studied applying the D5F3 antibody with a fully automated Ventana CDx technique on a series of lung adenocarcinoma.
Results: This was a retrospective study of 24 cases of pulmonary adenocarcinoma collected at Department of Pathology in Charles Nicolle Hospital of Tunisia.
A series of 26 formalin fixed and paraffin embedded (FFPE) archived tissues were obtained from Tunisian patients with pulmonary adenocarcinoma at Department of Pathology in Charles Nicolle Hospital of Tunisia. The samples corresponded to 14 biopsies and 8 lung resection specimens. The population consisted of 2 females (9%) and 20 males (891%). The average age was 59.3 years. Smoking status was provided for 12 patients. Adenocarcinomas were classified as: 7 solid, 6 lepidic, 4 acinar, 2 colloid, 1 papillary, and 2 invasive mucinous adenocarcinomas. ALK expression was found in two cases (9%) corresponding to a papillary and acinar adenocarcinoma which showed a strong granular and homogenous cytoplasmic staining.
Conclusion: We found a high frequency of ALK expression in our series compared to frequency reported in literature. Further studies with larger Tunisian series are required to obtain more conclusive results.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Ben Slama, Sana Mongi Slim Hospital Tunis Tunisia	Poster	Walha, Marwa Bacha, Dhouha Belkacem, Oussama Lahmar, Ahlem
Abstract No. 005				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Incidental gallbladder cancer diagnosed on cholecystectomy specimens: A study of 30 cases

ABSTRACT TEXT

Objective: The gallbladder cancer is a rare cancer with poor prognosis. The association with gallstone disease is the main risk factor of this cancer.
The aim of the studywas to describe the demographics, clinic-pathologic and therapeutic management of incidentally gallbladder cancer diagnosed on cholecystectomy specimens.
Methods: Retrospective study including 30 cases of gallbladder cancer incidentally detected on cholecystectomy specimens.
Results: The incidence of gallbladder cancer incidentally discovered was 0.83%. The sex ratio M/F was 0.5 and the average age was 68 years. The main risk factor was cholelithiasis (38%). Adenocarcinoma was the most frequent histological type found in 86.6% of cases and it was biliary- type in 56.6% of cases. 76,7% of the tumors were classified in early stages (stages 0, I and II) and 23,3% were in advanced stages (III and IV). A simple cholecystectomy was curative in 66.7% of cases. Overall survival rate was 56.7% at one year. The best survival rate was for the early stages: 100% stages 0-I and 45.4% stage II.
Conclusion: The gallbladder cancer has poor prognosis because of its late diagnosis. Thorough sampling and careful attention on histological examination of all parts of cholecystectomy specimens allows detection of early cancer with better prognosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Bannoura, Sami American University of Beirut Dept. of Pathology Beirut Lebanon	Poster	Zein Sabatto, Bassel Fleifel, Abdallah Nahouli, Hasan Khalifeh, Ibrahim
Abstract No. 005				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Characteristics of breast cancer metastasizing to bone in a mediterranean population

ABSTRACT TEXT

Objective: This study examines clinicopathologic, molecular, and radiologic characteristics of breast cancer metastasizing to bone in a Mediterranean population.
Methods: Breast cancer cases with pathologically-confirmed metastasis to bone were retrieved from the pathology department archives. Descriptive and bivariate inferential statistics were performed on the available clinical (demographic, axillary lymph node status, and metastasis-free interval), radiologic (skeletal site of metastasis, and type of bone lesion), and microscopic (tumor grade, type of breast cancer, lymphovascular status, perineural status, lymph node involvement, nodal extracapsular extension, hormone receptor status, and molecular subtype) data.
Results: Out of 123 cases, 93.5% were of ductal carcinoma origin, 54.4% were grade III, 90% had concurrent axillary lymph node metastasis, 60.5% were luminal A, and 59.6% were osteolytic on imaging. Discordance in the status of estrogen receptor (ER), progesterone receptor (PR), and the human epidermal growth factor receptor (HER2) between the primary breast cancer and the corresponding bone metastasis was noted, with highest discordance rate noted in the status of PR (35.7%). Ductal carcinoma was noted to be mostly associated with osteolytic bone lesions, while lobular carcinoma was associated with either osteoblastic or mixed (-lytic and -blastic) bone lesions (p-value=0.05). Metastasis-free interval was significantly associated with number of metastatic bone lesions (P=0.001).
Conclusion: The significant association between metastasis-free interval and the number of metastatic bone lesions suggests that a higher interval allows more time for tumors to manifest multiple bone lesions. High rate of discordance in the status of PR, ER, and HER2 was congruent with the literature highlighting the need to further investigate underlying mechanisms.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	Ben Slama, Sana Mongi Slim Hospital Tunis Tunisia	Poster	Lahmar, Ahlem Walha, Marwa Mebazaa, Leila Bacha, Dhouha Jilani, Houaida Dimassi, Kaouther
Abstract No. 005				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Fetoplacental malformations and abnormalities: A retrospective analysis of 398 cases

ABSTRACT TEXT

Objective: Aim of the study was to deduce a list of indications of fetoplacental examination and to determine the type and frequency of malformations.
Methods: A retrospective study including abortions, stillbirths and children died perinatally. The cases were referred in the department of pathology of the M. Slim Hospital (North Tunis) during 24 years.
Results: 398 consecutive fetoplacental examinations were included. The mean maternal age was 32,58 years. The average gravidity was 2,65 and the average rate was 1,48. Maternal conditions were dominated by preeclampsia. The main indication motivating the request for fetoplacental examination was a spontaneous abortion in 45,73% of cases. The rate of stillbirths was 15,61% and that of children who died in the perinatal period was 13,28%. The sex ratio was 1,4 and the medium term was 19,38 SA. 170 fetuses had abnormalities (43,14%). The most frequent abnormalities were chromosomal aberrations (27,64%), followed by facial abnormalities (25,88%) and central nervous system abnormalities (18,82%). We examined 283 placentas, 49% of them contained abnormalities. Ischemic lesions were the main placental abnormalities (41%).
Conclusion: An efficient fetopathological examination should be as complete as possible, including examination of placenta. Everything must be integrated into a data collection and complete clinical information.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10	Immunohistochemistry	Erashdi, Madiha Jordan University of Science And Technology Laboratory Medicine Irbid Jordan	Poster	Aldaoud, Najla Abdo, Noor Al-Khatib, Sohaib M. Al-Mohtaseb, Alia
Abstract No. 005				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
The Utility of PAX8 and SATB2 immunohistochemical stains in distinguishing ovarian mucinous neoplasms from colonic and appendiceal mucinous neoplasm

ABSTRACT TEXT

Objective: The distinction between primary ovarian mucinous tumors and metastatic mucinous neoplasms from lower gastrointestinal tract including appendiceal tumors can pose a great difficulty. The combination of PAX8 and SATB2 immunohistochemical stains can be used as a diagnostic panel in sorting out these cases.
Methods: SATB2, PAX8, CK7, CK20 and CDX2 immunostains were performed on 50 ovarian mucinous neoplasms (OMN) (39 cystadenomas, 4 borderline and 7 adenocarcinoma), 63 mucinous colorectal carcinoma (CRC) and 9 appendiceal mucinous neoplasms (AMN) (8 low grade appendiceal mucinous neoplasm and 1 adenocarcinoma). Stains were interpreted positive if > 5% of the tumor cells express the marker.
Results: PAX8 was positive in 32% of OMN and negative in all CRC and AMN cases.SATB2 was expressed in 2% of OMN, 77.8% of AMN and 49.2% of CRC cases. CK7 was positive in 78% of OMN, 33.3 % of AMN and 9.5% of CRC cases. CK20 was expressed in 24% of OMN, 88.9% of OMN and 87.3% of CRC cases. CDX2 was positive in 14% of OMN, 100% of AMN and 90.48% of CRC cases.
Conclusion: PAX8 is a specific marker (100%) in differentiating OMN from AMN and CRC but not a sensitive marker (32%). CDX2 is the most sensitive marker for CRC and AMN while SATB2 has better specificity.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13	Pathology of infectious diseases	Fernandes, Fabiola Couto Maputo Central Hospital Dept. of Pathology Maputo Mozambique	Poster	Matias, Lucília Carrilho, Carla
Abstract No. 005				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
High prevalence tuberculosis diagnosed during autopsy examination at Maputo Central Hospital in Mozambique

ABSTRACT TEXT

Objective: To determine the autopsy prevalence of TB and determine discrepancies between clinical diagnoses established as cause of death and final autopsy diagnoses of TB at Department of Pathology, Maputo Central Hospital.
Methods: Were conducted a retrospective analysis the medical records and protocols of the autopsies conducted in 2013. It was also analyzed the clinical-pathological concordance of the diagnosis of tuberculosis. Autopsy cause of death and contributing findings were based on the macro- and microscopic post-mortem findings combined with clinical information.
Results: Six hundred and fifty-three autopsies were performed during 2013, and tuberculosis was diagnosed in 121 cases (18.5%). The main age was 36 years (range of 2-80 years). HIV-tuberculosis co-infection was observed in 67 cases. The most frequent form of presentation of tuberculosis was the disseminated form, regardless of the HIV status. The clinic-pathological discrepancies in the diagnosis of tuberculosis was high (54.5%), meaning that more than half of the cases of tuberculosis were not diagnosed before death.
Conclusion: The results of the study demonstrate the importance of autopsy in the correct definition of the cause of death particularly in settings with limited access to diagnostic testing during life. TB/HIV co-infection rate in Mozambique is high. There is an elevated number of TB cases aren´t diagnosed during life. It is necessary to establish screening algorithms that include more sensitive diagnostic methods for the detection of HIV-tuberculosis earlier.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Husain, Nuzhat Dr. Ram Manohar Lohia Institute Dept. of Pathology Lucknow India	Poster	Mishra, Sridhar Kaif, Mohammad Neyaz, Azfar Shukla, Saumya
Abstract No. 005				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Analyses of circulating free DNA in patients with adult glioma: Correlation with IDH1, p53 and ATRX mutation status

ABSTRACT TEXT

Objective: Circulating free DNA (cfDNA) provides a non-invasive diagnostic tool to enable monitoring of tumour growth and response to treatment. Circulating biomarkers for gliomas are still being defined and are not yet in use in clinical practice. The current study was designed to assess cfDNA in Gliomas.
Methods: Study group comprised of 23 biopsy proven cases of adult gliomas and 15 healthy individuals. Serum cfDNA was quantified using quantitative polymerase chain reaction (PCR) by amplification β-globin gene. Performance of the assay was statistically assessed through receiver operating characteristic (ROC) curve. Histological typing and grade was defined as per WHO criteria. IHC for IDH132R , ATRX loss and p53 mutant type expression was analysed in all cases.
Results: Circulating free DNA levels was significantly lower in healthy controls (88.93±50.38 ng/ml) compared to cases with glioma (682.93±609.58 ng/ml, p=0.001). The cfDNA level was significantly associated with grade of glioma and with IDH1 mutant status of tumor (p=0.0001& 0.0001). Mean cfDNA level was higher in cases >45 years and in p53 positive cases. Area under curve in ROC analysis for glioma versus normal controls was 0.79 with sensitivity, specificity and diagnostic accuracy of 79.8%, 100.0% & 82.0% respectively.
Conclusion: Adult gliomas have significantly high cfDNA levels in sera. It appears that quantity of cfDNA from primary CNS tumours relates to the grade, IDH1 and p53 mutation status. cfDNA analysis could be investigated as a non-invasive tool for prognostication and in monitoring treatment response
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Gudi, Mihir KK Hospital DPLM Singapore Singapore	Poster	Author: Yeo, Yen Ching Loh, Shin Yee Tan, Sock Ling
Abstract No. 005				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Outcome of abnormal postpartum smears done in a women's hospital in Singapore

ABSTRACT TEXT

Objective: To assess the histological outcome of post-partum smears and justify delaying performing them to 3 months as opposed to 6 weeks as currently practised.
Methods: A total of 5529 postpartum smears were retrieved from the Laboratory information system between 2015 and 2016. We identified 258 smears with abnormal results ranging from atypical squamous cells of undetermined significance (ASCUS), low-grade squamous intraepithelial lesions (LSIL), atypical squamous cells cannot exclude HSIL (ASC-H), high-grade squamous intraepithelial lesions (HSIL) to atypical glandular cells of undetermined significance (AGUS). 160 of these cases had histological follow-up.
Results: Of 258 smears with abnormal results, there were 134 ASCUS cases, 78 LSIL cases, 16 ASC-H cases, 16 HSIL cases and 14 AGUS cases. 62% (160/258) of patients underwent histological evaluation - 55.2% (74/134) ASCUS, 61.5% (48/78) LSIL, 93.8% (14/15) ASC-H, 87.5% (14/16) HSIL and 64.3% (9/14) AGUS cases. The Positive predictive values (PPV) were lower but relatively acceptable in squamous lesions - LSIL (52.1%), ASC-H (53.3%) and HSIL (71.4%) when compared with KKH cytology department average PPV range for the general screened population. However, the PPV were low in AGUS (0%) and ASCUS (12.2%).
Conclusion: Whilst PPV are acceptable for squamous lesions, there is a tendency to overcall postpartum smears in ASCUS and AGUS smears as majority have no significant pathology on cervical biopsies. Physiological changes in pregnancy causes cervical/endometrial glands and stromal alterations, which are known diagnostic pitfalls in cytology. Therefore, our study suggests delaying performing postpartum smears to at least 3 months instead of at 6 weeks.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-22	Ocular pathology	Iyawe, Victoria Olabisi Onabanjo Teaching Hospital Dept. of Morbid Anatomy Ogun State Nigeria	Poster	Adeleke, Kikelomo
Abstract No. 005				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Histological spectrum of orbito-ocular lesions in Sagamu, Nigeria: A follow up study

ABSTRACT TEXT

Objective: To assess the trend and update data on the frequency and histologic pattern of eye lesions in our environment as follow-up to a previous study carried out between 2003 and 2012 in the department.
Methods: Paraffin blocks, slides and previous reports for the period of 2013-2017 were retrieved from the archives of the pathology department of the Olabisi Onabanjo University Teaching Hospital and reviewed by the authors. Frequency data on age, gender, site and histologic diagnosis were analyzed using SPSS 20 and comparison was made with the earlier mentioned study.
Results: In the study period, 25 cases of orbito-ocular specimen were seen and reported. The mean age for the patients whose biopsies were reviewed was 26.7years±22.5 with a range of 2 to 75years. There were 13(54.2%) females and 11(45.1%) males. Half (50%) of the specimen received were from the conjunctiva and retinoblastoma (6, 25.5%) was the most frequently diagnosed lesion. 8(33.8%) of the lesions were malignant and consists of retinoblastoma and squamous cell carcinoma. Some of the benign lesions were squamous papilloma (5, 20.8%), capillary haemangioma (3, 12.5%) and pterygium (3, 8.3%).
Conclusion: This study showed an overall reduction in the frequency of orbito-ocular lesions compared to findings in the earlier study this may be due in part to the prevailing economic situation and the reduced ability of patients to afford surgeries for non-life threatening conditions.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-11 Abstract No. 005 Date 15.10.2018 & 16.10.2018	Molecular pathology	Mariana, Aschie Ovidius University CEDMOG Center Constanta Romania	Poster	Mitroi, Anca Brinzan, Costel Cozaru, Georgeta

ABSTRACT TITLE:
Differentially expressed miRNAs in hepatocellular carcinomas

ABSTRACT TEXT

Objective: Hepatocellular carcinoma (HCC), the most common primary liver cancer, is the fifth most frequent cancer and the third cause of cancer-related mortality worldwide. Our study evaluate the expression of several microRNAs implies in the pathology of hepatocellular carcinomas.
Methods: Expression of microRNA panel was performed by real time PCR, on 50 cases of patients diagnosed with HCC. The microRNA was evaluated in comparation from tumoral and normal tissue. The expression of hsa-miR-21-5p, hsa-miR-30c-5p, hsa-miR-141-3p, hsa-miR-141-5p, hsa-miR-144-5p, hsa-miR-182-5p was evaluated.
Results: MiR-21, miR-30c and miR-182 was upregulated in HCC tissue. MiR-141and miR-144 was downregulated in HCC tissue. These findings are in concordance to other published studies. Upregulation of miR-21, miR-30c and miR-182 has been associated with metastasis, angiogenesis and poor prognosis. Downregulation of miR-141, miR-144 has been implicated in apoptosis.
Conclusion: Understanding the role of miRNAs in the biology of HCC can potentially provide advances and options for HCC treatment, and might be useful for HCC diagnosis. Future research is needed to address and extend the therapeutic potential of miRNAs in inhibiting the progression of HC
Acknowledgement: The research was supported by the project POS CCE 2.21., ID 1844, SMIS 48750, CEDMOG and HEPMARK EEA-JRP-RO-NO-2013-1-0363 project
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16 Abstract No. 005 Date 17.10.2018 & 18.10.2018	Endocrine pathology	Mokni, Moncef Tunisia	Poster	Mestiri, Sarra Yacoub, Sarra Belhaj khlifa, Aya Baccouch, Atika Mhiri, Marwa Ouédraogo, Aïda Sandrine Bouriga, Ayda

ABSRACT TITLE:
Diffuse sclerosing variant of papillary thyroid carcinoma: a rare variant with an agressive potential: A case report

ABSRACT TEXT

Objective: Diffuse sclerosing variant of papillary thyroid carcinoma is rare, accounting for 0.7-6.6% of thyroid papillary carcinomas. It is usually characterized by diffuse involvement of one or both thyroid lobes, without formation of a dominant mass. We report a rare case of a young patient diagnosed with diffuse sclerosing variant of papillary thyroid carcinoma (DSVPTC)
Methods: A 37-year old male presented with a cervical mass. The ultrasound was in favor of a lobar thyroid nodule associated to a cervical lymph node metastasis. The patient underwent thyroidectomy with cevical lymph nodes dissection
Results: On gross macroscopy, the right lobe appeared to be diffusely infiltrated by a multifocal tumor with a firm, pale appearance.
On microscopic examination, the whole right thyroid lobe was occupied by a diffuse carcinomatous proliferation with nuclear papillary features. In addition, squamous meta-plasia, numerous psammoma bodies, extensive interstitial fibrosis and heavy lymphocytic infiltration were noticed. Dissected lymph nodes show metastasis.
Conclusion: Compared to conventional papillary thyroid carcinoma, DSVPTC has more agressive course with higher incidence of lymph nodes metastasis and even distant metastasis at presentation. Its prognosis is usuallay less favourable than usual papillary carcinoma, but it appears to regain similar prognosis today due to agressive treatment protocols such as radical surgery and radiotherapy
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-20 Abstract No. 005 Date 17.10.2018 & 18.10.2018	Mediastinum and thymic pathology	Roh, Mee-Sook Dong-A University College of Medicine Dept. of Pathology Busan Republic of Korea	Poster	Ha, Seung Yeon

ABSRACT TITLE:
Prognostic value of grading in resected thymoma with emphasis on the relevance of the histologic subtying

ABSTRACT TEXT

Objective: More than 30% of thymomas show heterogenous histologic features composed of different subtypes. The diagnosis in such tumors should list all the histologic subtypes, starting with the most prominent component quantified in 10% increments. However, there is no evidence to suggest the biologic diversity of thymomas with histologic heterogeneity. This study was performed to determine whether specific histologic pattern or combinations carry prognostic significance in thymoma with heterogenous histologic subtypes.
Methods: The study included 96 patients who were underwent surgical resection for stage I thymoma. A 3-tier scoring based on the histologic subtype was established. Score 1, type A/AB, score II, type B1/B2, and score III, type B3. And then these scores were combined into two separate grading. The first was defined as the score of most predominant pattern (P-grade), and the second was defined as highest score (H-grade).
Results: Among 96 thymomas, 31 (32.3%) cases showed heterogenous histologic subtypes. A combination of B1 and B2 subtypes (40.6%) was the most common mixed pattern. Of the 31 patients, 2 (6.5%) had recurrence during follow-up. One was composed of B1 (70%) and B3 (30%) and the other, B2 (60%) and B3 (40%). These two tumors were consistent with grade II based on P-grade and grade III based on H-grade, respectively. Remaining patients showed no evidence of recurrence, in which no more than 30% of B3 component was included.
Conclusion: Unlike other histologic subtypes, even when the B3 type is present as more than 30%, recurrence occurs in these thymomas. Although our results show no definitive evidence of significance by grading in influencing prognosis, grading based on the most aggressive component (H-grade) could be linked to the biologic behavior. Further elucidation is needed to determine the clinical implication of grading of thymomas with heterogenous histologic subtypes.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-05 Abstract No. 005 Date 15.10.2018 & 16.10.2018	Education in pathology	Shimkina, Olga National Centre of Oncology Dept. of Pathology Bishkek Kyrgyzstan	Poster	

ABSRACT TITLE:
Pathology in Kyrgyzstan

ABSTRACT TEXT

Objective: Description the current state of pathology in Kyrgystan
Methods: Statistical data analysis, an interview, an own experiences
Results: The current state
Conclusion: To obtain certificate the pathologist studies within 8 years, and then 1 time in 5 years upgrades his/her skills. As flourishing of Pathology with use of immunohistochemical and molecular and genetic methods which are poorly presented in Kyrgyzstan is observed in the world, experts have no due level of knowledge of new diagnostics methods, and obtaining new knowledge is rather difficult.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Ahmed Mohamed Abdelhamid Hasan Suez Canal University Faculty of Medicine Ismailia Egypt	Poster	Jackson, Peter Preston, Shaun Hewish, Madeleine Bagwan, Izhar
Abstract No. 006				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Sarcomatoid carcinoma arising in a gastric duplication cyst: A case report

ABSTRACT TEXT

Objective: Gastric duplication cysts (GDCs) are uncommon congenital anomalies mostly diagnosed in the paediatric age group and infrequently after the age of 12 years. They are most frequently encountered in the ileum (35%), stomach (9%), whilst the rest are distributed along the GI tract. Patients are usually asymptomatic, with a minority of cases presenting with abdominal pain, symptoms of gastric outlet obstruction or a palpable abdominal mass. Rarely, a neoplastic change occurs within GDCs, with only 10 documented cases in the literature to date.
Methods: Here we report a case of sarcomatoid carcinoma arising in a GDC
Results: A 70 years old lady presented with vague post-prandial abdominal discomfort. CT scan showed a cyst in the supra-umbilical region, likely arising from the stomach, and abutting the pancreas, suggestive of a gastric duplication cyst.
After a laparoscopic sleeve gastric resection, macroscopically a cystic mass with intact serosal covering with an overlying slightly raised intact gastric mucosa. Histopathological examination confirmed a sarcomatoid carcinoma arising in a gastric duplication cyst. Three months post-operatively, multiple liver metastases were discovered; and after a single cycle of chemotherapy, she was pronounced dead.
Conclusion: Whilst GDCs are uncommon and are almost always benign lesions, there have been a few reports of neoplastic transformation, most notably to adenocarcinoma. To our knowledge, this is the first case of sarcomatoid carcinoma arising in a gastric duplication cyst.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Alorjani, Mohammed King Abdullah University Hospital School of Medicine Irbid Jordan	Poster	Ababneh, Emad Salem, Abdulrahman Obeidat, Nail
Abstract No. 006				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
IgG4-Related disease of the ovary: A case report of a rare and ill-defined entity

ABSTRACT TEXT

Objective: IgG4 related disease is a systemic autoimmune disease that was first proposed as a defined entity by Kamisawa et al. after studies on a subset of patients with autoimmune pancreatitis (AIP), and thereafter was reported in many other organs. Multiple consensus groups were held to reach a statement regarding the diagnostic criteria for this disease, all of them agreed that the main histopathologic characteristics are a lymphoplasmacytic infiltrate with variable degrees of fibrosis and plasma cells expressing IgG4 in the most part. Involvement of the ovary by this disease is not yet well defined. Up to the best of our knowledge, only two cases are reported in the literature, a fact that makes developing a standard diagnostic criterion for this organ a tough quest.
Methods: In this case, we report a 47-year-old lady, known to have primary infertility, who presented with a complex right ovarian cyst that was suspicious for malignancy and underwent hysterectomy with unilateral salpingo-oophorectomy.
Results: Her serum IgG4 was 330 mg/dL and histological examination of the ovarian tissue revealed a lymphoplasmacytic infiltrate with abundant eosinophils and areas showing phlebitis and fibrosis. Most of the plasma cells in the infiltrate are expressing IgG4 (approximately 70% of the total number of IgG-expressing plasma cells).
Conclusion: Cumulative findings from our case along with the already reported rare cases may work as a framework toward building more objective criteria to define this entity in the ovary similar to what have been achieved in some other organs.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Altalaq, Sukaina King Fahad Specialist Hospital Dammam Saudi Arabia	Poster	Amr, Samir
Abstract No. 015				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Mediastinal malignant peripheral nerve sheath tumor following Hodgkin lymphoma in a patient with neurofibromatosis type 1

ABSTRACT TEXT

Objective: Neurofibromatosis type 1 (NF-1) is a common genetic disorder known to increase the risk of malignancies. However, the occurrence of Hodgkin lymphoma in this population is extremely rare. Herein we report a case of Hodgkin lymphoma in a girl with NF-1 who developed a malignant peripheral nerve sheath tumor (MPNST) following treatment of lymphoma.
Methods: A case of MPNST following treatment for Hodgkin lymphoma in a patient with NF-1 is discussed from clinical and pathological point of view with emphases on the pathogenesis as well as review of relevant literature.
Results: 16-year-old girl with NF-1, previously treated for Hodgkin lymphoma using a combination of chemotherapy and radiotherapy, presented with a mediastinal mass. Radiological evaluation revealed a 7.3 x 5 cm anterior superior mediastinum mass. Biopsy showed a spindle cell neoplasm consistent with a MPNST. Despite surgical excision and aggressive treatment using chemotherapy (Adriamycin and ifosfamide) followed by radiotherapy, she rapidly developed recurrence with multiple distant metastases afterward and died 3 years after her initial diagnosis with MPNST.
Conclusion: MPNST is an aggressive soft tissue sarcoma arising from peripheral nerves. It can occur sporadically, in association with NF-1 or rarely following radiotherapy. Our patient has a unique initial presentation of Hodgkin lymphoma in a background of NF-1. Such association had been reported only twice in the literature. In both cases no subsequent development of MPNST was documented, thus making our case a unique one. We are postulating that this patient had a "double hit" due to combination of radiotherapy for Hodgkin lymphoma, and NF1 gene mutation resulting in the development of mediastinal MPNST.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Asgari, Mojgan Oncopathological Research Center University of Tehran Tehran, Iran	Poster	Saeednejad Zanjani, Leili Abolhasani, Maryam Rasti, Arezoo Madjd, Zahra
Abstract No. 015				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Human telomerase reverse transcriptase protein expression predicts tumor aggressiveness and survival in patients with clear cell renal cell carcinoma

ABSTRACT TEXT

Objective: Human telomerase reverse transcriptase (hTERT) is an active component of telomerase and responsible for its catalytic activity, associated with cell proliferation and differentiation. The present study was conducted to evaluate the expression and prognostic significance of hTERT in different histological subtypes of renal cell carcinoma (RCC).
Methods: Expression of hTERT was examined in 176 well-defined renal tumor samples including 113 (64.2%) clear cell RCCs (ccRCCs), 32 (18.2%) type I and II papillary RCCs, and 31 (17.6%) chromophobe RCCs using immunohistochemistry on tissue microarrays. The association between hTERT expression and clinicopathologic parameters as well as survival outcomes were then analyzed.
Results: There was a statistically significant difference in terms of hTERT expression among various RCC subtypes. In ccRCC, increased expression of hTERT was significantly associated with advanced stage, higher grade, presence of microvascular invasion (MVI), lymph node invasion (LNI), and metastasis. Moreover, in the multivariate analysis, tumor stage and tumor size were independent predictors of the disease-specific survival (DSS). Additionally, expression of hTERT was found to be a significant predictor of worse DSS (P = 0.012) in the univariate analysis but not in the multivariate analysis in ccRCC cases. In papillary carcinoma samples (type I and II), significant association was detected between hTERT expression and the tumor stage (P=0.010, P=0.050, respectively). Also, in type II papillary RCC, a significant association was observed between expression of hTERT and distant metastasis (P=0.035), however, there was no association between hTERT expression and patients' survival outcomes. In chromophobe RCC, no significant association was detected between expression of hTERT and clinicopathological parameters and survival data.
Conclusion: We showed that hTERT protein expression was associated with more aggressive tumor behavior and more advanced disease in ccRCC patients. Also, hTERT may be a novel poor prognostic indicator of DSS, if the patients are followed for more prolonged time periods.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 006 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Bdioui Thabet, Ahlem Farhat Hached Hospital Sousse Tunisia	Poster	Bouriga, Ayda Baccouch, Atika Yacoub, Sarra Belhaj khlifa, Aya Mhiri, Marwa Ouédraogo, Aïda Sandrine Mokni, Moncef

ABSRACT TITLE:

Solid pseudopapillary neoplasm of the pancreas: pathological and imaging correlation about 5 cases

ABSTRACT TEXT

Objective: Solid pseudopapillary neoplasms of the pancreas (SPNP) are rare pancreatic tumors with a low potential for malignancy, accounting for 0.17-2.7% of all pancreatic tumors. Tumor has typical histological features including cystic, solid, and pseudopapillary structures.
In this study, we reviewed the main pathological findings in 5 cases of SPN, with correlation to their clinical and imaging features.
Methods: Our study was retrospective, including 5 cases of SNPN, diagnosed in our department of pathology. Study included detailed clinicopathological, treatment and outcome data of patients with SPNP diagnosis who underwent surgical treatment from January 2010 to November 2016.
Results: 5 patients: 4 females and 1 male, with median age of 48.5 years presented with right hypochondrium pain. Clinically none of the patients has jaundice or family history of pancreatic neoplasm or pancreatitis. Ultrasound was performed in 4 cases, showing a well limited pancreatic mass, encapsulated in 2 cases. CT scan was performed in all cases, and showed a well limited mass with variable size between 4 and 17 cm. A peripheral capsule was seen in 4 cases. The lesion was essentially made of two components; tissu component always enhanced after injection, and a constant liquid component. None of the patients had hepatic or lymph nodes metastases. MRI confirmed pancreatic origin and eliminated communication with the pancreatic duct.
All 5 patients underwent curative surgery. On microscopy, there were sheets of tumor cells interspersed with pseudopapillae around fibrovascular cores in varying proportions, forming a solid-pseudopapillary pattern. Mitotic figures were rare. Extensive dystrophic calcification was detected in 1 case, visualized as coarse calcification on imaging. No lymphovascular or perineural invasion was seen in any of the cases.
Conclusion: SPNP are rare tumors with good prognosis, which should be evoked at imaging with well-demarcated, large size tumor, showing heterogenous content. Diagnosis is confirmed based on pathological exam.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 006 Date 17.10.2018 & 18.10.2018	Dermatopathology	Ben Abdeljelil, Nouha Fattouma Bourguiba Hospital Monastir Tunisia	Poster	Njim, Leila Chouchane, Sarah Chouchane, Sarah Njima, Manel Ben Khalifa, Sarra Hadhri, Rim Zakhama, Abdelfateh

ABSRACT TITLE:

Subcutaneous human dirofilariasis due to dirofilaria repens: An emerging zoonosis, a report of two cases

ABSTRACT TEXT

Objective: Human subcutaneous dirofilariasis (HSD) is a rare zoonotic filarial infection caused by filarial worms of the genus Dirofilaria. It is considered as an emerging zoonosis due to the rise of this infection in several regions of the world. We hereby report two cases of HSD as very few cases of subcutaneous dirofilaria have been reported in Tunisia and most of the documented cases being dirofilaria in ocular infections.
Methods: This is a retrospective study about two cases of HSD diagnosed in our department of Pathology in the university Hospital of Monastir.
Results: The first patient was a 17 year-old female with no medical history. She presented with a nodule over the upper portion of her right hip for past 2 months. On examination the nodule measured less than 1 cm and was soft to firm in consistency. The second patient is a 36 year old male with history of digestive anguillulosis. He presented with a sudden onset of painful right chest-wall nodule with three months of evolution. On examination, the nodule measured 2 cm. Both patients had complete excision of the nodules. Grossly, the tissue was gray white and granular with necrotic areas.
In both cases, hematoxylin and eosin stained sections showed cross-sections of a nematode, surrounded by an inflammatory granulation tissue composed of eosinophils, lymphocytes, and occasional foreign body giant cells. An outer surface of the nematode showed cuticle with fine transverse striations and prominent longitudinal ridges. The worm was identified as an adult, female Dirofilaria repens.
Conclusion: zoonotic filarial infections will certainly continue to be reported in new geographical areas and in different human sites. Clinicians, pathologists, and parasitologists should have an increased awareness of this entity and the possibility of its presentation in unusual sites.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 006 Date 15.10.2018 & 16.10.2018	Breast pathology	Ben Hadj Khalifa, Eya Farhat Hached University Hospital Dept. of Pathology Sousse Tunisia	Poster	Mokni, Moncef Mestiri, Sarra Yacoub, Sarra Mhiri, Marwa Bouriga, Ayda Ouédraogo, Aida Sandrine

ABSTRACT TITLE:

Intracystic papillary carcinoma of the breast: About 2 cases

ABSTRACT TEXT

Objective: Intracystic papillary carcinoma (ICPC) is a rare malignant breast tumor, accounting for 0.5% to 1% of all mammary carcinomas. It usually occurs in postmenopausal women. It is often developed in the retroareolar region and is characterized by slow growth and a good prognosis compared to ductal carcinomas. It is classified us the encapsulated form of invasive papillary carcinoma and it is, morphologically, hardly distinguishable from the papillary carcinoma in situ. Immunohistochemistry is thus useful to differentiate between the two diagnoses.
Methods: We report 2 cases of ICPC of the breast in two women to show morphological and immunohistochemical characteristics of this tumor.
Results: 2 women aged of 48 and 65 years had consulted for a breast nodule of respectively the inner superior quadrant and the external inferior quadrant that were mobile, indolent. The microbiopsy concluded to a papillary malignant proliferation in the two cases. The surgical treatment consisted for the first patient in a lumpectomy with sentinel lymphadenectomy whereas for the second one in a mastectomy with axillary lymph node dissection. The histologic examination showed a tumoral proliferation of papillary architecture well circumscribed by a fibrous capsule. The buds were lined by relatively monotonous, slightly atypical cells with minimal mitotic activity. The myoepithelial cell layer was searched for by the expression of p63 which came back negative. There was no lymph node metastasis in both cases. The hormone-receptors were positive and there was no overexpression of HER 2 Neu in both cases. The Ki 67 was 10 and 20%.
Conclusion: The ICPC is a rare tumor that has an excellent prognosis with a 5-year survival rate greater than 95%. However, it is imperative to look for a frequently associated non-specific infiltrative component that reduces the prognosis to that of non-specific infiltrative carcinoma. It is also important to differentiate, on the biopsy, between this encapsulated variant of invasive papillary carcinoma and the papillary carcinoma in situ to save the patient from unnecessary axillary dissection in the latter situation.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19 Abstract No. 006 Date 17.10.2018 & 18.10.2018	Hematopathology	Bruce-Brand, Cassandra NHLS Dept. of Anatomical Cape Town South Africa	Poster	Rigby, Jonathan

ABSRACT TITLE:

Intravascular primary effusion lymphoma occurring within a cutaneous kaposi sarcoma lesion in a human immunodeficiency virus positive adult

ABSTRACT TEXT

Objective: Introduction:
Primary Effusion Lymphoma (PEL) is a rare, clinically aggressive large B-cell neoplasm universally associated with human herpesvirus 8 (HHV8) that occurs in the setting of immune compromise. It is classically described as a lymphomatous effusion occurring within body cavities. Recently however, solid tumour masses and rarely an intravascular form, have been described.
Methods: Case Report:
We report a case of an intravascular primary effusion lymphoma occurring within ectatic vascular structures of a cutaneous Kaposi sarcoma lesion in a Human Immunodeficiency Virus (HIV) positive adult. Microscopy of violaceous lesions from the thigh showed a dermal lesion typical of Kaposi sarcoma with atypical plasmablastic cells observed within vascular spaces. HHV8 immunohistochemistry was positive in the nuclei of the Kaposi sarcoma cells as well as the intravascular plasmablastic cells. The atypical plasmablastic cells were also positive for CD45, Epstein Barr Virus encoded small RNA by In situ hybridisation (EBER-ISH) and MUM1 but were negative for CD20.
Results: Discussion:
An intravascular form of PEL is exceptionally rare with only three published cases found in the English literature. The differential diagnosis includes other intravascular lymphomas which can be distinguished from PEL by its unique immunohistochemical profile. PEL cells usually express CD45 with lack of expression of pan-B-cell markers. Plasma cell related markers are variably positive. Positive nuclear staining for HHV8-associated latent protein LANA1 is universally present and positivity for EBV-encoded small RNA by EBER-ISH is usually demonstrated.
Conclusion: Conclusion:
This unusual case highlights the importance of a careful search for dual pathology in immune compromised patients as well as the importance of histologic assessment of skin lesions in HIV positive patients. A high index of suspicion is required when atypical cells are observed within effusions, solid lesions and intravascular spaces in the setting of HIV in order to avoid misdiagnosis of this clinically aggressive lymphoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	José Manuel Clinical University Hospital Santiago de Compostela Spain	Poster	Cameselle-Teijeiro, Aliyev, Elvin Ladra-González, Mª Jesús Piso-Neira, Magalí Abdulkader, Ihab Gude, Francisco Barreiro, Francisco Álvarez, Clara
Abstract No. 006				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Papillary thyroid microcarcinoma: validation of the Porto proposal, expression of hormone receptors and BRAF gene mutations.

ABSTRACT TEXT

Objective: Papillary microcarcinoma (PmC) of the thyroid is a tumor that is 1 cm or less is size with an excellent prognosis. Due to this positive outcome the name papillary microtumor (PmT) has been proposed (Porto proposal) for the group of PmCs without pathological features of aggressiveness. We study the clinicopathological features of a series of PmCs to confirm the validity of the Porto proposal.
Methods: Clinical and histological revisions were made of a group of 190 patients with mC. Immunohistochemical studies for estrogen receptors alpha (ERa) and beta (ERb), progesterone receptors (PR) and androgen receptors (AR) were carried out from formalin fixed, paraffin-embedded tissue sections. Mutational BRAF gene studies were also made by RT-PCR after laser microdissection.
Results: According to the Porto proposal criteria, 102(53.7%) cases were classified as PmT, and 88(46.3%) as PmC-not-PmT. In the PmT group the mean age was 50.8y (range 22-80) with 84.3% females, while in the PmC-not-PmT group the mean age was 48.6y (18-76) with 76.1% females. Total thyroidectomy, lobectomy and 131I radioiodine therapy had been carried out in 63.7%, 36.3% and 6.9% of patients with PmT, respectively, in comparison with 97.7%, 2.3% and 85.2% of patients with PmC-not-PmT. Lymph node metastases (15.9%), distant metastases (3.4%) and mortality (1.1%) associated with the tumor were only detected in the PmC-not-PmT group. Positivity for ERa, ERb, PR and AR was found in 40%, 28.9%, 53.8% and 51.1% of the PmC, respectively, with no significant differences between the PmT and PmC-not-PmT groups. BRAF gene mutations were detected in 44.7% of mC without any significant differences between the PmT (45.5%) and PmC-not-PmT (43.7%) groups.
Conclusion: Our results indicate that the PmT designation is a safe terminology supporting the use of the Porto proposal criteria in practical daily pathological diagnosis. Immunopositivity for hormone receptors suggests a role in PmC tumorigenesis. Grant PI15/01501-FEDER, ISCIII.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Elaiwy, Orwa Hamad Medical Corporation Doha Qatar	Poster	Petkar, Mahir
Abstract No. 006				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

A case of ceruminous adenoid cystic carcinoma of the external auditory canal

ABSTRACT TEXT

Objective: Ceruminous adenoid cystic carcinoma is a rare malignant tumor arising from the ceruminous glands of the external auditory canal. They are known to recur and therefore, wide radical resection is usually recommended.
Methods: We herein report a case of ceruminous adenoid cystic carcinoma arising in a 27 year old male, who initially presented with left ear pain. Radiology revealed a 10x7mm mass in the external auditory canal.
Results: The mass was excised with wide margins and histology confirmed features of ceruminous adenoid cystic carcinoma.
Conclusion: Ceruminous adenoid cystic carcinomas need radical resection to avoid recurrences.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13	Pathology of infectious diseases	Garba Dahiru, Waziri Ahmadu Bello University Dept of Pathology Teaching Hospital Zaria Nigeria	Poster	Eneyamire Suleiman, Dauda Muhammad Balarabe, Aminu A. Edaigbini, Sunday O. A. Samaila, Modupeola
Abstract No. 006				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Pulmonary Aspergilloma coexisting with breast cancer in a known tuberculous female patient

ABSTRACT TEXT

Objective: Aspergilloma is a form of chronic pulmonary aspergillosis (CPA) that commonly occurs either in a scarred lung or in a pre-existing lung cavity. It mainly affects people with underlying cavitary lung disease such as tuberculosis and bronchiectasis. Deficiency of surfactant A2 and toll-like receptor 4 has been shown to alter innate immune function in some patients with aspergillosis. We present a case of post-tuberculous pulmonary aspergilloma co-existing with breast cancer in an adult female.
Methods: A 42-year old woman, 12-years post-diagnosis of sputum smear positive tuberculosis and who was recently diagnosed with breast cancer presented with recurrent cough and haemoptysis. Tests for PTB using sputum-AFB and Xpert-RIF assay were negative. Chest-Xray revealed homogenous opacity containing a thick-walled cavitary lesion in the right upper lung zone with an opacity within it suggestive of a fungal ball. She had right upper lung lobectomy which showed a circumscribed 6x5.5cm nodule around its apex; cut section of the nodule show a large cavity containing soft, brownish, semisolid masses surrounded by a thick fibrous wall. Histology of the cavitary contents showed large ball-like aggregates of fungal hyphae with morphology consistent with Aspergillus species.
Results: The index case demonstrates the assertion that pulmonary aspergillomas occur as a sequel to cavitating PTB. The location of the lesion close to the apex of the upper lobe of the lung closely mirrors the classic location of tuberculous cavities and strengthens the assertion that the disease is likely a post-tuberculous process. The co-existence, in this case, of post-tuberculous aspergilloma and breast cancer raises questions as to the role played by immunosuppressive effects of breast cancer in the development and/or severity of this disease. It has been shown that p43, a breast cancer-associated gene, has immunosuppressive properties. However, the specific role of breast cancer in the development and/or severity of aspergilloma is open to further studies.
Conclusion: Post-tuberculous aspergilloma remains an important cause of morbidity in patients treated for tuberculosis.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Gudi, Mihir KK Hospital DPLM Singapore Singapore	Poster	Yeo, Yen Ching Leong, May Ying Merchant, Khurshid
Abstract No. 006				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

A case study of gastric type adenocarcinoma in-situ of the uterine cervix

ABSTRACT TEXT

Objective: Illustrate the histo-cytological features and interpretative challenges associated with diagnosing the premalignant lesion Atypical Lobular Endocervical Glandular hyperplasia (ALEGH)/gastric-type adenocarcinoma in-situ (AIS).
Methods: A fifty-eight-year old asymptomatic woman presented for routine pap smear in early 2016. Her pap smear was reported as Atypical Glandular cells (AGUS) and Atypical squamous cells of undetermined significance (ASCUS). Following this, an endometrial sampling was done which was reported as scanty endocervical and endometrial epithelium . She was followed up with another Pap smear and HPV testing in 6 months. High risk HPV was not detected and the follow up pap smear was reported as Atypical endocervical cells, cannot exclude neoplasia. Acting on this report, a loop electrosurgical excision procedure (LEEP) was performed and eventually a total hysterectomy procedure was done.

Results: The LEEP specimen showed a mixture of normal endocervical glands and abnormal, occasionally dilated, endocervical glands. These abnormal glands were lined by cells with foamy clear cytoplasm that had a mild degree of nuclear atypia. Occasional mitotic figures and apoptotic bodies were seen. Occasional goblet cells were also present. On morphology and further IHC (Immunohistochemistry) stains a diagnosis of Gastric type AIS was rendered.
Conclusion: Although gastric type AIS is a rare and uncommon; it is crucial for cytotechnologists, cytopathologists and histopathologists to be familiar with the cytological and histological features of this subtype of AIS, since these lesions might not be as rare as previously thought and become more prevalent in the HPV vaccination era.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10	Immunohistochemistry	Hernowo, Bethy S Hasan Sadikin Hospital Bandung Bandung Indonesia	Poster	agustina, hasrayati puspita, desi
Abstract No. 006				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

PERIPHERAL T-CELL LYMPHOMA, NOS WITH MEDIASTINAL INVOLVEMENT, A RARE CASE

ABSTRACT TEXT

Objective: The aim of this study was to report Peripheral T-cell lymphoma, NOS (PTCL, NOS) in a 36 years old male who was hospitalized with severe dyspnea, chest pain and weight loss. On physical examination, present cervical lymphadenopathy, heavy pleural effusion in left lung and mediastinal mass. Patient underwent trans thoracal needle biopsy and pleural liquid cytology examination. The result were negative for malignancy. And continued by open biopsy of cervical lymphadenopathy.
Methods: In this case report we perform Hematoxillin eosin (HE) examination and followed by immunohistochemistry. We perform T cells markers (CD3, CD7), B cells markers (CD20,CD79a,PAX5), TdT, CD34, CD99, CD1a, CD10, CD30, granzyme, CD4, CD8, and Ki67.
Results: This case showed expressions on CD7 and high expressions on Ki67 (>80%). And lack expressions on CD3,CD4, B cells markers (CD20,CD79a,PAX5) TdT, CD34, CD99, CD1a, CD10, CD30, granzyme, and CD8. Based on immunohistochemistry finding the diagnose was PTCL,NOS.
Conclusion: In this case report, we describe a case of PTCL,NOS that was came with mediastinal mass symptoms. In immunohistochemistry finding we found not all of T cells markers were positive in PTCL. The lymphoma cells only positive for CD7, lack expressions on mature NK or T cell lymphoma antigens. Proliferation is usually high with Ki67 index >70%.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Ilievski, Boro Faculty of Medicine Institute of Pathology Skopje Macedonia	Poster	Zdravkovski, Pance Lazareska, Menka Shuntov, Blagoj Capareski, Aleksandar
Abstract No. 006				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Mixed ganglioglioma and cavernous angioma in the temporal lobe - case report

ABSTRACT TEXT

Objective: Gangliogliomas are rare CNS tumors defined by the presence of both neoplastic ganglion and glial cells. They are recognized by the WHO classification mostly as Grade I, although some examples showing atypia have been observed, originating from the glial component. They occur mostly in the pediatric population and young adults. Association of ganglioglioma with cavernoma is extremely rare and it could be considered as an angioganglioglioma. We present a case of synchronous ganglioglioma and cavernous angioma in 57-year-old-man with epilepsy.
Methods: The patient was admitted to the Department of Neurosurgery with a left side paresis, somnolent and vomiting. He acknowledges the presence of vascular mass discovered more than 30 years ago, when he got the first seizure and denied operation. CT and MRI showed an increased lesion with recent bleeding at right temporal lobe followed by edema. Craniotomy disclosed a hemorrhagic poorly demarcated tumor which was partially removed. Grossly, the tumor tissue had solid consistency and dark brown color. Standard procedure of paraffin embedded section routinely stained with H&E was performed.
Results: Histological examination revealed cavernous angioma with low grade gangliglioma located at the periphery of the angioma. The vascular component was admixed and observed in some regions of the gangliglial mass, presenting with hyalinized ectatic vascular channels, perivascular hemosiderin deposits, gliosis and vascular calcifications. Glial cells were identified by immunopositivity for GFAP, ganglion cells for Synaptophysin and Chromogranin, cavernous vessels for SMA and CD34. The proliferative index for Ki-67 was lower than 1%.
Conclusion: We present an extremely rare case of mixed ganglioglioma and cavernous angioma. The term "angioganglioglioma" was proposed to define a transitional form between angioglioma and ganglioglioma. Several other cases of mixed tumor and vascular malformation have been described in the literature. Further, it may constitute a new distinct clinicopathological entity with neoplastic and hamartomatous features.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	Jukovic-Bihorac, Fatima Cantonal Hospital Zenica Bosnia and Herzegovina	Poster	Udovicic-Gagula, Dalma
Abstract No. 006				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Prune belly syndrome, rare congential anomaly: A case report

ABSTRACT TEXT

Objective: Prune belly syndrome, also referred to as abdominal muscle deficiency syndrome, Eagle-Barrett syndrome, is a congenital disorder of the urinary system, characterized by a triad of symptoms: poor development of the abdominal muscles, causing the skin of the belly area to wrinkle like a prune, undescended testicles and urinary tract problems.
Methods: A 28 years old pregnant woman went on her routine pregnancy ultrasound exam which showed dilated urinary bladder of the fetus and multicystic kidneys, highly suspicious of Prune Belly syndrome. All standard prenatal tests were performed and results were normal.
Results: Medically indicated termination of pregnancy was done at 20 weeks of gestation. Autopsy was performed and showed: lack of abdominal muscles, intestines pushed aside by enlarged urinary bladder, dilated ureters, undescended testicles, bilateral hydroureteronephrosis, wich confirmed Prune Belly syndrome.
Conclusion: Prune belly syndrome is a rare, genetic birth defect affecting about 1 in 40,000 births. About 97% of those affected are male. Prune belly syndrome can be diagnosed via ultrasound while a child is still in-utero. With proper treatment, however, a longer, healthier life is possible.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Kalebi, Ahmed Lancet Kenya Nairobi Kenya	Poster	
Abstract No. 006				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Lung cancers seen at a referral laboratory in Kenya: Demographic and pathological characteristics

ABSTRACT TEXT

Objective: Lung cancer is a leading cause of cancer deaths worldwide. Epidemiological modeling indicate that the incidence of lung cancer in Africa should be on the rise, but unfortunately there is a a dearth of data on this important cancer from African countries where the burden of lung cancer remains underreported. Pathology data on lung cancer in Kenya remains sparse with the only data published over 1/4 of a century ago.

We seek to share data from a referral laboratory in Nairobi that serves various public and private hospital patients over a 7 year period including demographic summary data and histopathological characteristics.
Methods: All cases of lung cancer diagnosed at Pathologists Lancet Kenya 2011-2017 were retrieved retrospectively from the laboratory information system and anonymized then information from the pathology reports were analyzed.

Results: A total of 209 cases of lung cancer were confirmed, the majority being core biopsies (72%). Adenocarcinoma was the commonest histological types at 61% followed by squamous cell carcinoma at 27%. History of smoking where availed revealed 67% of the lung cancer patients to be smokers with most smokers being men. The average age of the patients at diagnosis was 58 years. EGFR and KRAS studies are still rarely requested.
Conclusion: From the series seen at this referral laboratory in Kenya, adenocarcinoma is the most frequent histological type of lung cancer. There is a need for detailed histopathological and molecular characterization of lung cancers in Kenya and other African countries to inform a better epidemiological understanding of this cancer which is projected to be on the rise but remains underestimated and under-recognized in countries that rank low in the development index.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-11	Molecular pathology	Mehrazma, Mitra Iran University of Medical Sciences Pathology Department Tehran Islamic Republic of Iran	Poster	Madjd, Zahra Rasti, Arezoo Abolhasani, Maryam Asgari, Mojgan Saeed Nejad Zanjani, Leili
Abstract No. 006				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Nuclear expression of OCT4, a stem cell transcription factor is associated with tumor aggressiveness in renal cell carcinomas and is an independent prognostic factor for worse progression free survival in clear cell renal cell carcinoma

ABSTRACT TEXT

Objective: OCT4 is one of the key embryonic stem cell (ESCs) transcription factors and is involved in the regulation and maintenance of pluripotency. It is among the most useful stem cell markers for cancer stem cell (CSC) identification which represent a population with tumour-initiating, self-renewal, and differentiation potential. This study aimed to evaluate the expression patterns and clinical significance of OCT4 as a stem cell transcription factor in renal cell carcinoma (RCC).

Methods: The nuclear and cytoplasmic expression of OCT4 was examined in 237 well-defined renal tumor tissues, including 162 (68.4 %) clear cell renal cell carcinomas (ccRCC), 41(17.3%) papillary renal cell carcinomas (pRCC) and 34 (14.3%) chromophobe renal cell carcinomas (ChRCC), by immunohistochemistry on a tissue microarray(TMA). The association between expression of this marker and clinicopathologic parameters as well as disease specific (DSS) and progression free survival (PFS) were then analyzed.

Results: OCT4 was observed mainly localized to the nucleous of tumor cells (97.9%). Nuclear OCT4 expression were positively correlated with higher stage and worse PFS in RCC (P values respectively 0.049 and P=0.002) and also worse PFS in ccRCC (P=0.047). According to the Cox regressions, OCT4 nuclear expression was the only risk factor of PFS in patients with ccRCC (P=0.008). Statistically significant difference between the cytoplasmic expression of OCT4 in the different RCC subtypes was observed (P <0.001).There was positive correlations between cytoplasmic expression of OCT4 and higher grade tumors (P<0.001), microvascular invasion (P=0.001) and shorter DSS (P=0.047) in patients with ccRCC.

Conclusion: Both nuclear and cytoplasmic expression levels of OCT4 are associated with tumor progression in RCC samples. Moreover nuclear expression of Oct4 is positively correlated with worse PFS and also is an independent prognostic factor in ccRCC as the most prevalent RCC due to its more aggressive tumor behavior. These findings suggest that nuclear expression of OCT4 rather than its cytoplasmic expression can be considered as a prognostic and therapeutic marker for targeted therapy of RCC especially for ccRCC patients.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-22	Ocular pathology	Ndayisaba, Claire Marie MUHAS Dept. of Pathology Dar-es-Salaam Tanzania	Poster	Mukamana, Felicite Sanyiwa, Anna Ruhangaza, Deo Moshi, Emmanuel
Abstract No. 006				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Orbital teratoma: Report of two cases from Muhimbili National Hospital, Tanzania

ABSTRACT TEXT

Objective: Clinicopathological description of two cases of orbital teratoma diagnosed at the Muhimbili National Hospital Tanzania.

Methods: A retrospective review was conducted. Cases were obtained from the Pathology archives at the Muhimbili National Hospital, Dar es Salaam, Tanzania. Cases with definitive diagnosis were included. Age, gender, clinical presentation were recorded for both cases. Histopathological diagnosis was confirmed by reviewing hematoxylin and eosin (H&E) sections, showing characteristics of teratoma.

Results: Two cases of orbital teratoma were identified. A 4-month-old female presented with a large left swelling on the face attached to the cornea. The tumor was excised. Histopathology finds mature tissues: intestinal epithelium, skin with appendages, cartilage, fibrous and adipose tissue. At one year postoperative, the patient presented with anterior staphyloma and cosmetic concern. Evisceration was performed, orbital implant temporally was placed and a prosthetic eye is planned later after healing. The other patient was 12-year-old female and presented with right eye swelling, leukocoria, and proptosis. Exenteration was done with a clinical diagnosis of retinoblastoma. Histopathology finds undifferentiated neuroectoderm tissue, cartilage, bone, colonic epithelium, and skin. The clinicopathological findings were of mature and immature teratoma respectively.

Conclusion: Orbital teratomas are an unusual cause of leukocoria and proptosis in children. Though potential cure with visual preservation can be achieved, the late presentation is associated with poor cosmetic and overall outcome.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-12	Nephropathology	Said, Samar Mayo Clinic Lab Medicine and Pathology Rochester USA	Poster	Fidler, Mary Nasr, Samih
Abstract No. 006				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

The clinicopathologic characteristics of renal intratubular cytoplasmic AL Amyloidosis

ABSTRACT TEXT

Objective: Intratubular cytoplasmic AL amyloidosis (IC-AL) is exceedingly rare and its clinicopathologic characteristics have not been defined. Here we report 5 cases of IC-AL.

Methods: We identified 5 cases of IC-AL by a retrospective review of our pathology archives from 2006-2017 (accounted for 0.003% of our renal amyloidosis cases).

Results: The intracytoplasmic inclusions appeared as silver-positive spicules and were positive with congo red (CR). Ultrastructurally, they appeared as intracytoplasmic membrane-bound fibrillar inclusions with spicules at the periphery, and more commonly in distal than proximal tubular cells. Concurrent amyloidogenic myeloma cast nephropathy (MCN) was present in all cases. No case showed glomerular involvement, but involvement of rare arteries or tubular basement membrane was seen in 2 cases. All cases exhibited λ restriction on immunofluorescence. Diffuse acute tubular injury, mild to moderate IFTA, and diffuse interstitial inflammation were present in all cases.

The cohort was 3 M and 2 F, all whites, with a median age of 62 yrs. All had multiple myeloma diagnosed concurrently with IC-AL with a median of 60% λ-restricted plasma cells in bone marrow. 1 pt had amyloid in joints and GI tract, whereas 4 had no extrarenal organ involvement. Anemia, lytic bone lesions, and hypercalcemia were present in 100%, 40%, 25% of pts. The serum M-protein was IgAλ in 3, IgGλ in 1 and λ only in 1. Serum FLC ratio was markedly abnormal in all (median λ/κ 467). All pts presented with AKI with a median creatinine of 5.6 mg/dL. The median 24h urine protein was 4.5 g (composed mostly of M-protein). Pts were treated with chemotherapy and 1 received SCT. After a median F/U of 16 months 2 had partial renal recovery, 2 developed ESRD, and 2 died (1 with ESRD).

Conclusion: IC-AL typically occurs in association with MCN and thus presents with AKI. Prognosis is poor and pathogenesis is unknown.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-05	Education in pathology	Zulfu, Azza Omdurman Islamic University Dept. of Histopathology Khartoum Sudan	Poster	
Abstract No. 006				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Assessment of satisfaction of histopathology trainees with the training

ABSTRACT TEXT

Objective: To assess the satisfaction of histopathology trainees with their training program

Methods: Survey style .a closed ended unipolar 5 grade likes scale and self administered questionaire covering 15 areas of training :program entry exam,part one course ,induction,content of learning,learning methods,duration of rotation,organizational,labrotary management ,research,supervision,handover,communication,professionalism,assessment and overall satisfaction

Results: First group4 areas of good satisfaction:handover 93%,entry exam 86%,research 80%,learning methods78%.second group five areas with moderate satisfaction:organization,laboratory management ,organizational,supervision and communicationeach scored 66.7%.third group areas of unsatisfactory,six areas:part one course 27%,induction28%duration of rotation13%professionalism40% assessment 40%

Conclusion: These results can be used to guide improvements and reform of the training program

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 007 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	**Al-Masqari, Mohammed** **Muscat Sultanat of Oman**	**Poster**	Al-Maani, Amal Ramadhan, Fatma

ABSRACT TITLE:
Gastrointestinal Basidiobolomycosis, an Emerging Fungal Infection of the Gastrointestinal tract, The Royal Hospital Experience.

ABSTRACT TEXT

Objective: In this study, we aimed to examine epidemiology, clinical characteristics, histopathology findings, management, ancillary techniques which are important for diagnosis, management and outcome of an uncommon manifestation caused by the Basidiobolus ranarum.
Methods: This is a quantitative study (case series). This study was conducted in the histopathology department at the Royal hospital which is a tertiary care institution. Cases diagnosed with all types of fungal gastrointestinal disease between 2008 and 2015 were reviewed. Cases with morphological features of basidiobolomycosis were retrieved and the diagnosis was confirmed by a senior pathologist.
Results: Five cases were identified. Out of five patients, four were misdiagnosed with other types of fungal infections which resulted in high morbidity and mortality. This case series revealed that the majority of patients identified are pediatrics (60%). Further, (60%) were from the same region (Ad Dakhiliyah). All patients presented with the unspecific gastrointestinal symptoms that clinically mimics serious diseases. Additionally, all patients shared similar radiological findings and laboratory investigations.
Conclusion: Diagnosis of Gastrointestinal Basidiobolomycosis (GIB) requires a high index of suspicion, increased awareness of this rare disease aid in early diagnosis and promote an early start of treatment. Since there is a resemblance in the clinical features of inflammatory and neoplastic bowel disease; GIB should be considered in the differential diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25 Abstract No. 007 Date 17.10.2018 & 18.10.2018	Soft tissue pathology	**Ayadi, Rahma** **Charles Nicole Hospital Dept. Of Pathology Tunis Tunisia**	**Poster**	Ksentini, Mariem Blel, Ahlem Aloui, Raoudha Gharbi, Sarra Ben Romdhane, Neila Ines Znaidi, Nadia Rammeh, Soumaya

ABSRACT TITLE:
Bizarre parosteal osteochondromatous proliferation: Case report and literature review

ABSTRACT TEXT

Objective: Bizarre Parosteal Osteochondromatous Proliferation (BPOP) also known as Nora's lesion, is a rare, benign tumour of the small bones. There have been fewer than 150 cases reported in the literature today.
We report a new case of BPOP, describe its histopathological features and discuss its differential diagnosis.

Methods: A 17-year-old girl presented with a mass that increased in size in his left distal cubitus without any traumatic episode. The suspected radiographic diagnosis included periosteal chondroma, periosteal osteosarcoma, chondroid osteosarcoma and exostosis. A chirurgical biopsy was performed.
Results: Microscopic examination revealed proliferative and disorganized mixture of bone, cartilage and spindle cells. Osteoid and blue bone were present. The cells showed moderate atypia. The diagnosis of periosteal osteosarcoma was suggested. The patient underwent lesional excision. A circumscribed, yellow tumor of 2x2cm was identified arising from the cortical surface and consisted of cartilage cap and bone tissue. Histologically, the superficial area of the masses showed fibrocartilaginous tissue with high cellularity. Spindle shaped or stellate, enlarged chondrocytes were scattered in a myxoid stroma. The cells varied in size, and some were binucleated. The basal area was composed of immature trabecular bone with high osteoblastic activity. The spindle cells were arranged loosely among the trabeculae, which were apparently formed by a process of enchondral ossification. The cells showed neither atypical mitoses nor cytological atypia. The final diagnosis of BPOP was established.
Conclusion: BPOP is an uncommon and benign lesion. It must be distinguished from chondrosarcoma, parosteal osteosarcoma and periosteal osteosarcoma. The diagnosis is confirmed by histological examination. The treatment is surgical excision but there is a high rate of recurrences.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 007 Date 15.10.2018 & 16.10.2018	Breast pathology	**Benchiha, Nawel Nassima** **University of Djillali Liabes Pharmacy Sidi Bel Abbès Algeria**	**Poster**	Houti, Leila Hamidi, Meriem Boussahla, Ghizlane Sadeg, Soumia Zeggou, Hasnia

ABSRACT TITLE:
Neoadjuvant chemotherapy response in young breast cancer patients: Correlation between age and clinicopathological characteristics

ABSTRACT TEXT

Objective: Patients with young age have been considered to be of poor prognosis. This investigation and extension of a previously study is to identify the potential of neoadjuvant chemotherapy (NCT) on stratified patient's age groups, allowing a better understanding about how each subgroup responds distinctly to NCT.
Methods: From January 2012 to April 2018, a retrospective analysis was made on response data of 184 women with operable breast cancer treated by NCT in the oncology department of Sidi Bel Abbes (Algeria). Two groups were defined according to the age of the patient at diagnosis: group1 included 36 patients aged ≤39 years; group2 included 148 patients aged >39 years. Tumour size, stage, clinical response, histological grade and Ki-67 expression (high level, Ki-67 >=15%; low level, Ki-67<15%) were analysed according to age groups. The significance of associations was tested by the chi-squared test. A p value <0.05 was considered significant.
Results: The T3 tumour size was significantly higher in the group1 compared with group2 (44% versus 24%, p= 0,016). There was a trend for patients' group1 to have tumour stage II (22%) and objective response (86%) compared with those of group2 respectively of 15% and 84%, without statistical significance. The rate of histological grade G3 was also not significantly different between the groups. The expression of Ki-67 >=15% in those <=39 years of age being significantly greater that in the other age group (72% versus 53%, P = 0.041). However, the rate of Ki-67<15% is lower in young age patients compared with patients aged >39 years (27% versus 46%, P = 0.04).
Conclusion: The rate of high level of Ki-67 expression was more frequently in the youngest subgroup age than in older premenopausal patients. The relationship between age and treatment response was not directly correlated.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16 Abstract No. 007 Date 17.10.2018 & 18.10.2018	Endocrine pathology	**Cameselle-Teijeiro, José Manuel** **Clinical University Hospital Santiago de Compostela Spain**	**Poster**	Barbón-Fernández, Omar Vázquez-Boquete, Ángel Rico-Rodríguez, .Trinidad Y Reyes-Santías, Rosa Mª Abdulkader, Ihab Eloy, Catarina Sobrinho-Simões, Manuel

ABSRACT TITLE:
EWSR1 rearrangement is a clonal event in papillary thyroid carcinoma

ABSTRACT TEXT

Objective: A recent paper by our group indicated that EWSR1 rearrangement was present in about half of our papillary thyroid carcinoma (PTC) cases, with a higher frequency in classic PTCs (90%) than in PTC variants. In this study we have looked for EWSR1 rearrangement in several areas of the primary tumor and the metastases of a classic PTC.
Methods: We reviewed the clinicopathological data of the case of a 27-year-old woman who underwent total thyroidectomy with lymphadenectomy due to a classic PTC (pT2 m, pN1b, cM1, 8th edition AJCC). Fluorescence in situ hybridization (FISH) technique for EWSR1 rearrangement was performed in 4-µm tissue sections obtained from paraffin embedded tissue with tissue microarray (TMA) constructed from the thyroidectomy specimen. TMA included 4 samples of normal thyroid tissue from the upper and lower areas of both lobes, 4 primary tumor samples from upper and lower areas of both lobes, one sample from the central portion of the tumor, and 3 lymph node metastases samples (one right perithyroid and bilateral jugulo-carotid). FISH was carried out using the Vysis EWSR1 break apart FISH probe kit (Abbott Molecular Inc, IL, USA) according to the manufacturer's protocol. Additional tissue samples from areas adjacent to those included on the TMA were also obtained for somatic BRAF gene mutation analysis by real-time PCR (Cobas 4800 BRAF V600 Mutation Test; Roche Diagnostics, San Cugat del Vallés, Spain). Concurrent appropriate positive and negative controls were used.
Results: EWSR1 rearrangement was detected in all tumor areas sampled, regardless of the papillary, follicular or mixed papillary-follicular histological growth pattern in the sample, but was not detected in normal tissue. The mutational study of BRAF was negative in tumor and normal tissue.
Conclusion: Our findings support the clonal nature of EWSR1 rearrangement in PTCs, indicating an important role in their tumorigenesis. Grant PI15/01501-FEDER, ISCIII.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19 Abstract No. 007 Date 17.10.2018 & 18.10.2018	Hematopathology	Choi, Hyun-Joo St. Vincent´s Hospital Department of Pathology Suwon Republic of Korea	Poster	Cho, Uiju Kim, Jeong A. Park, Gyeongsin

ABSRACT TITLE:

Development of peripheral T-cell lymphoma after treatment of EBV-positive diffuse large B-cell lymphoma

ABSTRACT TEXT

Objective: Sequential development of peripheral T-cell lymphoma (PTCL) after successful treatment for diffuse large B-cell lymphoma (DLBCL) is very rare. To our best knowledge, only 4 cases have been descried in English literatures.
Methods: Herein we present a case of PTCL that developed after R-CHOP therapy for EBV-positive DLBCL in pharynx.
Results: A 45-year-old male presented with sore throat and palpable neck mass for 3 months. On laryngoscopy, there was severe mucosal ulceration involving oropharynx. Imaging studies revealed a 10cm sized huge necrotic lesion from right oropharynx to hypopharynx. Excisional biopsy showed mixed proliferation of polymorphic centroblastic cells and immunoblastic cells with rich background of small lymphocytes. Immunohistochemically, the neoplastic cells were positive for CD20, CD30 and EBER with high Ki67 labeling index. CD3 was negative and EBV-positive DLBCL was diagnosed. After cycles of R-CHOP therapy, near complete regression was achieved on imaging studies. Eighteen months after the therapy, however, recurrent lymphadenopathy and tonsil enlargement newly developed. A new biopsy on lymph node revealed different pathologic features with the initial biopsy. Large-sized pleomorphic cells were positively stained with CD3 and CD8. These cells were negative for B-cell markers, CD4, CD30 and EBER. On gene rearrangement test, T-cell receptor gamma and beta genes were clonally arranged. Thus, diagnosis of PTCL was made. The patient expired after the diagnosis of PTCL.
Conclusion: Our case underlines the importance of rebiopsy in the follow up of lymphoma patient and possible development of secondary malignancy by iatrogenic cause.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 007 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Elazab, Dina National Liver Insitute Dept. of Pathology Menofyia Egypt	Poster	Elkholy, Shimaa

ABSRACT TITLE:

Nested stromal-epithelial Tumor of the liver: A case report; morphopathological and immunohistochemical study

ABSTRACT TEXT

Objective: to discuss this rare group of pediatric liver tumors with a low malignant potential as the most common radiological differential diagnosis is hepatoblastoma, which has a relatively poorer prognosis. Thus, a pathologist needs to keep this entity in mind, so as to offer a correct histological diagnosis. We here report a case of a female patient 19years old presented by incidentally discovered palpable painless mass in size of an orange in the right hypochodrium since September 2016. Radiological findings revealed a well defined mass occupying most of the right lobe of the liver measuring about 13cm in greatest dimension.
Normal levels of alpha fetoprotein ,CA 19.9 with negative virology are main laboratory findings.
The patient underwent partial hepatectomy, right lobe hepatectomy at our institute. Regular follow up of the patient was done that revealed absence of tumor recurrence till 1st March 2018.
Methods: Gross, histopathological and immunohistochemical assessments(Hep-par, CK7, chromogranin, Ckit, smooth muscle actin, Ki67), were done to characterize this unusual example of a mixed malignant tumor of liver.
Results: Gross examination revealed well circumscribed non- capsulated mass measuring 12x9x6cm.It was light brown to yellow in color , firm in consistency with whitish dots of calcification and hard parts like bone.
Histopathoogical examination revealed that, the tumor is consisting of nests of epitheloid and spindled cells with associated myofibroblasticstroma and variable intra-lesional calcification and ossification.
Immunohistochemical profile showed negativity to hep-par and CK7, so the tumor is non-hepatic, non-biliary (exclude hepatoblastoma and fibrolamellarhepatocellular carcinoma). Negative for chromgranin, so that , it is not neuroendocrine tumor. Negative for Ckit, so, it is not GIST. Smooth muscle actin was positive in the stroma, myofibroblastic in nature. The proliferation index as demonstrated by Ki67 immunostaining was 5%.
Conclusion: The morphologic appearance and immunohistochemical profile of these lesions are unique in our experience and represent a new category of pediatric liver tumor, nested epithelial stromal tumor with low malignant potential.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 007 Date 17.10.2018 & 18.10.2018	Dermatopathology	Garba Dahiru, Waziri Ahmadu Bello University Dept of Pathology Teaching Hospital Zaria Nigeria	Poster	Eneyamire Suleiman, Dauda Turaki Mohammed, Tahir O. A. Samaila, Modupeola

ABSRACT TITLE:

Gluteal Malignant Proliferating Pilar Tumour: An unusual presentation in an elderly male

ABSTRACT TEXT

Objective: Pilar tumour of the scalp (also known as proliferating trichilemmal cyst) is a rare benign locally aggressive skin adnexal tumour arising from the outer root sheath of the hair follicle.[1,2] It predominantly occurs in the scalp, trunk, head and neck, and predominantly affects females.[1-3] Due to the rarity of malignant transformation, only a handful of cases has been documented in literature. We present an unusual case of gluteal malignant proliferating pilar tumour in an elderly man.
Methods: A 69-year-old man presented with a 10-year history of painful progressive swelling of the left buttock that rapidly increased in size two years preceding presentation. Clinical examination showed a circumscribed firm gluteal mass measuring 12x8cm, adherent to the underlying structures with an impression of gluteal lipoma.
Results: Grossly, an irregular lobulated cystic mass with an attached skin weighing 158g and measured 13x8x6cm. Cut sections revealed a cyst containing friable materials with grey thickened wall.
Histology showed epidermis overlying a deep-dermal cyst lined by keratinized stratified squamous epithelium and containing lamellated-keratin. Arising from the cyst wall is an infiltrative well-differentiated tumour arranged in nests, trabeculae and small sheets and composed of malignant polygonal cells having hyperchromatic nuclei with 1-2 nucleoli and moderate amount of amphophilic cytoplasm admixed with clear cells, multinucleate giant cells and abnormal mitotic figures. A diagnosis of Malignant Proliferating Pilar Tumour was made.
Conclusion: Malignant proliferating pilar tumour is a rare malignant skin adnexal tumour of hair follicle origin and was recognized by Saida et al in 1983 as a distinct entity arising from an uncommon benign pilar tumour or proliferating trichilemmal cyst of the scalp.[4] Other sites of occurrence, particularly terminal hair-bearing regions of the body have been documented in literature.[3,6] It often presents as a solitary multi-nodular deep dermal tumour with an average size of 5cm. Malignant transformation as highlighted by Headington[7], is often associated with lesions greater than 6cm, rapid growth, surface ulceration and locations other than the scalp.[8-10]
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 007 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Gargouri, Feten Tunis Tunisia	Poster	Ayadi, Rahma Msakni, Issam Mansouri, Nada Yaiche, Rahma Baker, Sami Raboudi, Mehdi Laabidi, Besma

ABSRACT TITLE:

Penile intraepithelial neoplasia: Case report and review of literature

ABSTRACT TEXT

Objective: Penile intraepithelial neoplasia (PeIN) is a rare disease that can be associated with great morbidity and mortality. The risk of progression from PIN to invasive carcinoma is estimated to be between 10% and 30%. The non-invasive nature of PeIN allows for curative penile sparing therapy and is recommended, in their guidelines, by the European Association of Urology (EAU). Treatment options include topical chemotherapy, immunotherapy, laser treatment, photodynamic therapy and surgical excision. Our aim was to evaluate the outcome of both cryotherapy and imiquimod to treat PeIN
Methods: A 24 year-old presented with lesion at the meatus on the glans penis of 4 months duration for which he had not previously sought medical attention. He had at the beginning a surgical excision.
Results: Histologic results showed epidermal acanthosis, prominent atypical parakeratosis. The epithelium is replaced by a monotonus population of small to intermediate sized cells. In the uppers layers of the epidermis presence of numerous koilocytes who have vacuolated scant basophilic cytoplasm and indistinct cell borders with shrunked nuclei .There was no evidence of an invasive component. Immunohistochemical (IHC) studies showed positive staining of these cells for p16. Ki67 proliferation index was 90%. Based on these histologic and IHC findings, the final diagnosis of PeIN was established. The limits of excision cannot be evaluated. The postoperative course is marked by a recurrence of the lesion. The patient then benefited from a treatment by cryotherapy and imiquimod with a good evolution and complete disappearance of the lesion.
Conclusion: Given the favorable response and purported benefits of combination therapy, we propose the use of cryotherapy with topical imiquimod in the treatment of PeIN.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Gudi, Mihir KK Hospital DPLM Singapore Singapore	Poster	Yeo, Yen Ching Leong, May Ying D/O Parmanandan , Ananthi Tan Sock Ling, Joyce
Abstract No. 007				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Assessing the usefulness of cervical cytology in the diagnosis of recurrence in patients of cervical cancer post radiation therapy

ABSTRACT TEXT

Objective: In KK Women's and Children's Hospital, Singapore, cervical cancer's patients underwent radiation therapy are being follow-up with a cervical smear. This management varies among different countries; our objective was to evaluate the usefulness of cervical smear for diagnosis of recurrence in post radiation patients.

Methods: Cytology data from patients with radiation therapy in their clinical notes were extracted from KKH's Laboratory Informatics System for the period of January 2015 to December 2016.

Cases showing Atypical Squamous Cells of Undetermined Significance (ASCUS) and above were tracked for histological and/or cytological findings within 12 months.

The positive predictive value (PPV) of post-radiation dysplasia (PRD) which comprises low-grade and above and recurrent carcinoma were calculated.

Results: Of a total of 2,342 smears 121 showed ASCUS and above as the cytologic abnormality. These were separated into three categories; ASCUS (91), Low-grade (15) and High-grade (15).

Based on their histo/cyto follow-up, in ASCUS category there were 69 negative, 6 ASCUS, 4 low grade and 3 high grade. 9 cases had no follow-up.

In Low-grade cases, 2 negative, 9 low grade and 4 had no follow-up.

In High-grade cases, 3 negative, 1 low grade, 2 high grade and 3 Squamous Cell Carcinoma (SCC). 4 adenocarcinoma. 2 cases had no follow-up.

The PPV for PRD was 18.6% and recurrent carcinoma 2.9%.

Conclusion: In our study approximately 19% of post-radiation patients had PRD. Clinical follow up perhaps is an alternative option to pick up recurrence but this can be made difficult due to radiation induced tissue changes and hence cervical cytology which is a simple and economical test coupled with HPV testing may be valuable in this context.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Hamid, Nusaiba University of Khartoum Khartoum Sudan	Poster	Elhassan, Nazik Abdalla, Sarah
Abstract No. 007				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Primary intraosseous leiomyosarcoma of the mandible: A case report

ABSTRACT TEXT

Objective: Primary intraosseous leiomyosarcoma of the mandible is a rare entity. So far, 36 cases were reported in the English language literature.

Methods: We reported a rare case of intraosseous leiomyosarcoma of the mandible presented to Oral Histopathology Laboratory, Faculty of Dentistry, University of Khartoum, Khartoum, Sudan in February 2018.

Results: A 24 years old Sudanese female, complaining of difficulty in breathing and swallowing secondary to painful swelling on the left side of the lower jaw for three months. Imaging studies revealed ill-defined osteolytic radiolucent mass extended from left lower second premolar to the left condyler neck area with the buccal exophytic extension of the lesion. Lingually, the lesion involved the retromolar, tonsillar fossae areas and impinge over the tongue. Surgical excision showed a lobulated mass measuring 11x7.5x6.5cm. Histological examination showed high grade spindle cell tumor confirmed by positivity for desmin and H. caldesmon to be a leiomyosarcoma. Images of abdomen and pelvis failed to identify retroperitoneal and pelvic primaries.

Conclusion: We reported a rare case of primary intraosseous leiomyosarcoma of the mandible. Confirmation by IHC and the exclusion of metastatic leiomyosarcoma is essential.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	Khalid, Muneeza Childrens Hospital Lahore Dept. of Histopathology Lahore Pakistan	Poster	
Abstract No. 007				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Rhabdomyosarcoma in pediatric population: A 5 year experience at children's hospital, Lahore

ABSTRACT TEXT

Objective: TO STUDY MORPHOLOGY AND FREQUENCY OF RHABDOMYOSARCOMA AMONG PEDIATRIC POPULATION

Methods: A retrospective cross-sectional study including all cases of Rhabdomyosarcoma among the children diagnosed under 15 years of age were included, All specimens were fixed in 10% buffered formalin, routinely processed under standardized protocol conditions for paraffin embedding, sectioned and finally stained with hematoxylin and eosin. Immuno-histochemical stains including Desmin and Myogenin were applied by standard protocol. Results: A total of 61 cases were diagnosed as Rhabdomyosarcoma during the study period. All the cases were of Embryonal subtype (ERMS). Out of them, 38(62.2%) were males and 23 (37.7%) were females with Male to female ratio was 1.7:1. Majority of the tumors were seen in age range of 0-5years 34 cases (55.7%).However, there were two cases (3%) in which the age was not mentioned. Out of 61 cases head and neck was the most common site for Rhabdomyosarcoma 18 cases (29%) followed by genitourinary system 17 cases (28%). There were 5 cases (8.2%) in which site was not mentioned. All the diagnosed cases by confirmed by IHC.

Results: A total of 61 cases were diagnosed as Rhabdomyosarcoma during the study period. All the cases were of Embryonal subtype (ERMS). Out of them, 38(62.2%) were males and 23 (37.7%) were females with Male to female ratio was 1.7:1. Majority of the tumors were seen in age range of 0-5years 34 cases (55.7%).However, there were two cases (3%) in which the age was not mentioned. Out of 61 cases head and neck was the most common site for Rhabdomyosarcoma 18 cases (29%) followed by genitourinary system 17 cases (28%). There were 5 cases (8.2%) in which site was not mentioned. All the diagnosed cases by confirmed by IHC

Conclusion: Rhabdomyosarcoma is one of the most common soft tissue sarcoma in pediatric population with predominant involvement of head & neck and genitourinary system. Children in the age range of 1-3 years were most commonly diagnosed with Rhabdomyosarcoma.ERMS is the predominant type in children. Males were predominantly involved in the present study.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10	Immunohistochemistry	Khemir, Aya Tunis Tunisia	Poster	Amel douggaz, Emna Chelbi, Salwa Nechi, Abir Chaabane,
Abstract No. 007				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Desmoid-type fibromatosis: An unusual tumor with ubiquitous distribution

ABSTRACT TEXT

Objective: Desmoid-type fibromatosis (DTF) are rare mesenchymatous tumors. They are known for their locally aggressive behavior but have no metastatic potential. They occur usually in the abdomen but also in different sites of the body. Herein, we are going to discuss the wide variability of clinico-pathological aspects of these tumors.

Methods: We report four cases of DTF that were compiled in the department of pathology of Med Taher Maamouri Hospital of Nabeul, Tunisia, between January 2016 and April 2018.

Results: Four females were diagnosed with DTF. The mean age was 43 (range, 36-58) years. Clinical presentation was: intra-abdominal mass in two cases (the first was discovered adventitiously during obstetrical ultrasound and the second after surgery for small-bowel obstruction with intestinal-wall tumor), abdominal-wall mass in one case and breast nodule in one case. The diagnosis was made on a biopsy in one case and on operative piece for the rest.

Macroscopically, the tumor size ranged between 4 and 10 cm. It was firm with white cut surface and had inconspicuous borders.

Histologically, the tumors were poorly circumscribed with infiltration of adjacent tissue. They were made of spindle-shaped fibroblastic cells without nuclear atypia. Mitotic features were present, but rare, in one case. All the tumors were negative for S100 and positive for B-Cathenin. Soft-Muscle-Actine was focally expressed. H-caldesmon, CD34 and desmin were negative.

There was no recurrence at the time of writing this abstract.

Conclusion: In front of any mesenchymatous tumor of all sites combined, pathologists must think of DTF since they can mimic sarcoma and other malignant tumors.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 007 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Koh, Fong Seen Dept. of Anatomical Pathology Albury Australia	Poster	Albawardi, Alia Vang, Russel Gazal Aswad, Saad Chehal, Aref Almarzooqi, Saeeda

ABSRACT TITLE:

Ovarian mixed clear cell carcinoma and endometrioid carcinoma arising in borderline seroumucionous tumor in a patient with HNPCC with PMS2 homozygous mutation

ABSTRACT TEXT

Objective: We present a case of a 28-year-old woman with HNPCC who presented with a partially cystic (2.8 cm) ovarian mass detected during following-up for a history of colonic adenocarcinoma diagnosed at age 17. She had PMS2 homozygous mutation.
Methods: Hereditary non-polyposis colorectal cancer (HNPCC) has a cumulative life time risk of more than 12% for development of ovarian cancer. The majority are low-stage and well-moderately differentiated carcinomas of the non-serous histology. HNPCC-related ovarian carcinomas reported include endometrioid and clear cell carcinoma
Results: At the current presentation, metastatic colorectal carcinoma was suspected. She had ascites and elevated CA-125. Microscopically, the ovary was replaced by edematous large papillae with a hierarchal branching pattern. The lining epithelial cells vary from endometrioid cells, clear cells to those with a serous morphology. Stromal invasion was characterized by two morphologically distinct neoplasms; a clear cell carcinoma and an endometrioid adenocarcinoma (FIGO grade 1). A diagnosis of mixed clear cell carcinoma and FIGO1 endometrioid carcinoma arising in a background of borderline seromucinous tumor was rendered. Immunohistochemistry reveals positivity for CK7 and PAX8 in all components. CK20 and WT-1 were negative in all components. The clear cell carcinoma was positive for P53, Napsin A and p16, while negative for Vimentin. The endometrioid carcinoma was positive for Vimentin and p16 (focal). It expressed wild-type p53. The seroumucionous borderline carcinoma component was positive for Napsin A (focal) and P16 (focal).
Conclusion: Seromucinous neoplasms are recently characterized ovarian neoplasms in the revised WHO Classification of Tumors of Female Reproductive Organs. The occurrence of this subtype of borderline ovarian tumor associated with two different subtypes of carcinomas raises a wide list of differential diagnoses.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13 Abstract No. 007 Date 15.10.2018 & 16.10.2018	Pathology of infectious diseases	Koh, Fong Seen Dept. of Anatomical Pathology Albury Australia	Poster	Koh, Fong Seen

ABSRACT TITLE:

Mycobacterial spindle cell pseudotumour mimicking a neoplasm

ABSTRACT TEXT

Objective: Mycobacterial spindle cell pseudotumour may mimic other spindle cell neoplasm, in particulary Kaposis sarcoma. We present such case in our institute with discussion on clinical, radiological and histopathological correlation, and other ancillary testings.
Methods: We present a HIV patient who presented with lymphadenopathy. Lymph node resection shows an intranodal spindle cell neoplasm. Differential diagnoses include mycobacterial spindle cell pseudotumour, Kaposi sarcoma, leiomyoma and other spindle cell lesion. Special stains for mycobacterial infection, PCR microbiology studies and other immunoperoxidase stain have been performed to aid in this diagnostic challenging case.

Results: The histopathological correlation and the role of special stains and immunoperoxidase studies are important in distinguishing the differential diagnosis of an intranodal spindle cell lesion in a HIV patient
Conclusion: It is important to distinguish Mycobacterial spindle cell pseudotumour and intranodal Kaposi Sarcoma because each shows intranodal spindle cell proliferation and has differences in treatment and prognosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21 Abstract No. 007 Date 17.10.2018 & 18.10.2018	Neuropathology	Lee, Jae-Hyuk Chonnam National University Medical School Gwangju Republic of Korea	Poster	Kim, Nah-Ihm Lee, Kyung-Hwa

ABSRACT TITLE:

Questionable role of ZEB1 in malignant gliomas: Altered expression of ZEB1 correlates with invasiveness in glioma cell-lines, not with clinical prognosis

ABSTRACT TEXT

Objective: Background: Although ZEB1, a key induce of epithelial mesenchymal transition (EMT), has been reported to promote tumor invasion and metastasis in various cancers, the role of ZEB1 in malignant gliomas has not been fully investigated. The aim of this study was to investigate the effect of ZEB1 on biological behaviors in human gliomas cell lines and on patient survival data
Methods: Design: To evaluate the role of ZEB1 in glioma invasiveness, cell invasion and migration capabilities were investigated after ZEB1 knockdown using small-interfering RNA. ZEB1 expression was examined in 89 human glioma samples by immunohistochemistry. Comparison of ZEB1 expression in each histological grade, and its effect on glioma patient survival rates were also analyzed.
Results: Results: ZEB1 knockdown resulted in significantly reduced cell invasion and migration in U251 and T98G cell lines. ZEB1 down-regulation also caused diminished expression of EMT related factors and genes by Western blotting and RT-PCR. ZEB1 expression, however, did not correlate with WHO tumor grades, overall survival rates, and progression free survival. Kaplan-Meier analysis did not reveal statistically significant difference of survival period between the high ZEB1 expression group and the low expression group in our patient cohort as well as in the large data set, Repository for Molecular Brain Neoplasia Data (REMBRANDT) by National Cancer Institute (NCI).
Conclusion: Conclusion: ZEB1 knockdown lead to decreased invasiveness and migration with reduced expression of EMT related factors and genes in glioma cell lines. However, ZEB1 expression in human glioma sample did not reveal a notable correlation with patient survival rates or clinicopathological variables
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-11 Abstract No. 007 Date 15.10.2018 & 16.10.2018	Molecular pathology	Roome, Talat Dow Univ. of Health Science Dow International Medical Coll Karachi Pakistan	Poster	Razzak, Anam Azam, S. M. Zahid Siddiqui, Shezaib Shaikh, Hafeezullah Amin, Rafat Sharafat, Shaheen

ABSRACT TITLE:

Single-nucleotide Polymorphism in the promoter region of the osteopontin gene as predicting marker of Hepatitis C pathogenesis and its related hepatocellular carcinoma in Pakistan population

ABSTRACT TEXT

Objective: Hepatitis C virus (HCV) infection is a global health problem, 4.5% to 8% Pakistani population chronically infected with HCV and most of them encountered hepatocellular carcinoma (HCC) in later stages. Osteopontin (OPN) a secretory chemokine essential for Th-1 immune response, mainly contributes to the pathogenesis of HCV infection. The main objective of the present is to identify the single nucleotide polymorphism (SNP) in OPN promoter region and to correlate the polymorphisms with HCV disease susceptibility and progression of liver deterioration.
Methods: In this case-control clinical study, 600 study participants were enrolled including i) normal individuals, ii) HCV infected patients iii) HCC patients with HCV infection. HCV viral load and genotype was evaluated through Real time PCR, SNPs in OPN promoter gene was identified via DNA sequencing. OPN serum levels was estimated by ELISA and extent of OPN expression in liver tissues of HCV induced HCC patients was performed through immunohistochemistry and classified according to the percentage and intensity of staining.
Results: Osteopontin levels were significantly raised in HCV and HCC patients in comparison to control group and correlated well with the viral load and severity of liver fibrosis. SNPs in OPN promoter gene was identified at nucleotide (nt) -155, -443, -616, and -1748 showed 100% linkage disequilibrium to each other with sustained virological response (SVR) was recorded in 69% of overall patients. Significant differences were found in OPN allele and phenotype frequencies between the HCV & HCC patients compared to controls ($p < 0.05$) suggestive of diverse immunological response during HCV pathogenesis.
Conclusion: Clinical demographic data of OPN promoter gene polymorphism in Pakistani population has been illustrated for the first time in relation to HCV disease susceptibility and diagnostic efficacy. SNPs in OPN promoter, serum OPN levels and OPN tissues expressions might serve as powerful non-invasive diagnostic and prognostic biomarker reflecting hepatitis activity in HCV and HCC patients.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-22	Ocular pathology	Suleiman, Dauda A.B.U Teaching Hospital Dept of Pathology Zaria Nigeria	Poster	Iliyasu, Yawale Ahmed, Saad Aliyu Liman, Almustapha Aliyu
Abstract No. 007				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Paediatric eye and ocular adnexal tumors in a referral tertiary health centre in Nigeria: A 10-year review

ABSTRACT TEXT

Objective: The study aims to review the epidemiologic and pathologic characteristics of tumours of the eye and ocular adnexa in the paediatric age group (0-14 years).

Methods: All the cases entered into the departmental records as tumours of the eye and ocular adnexa over a 10-year period (2005-2014) in the age group 0-14 years were extracted. The patients' request cards with all relevant Haematoxylin & Eosin (H&E)–stained histology slides were retrieved. Fresh sections were made from stored tissue blocks in the event of missing or broken slides. All the slides were reviewed and the cases were classified in accordance with the 2nd edition of the WHO Histological Typing of Tumours of the Eye and its Adnexa (1998). The collected data were subjected to descriptive statistical tabulation and analysis

Results: A total of 104 tumours of the eye and ocular adnexae were diagnosed in the paediatric age group, accounting for 40.5% of all eye and ocular adnexal tumours diagnosed over the study period. The male to female ratio was 1.7:1 and malignant tumours greatly outnumbered benign tumours by a ratio of 5.5:1. About three quarters (76%) of the tumours occurred in the retina with retinoblastoma representing all the tumours diagnosed in this location. The next commonest site of occurrence of paediatric tumours was the orbit, accounting for 12.5% of all tumours. Rhadomyosarcoma was the most common paediatric orbital tumour accounting for over half (53.8%) of all tumours in the orbit. Tumours of the conjunctiva and the eyelid were relatively infrequent with benign soft tissue tumours (vascular, neural and lipomatous tumours) being the major tumours at these sites.

Conclusion: Majority of the paediatric eye and ocular adnexal tumours were malignant and occurred most commonly in the retina. Retinoblastoma is the single most common tumour in this age group.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-12	Nephropathology	Tonooka, Akiko Komagome Hospital Department of pathology Tokyo Japan	Poster	Kurokawa, Ayako Hishima, Tsunekazu
Abstract No. 007				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Pathological findings of hematopoietic stem cell transplantation related-membranous glomerulonephritis

ABSTRACT TEXT

Objective: Allogeneic hematopoietic stem cell transplantation(HSCT)-related membranous glomerulonephritis(MGN) has been considered as a manifestation of renal-type graft versus host disease(GVHD) recently. In the IgG subclass staining, it is known to show primary MGN pattern with IgG4 dominant staining. In primary MGN, most of them is mediated by antibodies to the M-type phospholipase A2 receptor(PLA2R) or thrombospondin type 1 domain containing 7A(THSD7A). Thus, in HSCT-related MGN, if autoantibody to podocyte antigen is formed like primary MGN, what's the target is of high interest. Although PLA2R is reported not to be the antigen,but so far, THSD7A has yet to be ascertained whether it is.

So we conducted immunostaining of THSD7A for 8 cases of HSCT-related MGN to clarify whether THSD7A is a target and we also summarized pathological findings of them.

Methods: 8 cases of HSCT-related MGN biopsied in recent 20 years in our hospital were studied. IgG subclass, PLA2R and THSD7A immunohistochemical stain were performed on paraffin embedded section.

Results: All 8 cases underwent allogeneic bone marrow transplantation, and most of them developed MGN during the dose reduction of immunesuppressant. They mostly showed Stage I MGN, and a few cases presented focal endothelial injuries with MGN. All cases don't show positivity for either THSD7A or PLA2R staining, which indicate both don't the target angigen in HSCT-related MGN. But all 8 cases show primary MGN pattern in IgG subclass staining.

Conclusion: HSCT-related MGN show primary MGN-like IgG subclass immunohistochemical pattern, but neither PLA2R nor THSD7A isn't the target antigen.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Arai, Tomio Tokyo Metropol. Geriatric Hospital Pathology Dept. of Pathology Tokyo Japan	Poster	Matsuda, Yoko Wang, Tan Aida, Junko Takubo, Kaiyo Ishiwata, Toshiyuki
Abstract No. 008				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Clinicopathological diversity of solid-type poorly differentiated adenocarcinoma of the stomach

ABSTRACT TEXT

Objective: Although Solid-type poorly differentiated adenocarcinoma (PDA) is a peculiar type of gastric cancer and usually classified as PDA or poorly differentiated tubular adenocarcinoma (WHO). In addition, our previous study demonstrated that approximately a half of solid-type PDAs showed solid histology with tumor-infiltrating lymphocytes, expansive growth, Crohn's-like lymphoid reaction, lower third location, lower N classification, and microsatellite instability. However, clinicopathological features of solid-type PDAs remains still obscure. The present study aimed to clarify the clinicopathological and molecular characteristics of this tumor from the viewpoint of histological diversity.

Methods: We selected 415 consecutive patients (222 men and 193 women; a median age, 78 years, range 51-96 years) with 460 gastric carcinomas from cases in the Tokyo Metropolitan Geriatric Hospital between 2000 and 2008. We examined microsatellite status and mutations in KRAS and BRAF as well as clinicopathological features in solid-type PDA. Solid-type PDAs were divided into 3 groups according to the presence or absence of concordant other histologic subtype: pure solid-type PDA (n=24), solid-type PDA with differentiated-type component (n=37), and solid-type PDA with undifferentiated-type component (n=17). Clinicopathological and molecular valuables were statistically compared among 3 groups.

Results: Solid-type PDA was found in 78 lesions (17.0%) with female predominance. Pure solid-type PDAs showed older age, smaller size, lower pT classification, lower lymphatic permeation and pN classification, lower stage and higher KRAS mutation in comparison with solid-type PDAs with undifferentiated-type component. Proportion of microsatellite instability and BRAF mutation showed no significant differences among 3 groups.

Conclusion: These results suggest that solid-type PDA is not a single tumor, but a few heterogeneous tumors. Solid-type PDA should be classified on the basis of molecular profile and histology in more detail.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Bajdevska, Daniela General Hospital Kumanovo Dept. of Pathology Kumanovo Macedonia	Poster	Ilievski, Boro Kostadinova-Kunovska, Slavica Petrusevska, Gordana Spasevska, Liljana Martinovska, Zlata Abdiu, Suad Janevska, Vesna
Abstract No. 008				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

D Adult paratesticular spindle cell/sclerosing rhabdomyosarcoma: A case report

ABSTRACT TEXT

Objective: Paratesticular malignant tumors are rare. Sarcomas are the most common malignant paratesticular tumors. Rhabdomyosarcomas (RMS) accounts about 24% of adult sarcomas. Spindle cell type/sclerosing rhabdomyosarcoma is a rare subtype of RMS occurring predominantly in children. Adult spindle cell RMSs are very rare and accounts for 3% of all RMSs. We present a case of paratesticular spindle cell/sclerosing rhabdomyosarcoma in 61-year-old-man.

Methods: The patient was admitted to the Department of Urology with a complaint of gradually increasing painless right scrotal mass since ten months. MT and CT showed a paratesticular mass adjacent to, but not involving the testicle. The patient underwent right radical orchiectomy. A gross examination revealed 3, 5x2, 5cm testicle with 9cm of attached spermatic cord and 18x16x13cm paratesticular tumor mass compressing the testis with total weight 1724gr. The cut surface of the tumor showed nonencapsulated, lobulated, homogenous, solid, gray white glistening mass with central necrotic areas and cystic degeneration.

Standard procedure for histology and immunohistochemistry with antibodies against vimentin, desmin, myoglobin, S-100, CD56, HMB45, AE1/AE3, Smooth Muscle Actin and Ki67 were made.

Results: Microscopically, the neoplasm was composed of spindled neoplastic cells with ovoid to elongated nuclei arrange in fascicular and storiform pattern. Eosinophilic rhabdomyoblasts and large cells with hyperchromatic atypical nuclei were common findings in some areas of the tumor. Rare pleomorphic multinucleated giant cells were also present. Abundant stromal hyalinization was present in some areas.

The tumor cells were diffusely positive for Vimentin, and the rhabdomyoblasts and the large cells with hyperchromatic atypical nuclei were positive for desmin and myoglobin. Other immunostainings were negative. The proliferative index Ki-67 was high. Pathological diagnosis of Spindle cell type/sclerosing RMS was made.

Conclusion: Pathologist should be aware of rare paratesticulr tumors to avoid misdiagnosis. Reporting rare tumors contribute to collecting data for rare neoplasms in order prosper therapy to be established.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Bourhroum, Najoua Ibn Sina Universitary Hospital Rabat Morocco	Poster	Znati, Kawtar Bernoussi, Zakya
Abstract No. 008				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Angiomyolipoma of the kidney: Clinicopathological study of 7 cases collected in the pathologycal laboratory of Ibn Sina Hospital Rabat

ABSTRACT TEXT

Objective: To highlight the clinicopathological characteristics of AML and to assess the role of Human Melanoma Black-45 (HMB-45), Melan-A, smooth muscle actin (SMA), S-100 and cytokeratin in its diagnosis.

Methods: The study included 7 cases of AML. Clinical and radiological data were retrieved from the archival files and all cases were subjected to a histopathological evaluation.

Results: AML was more common in females (female:male = 4:3), the mean age was 49;33; all patients were symptomatic. Tumor's size larger was more than 4 cm in all cases.

6 cases were classic AML, while 1 case was epithelioid AML. Classic AML demonstrated admixture of fatty tissue, thick-walled blood vessels, and smooth muscle, while epithelioid AML was composed mainly of epithelioid cells and contained no fat, in this case HMB-45 was positive and negative for cytokeratin.

Conclusion: AMLs have characteristic clinicopathological and immunohistochemical features and their recognition is crucial for proper diagnosis and treatment.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Bhaduri, Anita S. P.D.HINDUJA HOSP. & MRC, Mahim, Mumbai India	Poster	Garg, Nidhi Deshmane, Vinay Sawaimoon, Satyakam
Abstract No. 008				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Androgen receptor expression in breast cancer: A study of 122 cases in urban Indian population

ABSTRACT TEXT

Objective: This study on a sample of urban Indian population aimed to investigate the prevalence and other factors relevant to androgen receptor (AR) expression in high grade invasive breast cancers, which constituted predominantly Triple negative breast cancers (TNBC). TNBC represents a unique subtype of breast cancers defined by the absence of target receptors & tailored target therapies, hence necessitating the study of additional receptors like AR.

Methods: AR expression was studied by immunohistohistochemistry on 122 cases of invasive breast cancers, from January 2016 to February 2018. At least 1% nuclear staining of any intensity was considered as positive for AR. Statistical correlation was studied between AR expression, patient as well as tumour characteristics and biomarkers (estrogen receptors (ER), progesterone receptors (PR) & Her2 status). ASCO/CAP guidelines were followed in the interpretation of biomarkers.Ab used was Biocare AR441 and platform was Leica BondMax immunostainer

Results: Of the 122 cases ,Grade III carcinomas accounted for 117 (95.9%) cases. TNBC constituted majority of this study with 106 (86.9%) cases and showed a younger mean age (55.4 years) at presentation and higher proliferative (Ki67) index than most western studies.

Overall AR expression was seen in 33 (27%) cases with a prevalence of 25.5% in the TNBC. This is higher than < 20% AR positivity reported in most studies. AR positivity was observed in 31 (26.3%) cases of ER negative cases which was slightly lower than 30% positivity reported in world literature. Strong statistical correlation of AR expression was observed with ER & PR as seen in most other studies. We also observed a positive statistical correlation of AR expression with Her2

Conclusion: Although several published Western studies on AR expression exist, there is a paucity of such studies on the Indian population. The relatively higher AR expression observed in TNBC should further encourage their routine use in these cancers as it represents a potential target for therapy in a group with limited treatment options..

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Chouchane, Sarah Fattouma Bourguiba Hospital Dept. of Pathology Ksibet El-Mediouni Tunisia	Poster	: Njim, Leila Bellalah, Ahlem Ben Abdeljelil, Nouha Njima, Manel Sghaier, Yosra Zakhama, Abdelfateh
Abstract No. 008				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Hamartoma, a rare benign tumor of the spleen: A report of two cases

ABSTRACT TEXT

Objective: This work aims to report two cases of a splenic hamartoma with a review of the main finding concerning pathology and differential diagnosis.

Methods: This is a retrospective study about two cases of splenic hamartoma diagnosed at our pathology department in the university hospital of Monastir.

Results: We report two cases of a 57-year-old man and a 6-year-old boy. They presented with a splenic mass discovered during the exploration of a splenomegaly and abdominal pain in the first case and incidentally in the second case. The CT scan examination revealed in the two cases a well-circumscribed hypervascular splenic solid mass. They measured respectively 5, 5 and 8 cm in diameter. Both patients underwent splenectomy. Macroscopic examination showed in the two cases a round red-tan nodule containing foci of hemorrhage. Histologically, nodules were formed of haphazardly arranged small slit-like vascular spaces lined with plump endothelial cells without atypia. The perivascular areas enclosed focal lymphoid aggregates with a connecting network of fibrosis. Immunohistochemically, the cells lining the vascular channels were characteristically positive for CD8 but also for CD31 and CD34.

Conclusion: Splenic hamartoma is a benign tumor composed of an aberrant mixture of normal spleen tissue, characterized by CD8-positive immunophenotype. Although this tumor is very rare, it must be known by pathologist to differentiate it from other vascular lesion of the spleen.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	De Los Reyes, Francia Victoria UERM Memorial Medical Center Quezon City Philippines	Poster	
Abstract No. 008				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Predicting the RET oncogene mutation in MEN2A probands - A meta-analysis

ABSTRACT TEXT

Objective: Multiple endocrine neoplasia type 2A (MEN2A) is a rare familial cancer syndrome that is characterized by a germline mutation in the RET proto-oncogene and is classically defined as the clinical triad of medullary thyroid carcinoma, pheochromocytoma, and parathyroid hyperplasia. To address the need for an extrapolation of the RET oncogene mutation, this study aims to present a predictive model that presents the likelihood that patients 30 years old and below presenting with medullary thyroid carcinoma and pheochromocytoma may have a high risk RET mutation, thru the meta-analysis of all reports containing the age of diagnosis and the mutation of their respective probands.
Methods: All the reported cases archived in PUBMED and EBSCO under the search string "multiple endocrine neoplasia type 2a"[All Fields] AND "mutation"[All Fields] were reviewed for the required information and adjusted for duplicated entries.
Results: C634R is the most commonly detected mutation in the 30 year old and younger age group, and was observed in 56% of the probands. There is a significant difference between the occurrence of C634R in the younger age group versus all the other mutations in the said group, in comparison to the C634R occurrence versus the other mutations in the older age group (p value= 0.006), and that the higher percentage of C634R in the younger group did not occur by chance. Furthermore, the odds that someone from the younger group would have a C634R mutation is four times more than that of someone from the older group, with the OR = 3.8 (95% CI 1.44- 10.29).
Conclusion: The result of this predictive modelling will allow a basis for clinicians to provide the information regarding the urgency for molecular testing to verify that the proband indeed has a high risk mutation. Moreover, clinical laboratories that would like to establish targeted genomic screening programs for MEN2A may opt to focus on the more prevalent high-risk mutations such as p.Cys634Arg, alongside p.Cys634Gly/Phe/Ser/Trp/Tyr to optimize mutation testing versus constraints that are constantly experiences in a resource limited setting.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Fahmy, Sara Faculty of Medicine Dept. of Pathology Menofia Egypt	Poster	
Abstract No. 008				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Anaplastic giant cell carcinoma of pancreas: Case report

ABSTRACT TEXT

Objective: Anaplastic giant cell carcinoma of pancreas, is a very rare histological subtype of pancreatic cancer associated with more aggressive bahavior and worse prognosis than classic subtype. Its clinical, pathological features, therapeutic intervention and outcome are still unclear. The literature on this subtype has been very limited.
Methods: : A case of a 35 year old male patient presented with back pain. CT of the abdomen and pelvis showed right side retroperioneal amalgamated soft tissue mass lesion implicating right renal hilum and peripancreatic region as described likely amalgamated lymphadenopathy together with multiple right hepatic variable sized focal lesions and bilateral pulmonary nodules mostly metastatic in nature.Tru cut biopsy from hepatic lesion and retroperitoneal lesion
Results: Histopathological examination of both biopsies showed the same picture of malignant tumor tissue showimg sheets of malignnt polygonal cells with hyperchromatic nuclei with prominent large nucleoli , high N/C ratio, atypical mitotic figures and abundant eosinophilic cytoplasm with scattered multinucleated giant cells surrounded by areas of tumor necrosiis and haemorrhage. Immunohistochemical panel was done.

Conclusion: Anaplastic giant cell carcinoma of pancreas is an extremely rare and aggressive neoplasm with various clinical characteristics and controversial pathogenesis. Although there are limited data to support the differentiation of pancreatic lesions by CT or MRI alone. However, histopathological and immunohistochemical studies are the gold standard for the diagnosis . Further researches are necessary to clarify the pathogenesis of the neoplasm.
Policy of full disclosure: Financial interest

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Gheju, Adelina University of Medicine Dept. of Pathology Timisoara Romania	Poster	Mihai, Ioana Olteanu, Emilian-Gheorghe Jurescu, Aura Dema, Alis
Abstract No. 008				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
A challenging and rare case of a skin lesion: Primitive non-neural granular cell tumor

ABSTRACT TEXT

Objective: Cutaneous non-neural granular cell tumor (so called primitive non-neural polypoid granular cell tumor or PNGCT) is a rare benign neoplasm, first described as an S100-negative polypoid non-melanocytic tumor. The line of differentiation is still a mystery (not Schwannian) and lots of names were given to this lesion, from "primitive polypoid granular cell tumor" by Le Boit et al. in 1991 to "dermal non-neural granular cell tumor" by Lazar et al. in 2005. Since 1991 the literature reports only few cases and in our country, there are no reported cases.
Methods: We present the case of a 68 year old woman, with a painless red nodular lesion on the left side of the abdomen, measuring 4/2 cm. The lesion appeared 1 year earlier and had grown in size. Because of the unspecific dermoscopic appearance, the lesion was excised and sent to us for histological examination.
Results: Microscopy revealed a lesion located in the dermis, consists of nests, sheets of large polygonal or spindle cells with highly granular cytoplasm with vesicular nuclei and some mitotic figures. There was no evidence of melanic pigmentation. Immunohistochemical staining showed strong positivity for CD68 and staining for S100, MelanA, HMB45, panCK, EMA, SMA, CD34 were negative. A diagnosis of primitive non-neural granular cell tumor was made.
Conclusion: Even if PNGCT is a rare but challenging tumor, it is important to avoid misdiagnosis with malignant tumors, such as granular cell tumor(malignant variant) or even melanoma. This case highlights the value of Immunohistochemical staining. It is definitely not a "Friday afternoon" case! Further reports about this rare tumor are needed to improve the knowledge about the evolution of the patients.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Hang, Jen-Fan Taipei Veterans General Hosp. Pathology and Lab Medicine Taipei Taiwan	Poster	Zeng, Bao-Rung Lai, Chiung-Ru
Abstract No. 008				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
The Milan system for reporting salivary gland cytology: 11-year experience from a tertiary hospital in Taiwan

ABSTRACT TEXT

Objective: The recently unveiled Milan System for Reporting Salivary Gland Cytology (MSRSGC) establishes 7-tiered classification and standardized diagnostic criteria for pre-operative evaluation of salivary gland lesions; namely, nondiagnostic (I), non-neoplastic (II), atypical of undetermined significance (AUS, III), benign neoplasm (IVa), salivary gland neoplasm of uncertain malignant potential (SUMP, IVb), suspicious for malignancy (SM, V), and malignant (VI). The aim of this study was to determine the performance of MSRSGC in a large tertiary hospital in Taiwan.
Methods: We retrospectively searched cytopathology archives for salivary gland fine-needle aspirates performed from 2007-2017. Cases were reclassified into MSRSGC diagnostic categories based on the cytopathology report and selected slide review. The corresponding excision or biopsy specimens were identified from surgical pathology archives for the correlation.
Results: A total of 632 salivary gland aspirates was identified in this 11-year period. The distribution of the MSRSGC diagnostic categories were: I: 185 (29.3%), II: 73 (11.6%), III: 21 (3.3%), IVa: 290 (45.9%), IVb: 32 (5.1%), V: 11 (1.7%), and VI: 20 (3.2%). Histology follow-up was available in 279 (44.1%) cases, including 241 excisions and 38 core biopsies. The risk of malignancy for each category was: I: 19% (8/42), II: 10.7% (3/28), III: 33.3% (4/12), IVa: 4% (6/150), IVb: 33.3% (7/21), V: 100% (10/10), and VI: 100% (16/16).
Conclusion: The MSRSGC classification shows high accuracy in SM and malignant categories. The indeterminate categories comprise only limited cases (AUS: 3.3% and SUMP: 5.1%). The risk of malignancy is moderate in both AUS and SUMP (both 33.3%). Our experience is compatible with the MSRSGC estimated data.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Hurnik, Pavel CGB Laboratory Ostrava Czech Republic	Poster	Ziak, Dusan Zidlik, Vladimir Urik, Milan Uvirova, Magdalena Dvorackova, Jana
Abstract No. 008				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Morphological, histochemical and immunohistochemical changes of the tympanic membrane during its transformation to retraction pocket in children - major risk of cholesteatoma

ABSTRACT TEXT

Objective: Retraction pocket of tympanic membrane (RP) is a localised part of tympanic membrane (TM) retracted towards tympanic cavity, it is flexibile with a tendency to collapse into tympanic cavity. RP forms as a result of long-term or recidive underpressure in middle ear which is caused mainly by Eustachian tube dysfunction, but the other hand, there are theories and hypotheses claiming that pathogenesis of RP includes presence of mesenchyma or inflammatory reaction related to otitis media. There are some histological studies describing breakage of basal membrane continuity in cholesteatoma, thus supporting retraction theory of formation of cholesteatoma.
Methods: We examined TM taken during standard operations at Pediatric ENT Department with diagnosis of RP of pars tensa in stages II or III by Charachon classification. We prepared paraffin sections stained with hematoxylin and eosin (HE), Van Gieson, Verhoeff, Alcian and PAS. Then were RP processed for immunohistochemical analysis by antibodies CD45 LCA, CD31, D2-40, MMP9 and Ki67.
Results: We demonstrated the dependence of the density of capillaries on hyperkeratosis (p=0,00837) and on the thickness (p=0,00802), then the interaction of hyperkeratosis and thickness (p=0,00726) and the dependence of the subepithelial inflammation on the thickness (p=0,0188) and papillomatosis (p=0,0463). We compared RP in stage II with stage III by Ki67 (p=0,00438), by CD31 (p=0,02052), by CD45LCA (p=0,00338) and by D2-40 (p=0,0286).
Conclusion: We described morphological and immunohistochemical signs of RP pars tensa of TM in children resulting in cholesteatoma. All the observed signs occur in the structure of matrix and perimatrix of cholesteatoma. A significantly higher incidence of all observed parameters except from MMP9 was proved in retraction pocket stage III, umlike in stage II. This observation proves the fact that retraction pocket is a progressive disease and is a procholesteatoma stage.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10	Immunohistochemistry	Mehboob, Riffat University of Lahore allied health sciences Lahore Pakistan	Poster	Hassan, Amber Tanvir, Imrana Khan, Rizwan Ullah
Abstract No. 008				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Comparison of Substance P immunolocalization among breast, oral and colorectal carcinoma

ABSTRACT TEXT

Objective: Aim of the present study was to evaluate the expression and immunolocalization of Substance P (SP) in different grades of Breast carcinoma (BC), Oral squamous cell carcinoma (OSCC) and colorectal carcinoma (CRC)
Methods: 34 BC biopsies were immunohistochemically analyzed by using SP antibody. 3 cases were well differentiated, 8 were moderately differentiated and 23 were poorly differentiated. HE, ER, PR, HER2 and Ki-67 staining was performed. 40 OSCC biopsies were immunohistochemically analyzed with SP antibody, including 29 male and 11 female cases. 35% were well differentiated, 35% moderately differentiated and 30% poorly differentiated OSCC. 30 CRC biopsies were also immunohistochemically analyzed by using SP antibody. There were 4 cases of poorly differentiated (PD), 17 moderately differentiated (MD) and 9 cases of well differentiated CRC included in this study. The mean age of patients was 45.74 years.
Results: In BC, Maximum cases fall in the age range of 30-50years. Mean age of patients was 46.65 years. 68% of cases were SP positive. 30% moderately differentiated, 61% poorly differentiated and 8% of well differentiated carcinoma cases were positive for SP. SP expression intensity was maximum (+3) in poorly differentiated and moderately differentiated cases.
In OSCC, the majority of patients were in the age range of 41–80 years. 62% of the cases were positive for SP and SP positivity was expressed in the cytoplasm of the tumor cells. Most of the positive cases were from the tongue region. 93% of moderately differentiated, 92% of poorly differentiated and 8% of well-differentiated carcinomas were SP-positive, but SP expression intensity was highest in poorly differentiated cases (+3). More positive patients were males (68.96% of all male patients) with moderately and poorly differentiated OSCC. Among all positive cases, 48% were poorly differentiated, 48% moderately differentiated and 4% well differentiated.
In CRC, 13% of poorly differentiated and 57% moderately differentiated cases were SP positive. SP cell stain intensity was high (+3) both in poorly and moderately differentiated.
Conclusion: SP is over expressed in BC and there is significant association between grade of tumor and SP over expression. Its expression can be used as a predictor for BC prognosis. In OSCC, strong expression of SP in poorly and moderately differentiated cases suggests a role of SP in the progression and development of tumor. Expression of SP in the current study increased as the proliferation of cells increased.
We also suggest SP /NK-1R system as a potential therapeutic strategy to inhibit and manage BC and OSCC. But it is not useful marker for CRC as SP is naturally highly expressed in Colorectal cells and depleted in case of carcinoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13	Pathology of infectious diseases	Liman, Almustapha Aliyu Ahmadu Bello University Pathology Zaria Nigeria	Poster	Abubakar, Murtala Adoke, Kasimu Umar
Abstract No. 008				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Histopathologic diagnosis of tuberculous lymphadenitis in a tertiary hospital in Northern Nigeria: A review of 52 cases

ABSTRACT TEXT

Objective: Tuberculosis remains a major cause of death worldwide. The disease frequently affects the lungs, but other organs may be involved too. The HIV pandemic has resulted in an increase in the prevalence of extrapulmonary manifestations of tuberculosis, of which lymphadenitis is the most common form. The objective was to evaluate the role of TBLN as a cause of lymphadenopathy in biopsy specimens received at the Department of Pathology, ABUTH, Zaria.

Methods: This is a 10 year (2004 – 2013) retrospective review of all lymph node biopsies (LNBs) received at the Department of Pathology, ABUTH, Zaria, Nigeria.
Results: Fifty cases of TBLN were identified in this study constituting 51.5% (52/101) of LNBs received at our Hospital's Pathology Department during the 10 year period under review. Acid fast bacilli demonstration was positive in 88.5% (46/52) of cases using Ziehl-Neelsen stain. Of the total TBLN cases seen then 46.2% (24/52) were males and 53.8% (28/52) were females. The male to female ratio was 1:1.2. Most TBLN occurred in the 21 – 25 year age group which constituted a total of 19.2% (10/52) of cases. The most common biopsy site for TBLN was the cervical group of lymph nodes, followed by submandibular and axillary groups with 44.2% (23/52), 19% (10/52), and 15.3% (8?52) of case respectively.
Conclusion: Tuberculous lymphadenitis is the most common cause of lymphadenopathy seen in biopsy specimens received here. The need to distinguish tuberculous from non-tuberculous lymphadenitis cannot be overemphasized.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Mendonça, Maira IAMSPE Dept. of Pathology São Paulo Brazil	Poster	Molinari, Fabio
Abstract No. 008				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Calcifying Pseudoneoplasm of the Neuraxis: A case report

ABSTRACT TEXT

Objective: description of the case report, a discussion that includes a detailed explanation of the literature review
Methods: review of medical history
Results: Besides being rare, those lesions have histopathologic characteristics well marked and that are shown in the case presentation
Conclusion: Calcifying pseudoneoplasms are rare, benign and should be remembered as differential diagnosis of calcified lesions inside the nervous system.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	Moety, Shaymaa Sultan Qaboos University Hospital Dept. of Pathology Muscat Sultanat of Oman	Poster	Shalaby, Asem
Abstract No. 008				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Giant cystic lymphangioma of the mesentry of small intestine in a child: A case report

ABSTRACT TEXT

Objective: Case report
Methods: Case report
Results: Cystic lymphangioma is a rare malformation of the lymphatic vessels that is located mainly in the head, neck and axilla and it is usually discovered in childhood and rarely in adults. Lymphangiomas of the small bowel mesentery are rare intra-abdominal tumors. They are usually discovered incidentally during examination for an unrelated abdominal illness. However, it can cause serious complications such as volvulus or involvement of the main branch of the mesenteric arteries that require emergency surgery. Lymphangioma is frequently difficult to diagnose, and surgical resection is usually done in many cases for the purpose of both diagnosis and treatment. Here we reported a case of 8-years old boy who presented to the emergency department in Sultan Qaboos University Hospital (SQUH) with history of trauma since few days. Physical examination showed an ill-defined abdomino-pelvic mass that was palpable involving the pelvis, umbilicus and left iliac fossa. Preoperative studies including abdominal ultrasonography and computed tomography showed a huge circumscribed cystic lesion centered in the mesentry measuring 16.2 x 13.8 x 8.4 cm and displacing the bowel loops. The provisional diagnosis was a mesenteric cyst versus lymphangioma. An exploratory laparotomy was done and a diagnosis of a giant jejunal duplication cyst was made. The cyst was excised completely and sent for pathological examination. The gross examination showed a huge cyst with localized thickening containing multiple locules. The histological study showed a multi-locular cyst with fibrous walls lined by a single layer of endothelial cells with aggregates of lymphoid cells. The cyst spaces contain eosinophilic homogemnous material and a diagnosis of a cystic lymphangioma was made. In conclusion, a diagnosis of huge cystic lymphangioma should be always put in consideration in children presenting with huge cystic abdominal masses.
Conclusion: Cystic lymphangioma
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Gynecological pathology	Seki, Reshi Toda Central Medical Laboratory Dept. of Pathology Toda Japan	Poster	Hiroshima, Kenzo
Abstract No. 008				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Malignant mesothelioma with heterologous elements

ABSTRACT TEXT

Objective: Malignant mesothelioma (MM) with heterologous elements such as osseous, cartilaginous, or rhabdomyoblastic differentiation is very rare, and it is also very difficult to differentiate from extraskeletal osteosarcoma of the pleura. We examined such MM cases and pleural osteosarcomas (PO) using clinicopathological and immunohistochemical methods, and also FISH to examine for homozygous deletion of p16.
Methods: Using formalin-fixed paraffin-embedded blocks from each case, we compared 10 malignant pleural mesotheliomas (3 biphasic type and 7 sarcomatoid type) with 2 pleural osteosarcomas.
Results: The median age was 72 years for mesotheliomas, (range, 64 to 86 years), and 69 years for osteosarcoma (range, 67 and 70). For MM, 9 cases were male and 1 was female. Including 1 case (case 10) of localized MM, all cases of MM exhibited a diffuse growth pattern, as did 2 cases of localized PO. Among MM cases, 80% (8/10) displayed osteosarcomatous and 60% (6/10) chondromatous elements, while 10% (1/10) exhibited rhabdomyoblastic ones. Immunohistochemical labeling for calretinin and AE1/AE3 was present in 8 out of 10 and 7 of 10 MM, respectively, but in only 1 (with focal staining) of PO. FISH analysis revealed homozygous deletion of p16 in 6/9 MM and 2/2 PO. Exposure to asbestos was identified in 8 out of 10 MM, and in both cases of PO. Median survival was 7.6 months after biopsy or surgical operation in MM, and 18 months after operation in PO. One patient with localized PO (case 1) died 24 months after operation.
Conclusion: Although median survival was longer for PO than for MM, we could not differentiate MM from PO in the pleura on the combined basis of clinicopathological, immunohistochemical data, and FISH analysis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Mohammad Arafa, Mohammad Mahmoud Mansoura University Dept. of Pathology Mansoura Egypt	Poster	Salama, Amany Shebl, Abdelhadi ElZahaf, Eman Awad, Azmy
Abstract No. 008				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Relationship of immunohistochemical markers with clinicopathological prognostic parameters in endometrial carcinoma

ABSTRACT TEXT

Objective: This study aims to assess the relation between the expression patterns of estrogen receptors (ER), progesterone receptors (PR), HER2 and the Ki-67 index with the different histopathological prognostic parameters in endometrial carcinoma (EC).
Methods: We examined 109 cases of endometrial carcinoma (EC) regarding the expression of ER, PR, HER2 and Ki-67 by immunohistochemistry in relation to the age, tumour size, FIGO stage and grade, depth of infiltration, cervical and ovarian involvment, lymhovascularspace invasion (LVSI) and lymph nodes (LN) metastasis.
Results: The mean age of patients was in this study was (59.8 years ± 8.2). Low ER and PR expression scores and high Ki-67 showed high significant association with non-endometrioid histology (P=0.007 &P<0.001&P<0.001) and poor differentiation(P=0.007 &P<0.001&P<0.001). Low PR score shows highly significant association with advanced stage (P=0.009).Low ER score is highly asscociated with lymphovascular invasion (P=0.006), and low PR scores is associated significantly with LN metastasis (P=0.026). HER2 expression significantly associated with advanced stages (P=0.04), increased depth of infiltration (P=0.02), lymphovascular invasion (P=0.017), ovarian involvement (P=0.038) and LN metastasis (P=0.038). There was a high statistically significant association between HER2 expression and cervical involvement (P=0.009). Higher Ki67 values is associated with LN involvement (P=0.012).
Conclusion: The overexpression of HER2 and Ki-67 and low expression of ER and PR seems to indicate a more malignant behavior and should be contributed to an immunohistochemical panel for the identification of high-risk tumors.
Note: This abstract is for an IAP Bursary Application
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-11	Molecular pathology	Wadee, Reubina University of Witwatersrand Dept. of Anatomical Pathology Johannesburg South Africa	Poster	Naidoo, Sharlene Grayson, Wayne
Abstract No. 008				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
A comparison of microsatellite instability by immunohistochemistry versus polymerase chain reaction in endometrial carcinomas

ABSTRACT TEXT

Objective: Endometrial carcinomas are common tumours of the female genital tract. Currently, there is an increase in incidence worldwide. Microsatellite instability (MSI) is a frequently identified abnormality in endometrioid endometrial carcinomas (EEC's) and is documented in most cases of the hereditary tumour syndrome; Lynch Syndrome (LS). It is also observed in up to 30% of sporadic tumours. Our study aimed to compare results of MSI by immunohistochemistry (IHC) to those obtained by polymerase chain reaction (PCR).
Methods: 145cases diagnosed as EEC were retrieved from the department of Anatomical Pathology, University of the Witwatersrand/National Health Laboratory Service (NHLS) using a SNOMED search of DISA and LabTrack systems. Each case underwent immunohistochemistry (IHC) for 4 mismatch repair (MMR) antibodies and were assessed for the presence or absence of staining in tumour nuclei. Negative staining indicated microsatellite instability. Each case also underwent PCR testing for MSI.
Results: 18 cases showed MMR deficiencies by IHC but were stable by PCR. 21cases were unstable for both PCR and IHC. 25cases were stable by IHC, but unstable by PCR.76cases were stable for both test methods. If PCR is regarded as the gold standard, the sensitivity of IHC is 45.65%; 95%CI (37.40-53.90), the specificity is 80.85%, 95%CI (74.33-87.37), the positive predictive value (PPV) is 53.85%, 95%CI (45.59-62.11) and the negative predictive value (NPV) is75.25%, 95% CI(68.10-82.40).
Conclusion: These results demonstrate that the specificity of IHC testing for MSI in EEC's in our department, is far greater than the sensitivity when compared to PCR. Thus, PCR should be undertaken in addition to IHC to ensure that cases suspected of LS are not missed so that further management may be instituted for patients.
Policy of full disclosure: Dr. Reubina Wadee has received funding from: University of the Witwatersrand Faculty Research Committee funding to individuals, University of the Witwatersrand SEED funding, National Health Laboratory Services (NHLS) Research Trust and the National Research Foundation (NRF) Thuthuka Grant. For the remaining authors, none was declared.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Asaturova, Alexandra Kulakov Center Dept. of Pathology Moscow Russia	Poster	
Abstract No. 009				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
The progenitor-cell profile of pelvic transition zones (ovary, fallopian tube and mesothelium junctions)

ABSTRACT TEXT

Objective: High-grade serous ovarian carcinomas (HGSC) are the most widely spread and lethal ovarian cancers and its precise pathogenesis is yet to be investigated. It is supposed that there can be different sources of this tumor (in the ovarian surface epithelium (OSE), peritoneal mesothelium or in the fimbrial part of fallopian tube (FP). The potential trigger cells can localize in the transition zones (tubal-peritoneal, tubo-ovarian and ovarian-peritoneal). To prove this theory we investigate progenitor cells expression and their distribution.
Methods: Formalin-fixed sections of FP with tubal-peritoneal zone verification, ovaries with ovarian-peritoneal junction (in the hilum) and tissue samples with 'ovarian' fimbriae (tubo-ovarian junction) from patients with extraovarian pathology (n=25) and with HGSC (n=25). All samples were stained immunohistochemically for the stem-cell markers NANOG, LHX9, OCT4, CD 117, CD44, LGR5. We used Mann-Whitney U-test for statistcs.
Results: A total of 25% to 100% of surface OSE expressed all markers except CD44, which occurred only in the cells with tubal-like phenotype). Fallopian tube epithelium shows wide spectrum of progenitor markers expression: the strongest and the most extensive expression of CD 44 were found in peg cells; expression of NANOG were detected in 20% of FP cells, expression of CD117 and oct4 were negative. Expression of Oct4 was the highest in 'ovarian fimbriae' with only weak expression in other zones. The least informative marker was CD117 which is known to express in early HGSC but does not express in normal OSE and FP. The most valuable markers were NANOG and LGR5 which showed the most noticeable expression of in all transition zones. We detected the significantly higher expression of LGR5 in OSE in compare to ovarian-peritoneal transition zone (p=0.0001) and in compare to HGSC (p=0.0007), in fimbrial part of FT in compare to TPTZ (p=0.0020) and to HGSC (p=0.0090), in TPTZ in compare to 'ovarian fimbria'(p=0.0016) and in compare to HGSC (p=0.0050). In addition we showed the significantly higher expression of NANOG in OSE in compare to TPTZ (p=0.0300) and in compare to ovarian-preitoneal transition zone (p=0.0500).
Conclusion: Our results provide evidence about progenitor cells distribution with marked concentration of some of them in transition zones. This data proved the role of epithelial junctions as a trigger zones for HGSC pathogenesis due to the highest concentration of progenitor cells.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10	Immunohistochemistry	Bellil, Khadija Hopital des FSI la Marsa Service La Marsa Tunisia	Poster	Nfikha, Zeineb Dhaoui, Amen Ben Ghachem, Dorra Hemdani, Nesrine
Abstract No. 009				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Androgen receptor signaling in bladder urothelial carcinoma

ABSTRACT TEXT

Objective: The purpose of this study was to evaluate expression of androgen hormone receptors in bladder urothelial carcinoma .
Methods: From January 2017 to February 2018, we retrospectively collected tumor samples of patients diagnosed with urothelial bladder carcinoma at the pathology departement of the FSI hospital, La Marsa. Our study was about 30 cases, one case of female patient was excluded. Immunohistochemical study was performed.
Results: The average age was 65 years with extrems ranging from 43 to 86 years. We had 24 cases of non muscle invasive carcinoma and 5 muscle invasive carcinoma cases. Depending on the OMS grade(2016) our cases were divided into 18 low grade and 11 high grade. A total of 12 (41%) patients immunohistochemically stained for AR. Tumors showing positivity for AR were 47% high grade and 41% low grade, with two cases of superficial positivity observed in Ombrella cells. 85% of the staining tumors were non muscle invasive and 15% were muscle invasive. 59% of the tumors were AR negative including 76% low grade and 24% high grade ; 83% were non muscle invasive and 17% muscle invasive. Carcinoma in situ lesions present in 2 cases were AR positive.
Conclusion: Unlike literature data expression of AR seems to be negatively correlated to the grade with 73% low grade tumors being negative for AR. A correlation with the stage seems to be less evident.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Athanasiou, Evangelia Microdiagnostics Thessaloniki Greece	Poster	Michalopoulou Manoloutsiou, Electra Bobos, Mattheus Goupou, Eleni Fytili, Panagiota Hatzibougias, Dimitris
Abstract No. 009				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Granular cell tumor of rectum: Report of a case)

ABSTRACT TEXT

Objective: Granular cell tumor can arise in any body site and is most commonly seen in skin, subcutaneous tissue and oral cavity. These neoplasms are rare in gastrointestinal tract with very few reports of rectal location. We report one such case of an asymptomatic 50-year-old man, presenting to the gastroenterology clinic for screening colonoscopy.
Methods: Endoscopy incidentally revealed a polypoid lesion and the patient underwent endoscopic curative resection. Grossly, the specimen measured 0,7 cm. in maximal diameter. Microscopic examination revealed submucosal distribution of nests and sheets of tumor cells with small round, uniform nuclei without mitotic activity. Immunohistochemically and histochemically the tumor cells expressed S100, CD68 and PAS-d respectively. The covering mucosa was intact.
Results: The final diagnosis was Granular cell tumor of rectum. Subsequently, the patient underwent a rectal endoscopic ultrasound that confirmed complete removal of the tumor.
Conclusion: Granular cell tumor is a neoplasm of Schwann cell origin with excellent prognosis in most cases. However, 2% of them can be malignant. Histopathology is essential for distinction between benign and malignant variants. Histological criteria with prognostic significance, such as necrosis, spindling, vesicular nuclei, increased mitotic activity, nuclear pleomorphism and high nuclear/cytoplasmic ratio can predict aggressive clinical behavior.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Bourhroum, Najoua Ibn Sina University Hospital Rabat Morocco	Poster	Znati, Kawtar Bernoussi, Zakya
Abstract No. 009				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Rare primary cancer in urinary bladder: A small cell carcinoma

ABSTRACT TEXT

Objective: We presented an interesting and uncommon case, in which the transitional cell tumor was found in the transurethral resection specimen, but the small cell carcinoma was detected in the final radical cystectomy material.
Methods: Case report
65-year-old male was admitted to our urology department with hematuria. CT and cystoscopy revealed the presence of an invasive tumor of the bladder; the biopsy was in favor of high-grade urothelial carcinoma with a small-cell neuroendocrine comonent.
The final examination of resection specimen shows a small cell carcinoma without being able to individualise a urothelial contingent.
A complementary assessment is carried has not shown any other location
We concluded to a primitive small cell carcinoma in urinary bladder
Results: DiscussionSmall cell carcinoma is less than 1% in urinary bladder tumors and is very aggressive and refractory to treatment due to its higher metastatic capability compared to other common bladder tumors. When it is diagnosed, the disease is mostly in the metastatic stage, so the patients generally have a poor prognosis. To improve the cure chance or life expectancy, a multidisciplinary approach including radical cystectomy, chemotherapy, and radiation therapy should be initiated as soon as possible
Small cell carcinoma of bladder has similar characteristics of age, sex, and symptoms to high grade urothelial carcinoma(HGUC). In addition the radiological images of these 2 different tumors are also the same. They can be distinguished by histopathologic examination. Small cell carcinoma of bladder is more rare and aggressive than HGUC . Even if HGUC was detected in the first cystoscopic evaluation, re-TUR should be done to identify the concomitant different tumor like small cell carcinoma and to determine possible muscle invasion. In our case, small cell carcinoma was diagnosed in the pathologic evaluation of the cystectomy specimen.
Conclusion: There are few data on the ideal approach for diagnosis and treatment in this tumor. In such cases, urologists, pathologists, and medical oncologists have a big responsibility. With a multidisciplinary approach, early diagnosis and immediate intervention can supply a better survival and a more comfortable life.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	Canzonieri, Vincenzo CRO, IRCCS Aviano SOC Gastroentero logia Aviano Italy	Poster	Fornasarig, Mara Fornasarig, Mara Spessotto, Paola Magris, Raffaella Maiero, Stefania Cannizzaro, Renato
Abstract No. 009				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Probe-based confocal laser endomicroscopy (pCLE) could address pathologist to diagnosis of high grade neuroendocrine carcinoma (HGNEC)

ABSTRACT TEXT

Objective: Extrapulmonary high grade neuroendocrine carcinomas (HGNECs) are rare but very aggressive tumors that can be found throughout the body even if they are commonly located in the gastrointestinal and genitourinary tracts.
HGNEC should not to be confused with poorly differentiated carcinomas with neuroendocrine features, which is not a true HGNEC but an aggressive variant of adenocarcinoma or squamous cell carcinoma that should be managed as such. Since most HGNECs present with advanced disease, staging is performed using the standard techniques of endoscopic ultrasound along CT of the abdomen, thorax and pelvis.
In this report we described a case of HGNEC analyzed for the first time also with probe-based confocal laser endomicroscopy (pCLE) system.
Methods: Rectal ultrasound endoscopy was performed in a man of 72 year old man with rectal submucosal lesion. The lesion was highly growing and ulcerated compared to previous endoscopy. pCLE was performed resulting in a real time imaging of more than 2 thousand frames off-line analyzed. Biopsies were taken for histological analysis.
Results: pCLE showed a peculiar cellular pattern : altered mucosal architecture with a large amount of small cells indicated for HGNEC. This pattern was quite different from poorly differentiated adenocarcinomas (PDA) where tissues appeared darker, very irregular even if glandular structures could be still recognized. Immuno histochemical anlaysis diagnoses High grade neuroendocrine carcinoma. Vasculature and mucosal pattern resulted by pCLE compared to immune-histochemical analysis were quite overlapping (figure 1).
Conclusion: High-grade neuroendocrine carcinomas (HGNECs) constitute a series of aggressive malignancies.
Colorectal HGNECs constitute a rare histological subtype, with poor prognosis, of colorectal cancer.
Because of rarity, histological heterogeneity, and the poor prognosis It is important to evaluate a valid and rapid method to diagnose the tumor. In this case report we confirm the usefulness of pCLE as method in vivo that could allow to address pathologist to the diagnosis of neuroendocrine tumors.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Fayed, Zeinab National Liver Institute Dept. of Pathology Sirs Ellayyan, Menoufia Egypt	Poster	Elazab, Deena
Abstract No. 009				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Epidemiology and pathological characteristics of malignant obstructive jaundice in Egypt

ABSRACT TEXT

Objective: To study the epidemiological and the pathological properties of malignant obstructive jaundice in Egyptian patients eligible for surgical intervention.
Methods: This longitudinal study included 108 cases with malignant obstructive jaundice who had undergone whipple's operation.
Clinical and demographic data were collected from the medical and pathological reports retrieved from the Pathology Department, National Liver Institute, Menoufia University, from 2011 to March 2018.
Results: Results revealed that 50% of the studied cases were at least 54 years old, 63% were male and 37% were female. Regarding type 55.5% of the cases were ductal pancreatic adenocarcinoma and 44.4%were ampullary and periampullary adenocarcinoma. Regarding the grade 23.2% were well differentiated, 63.9% were moderately differentiated, 5.6% were poorly differentiated and 0.9% undifferentiated. About 53.7% of the cases were located at the pancreatic head and about 57.4% were positive for lymph node involvement. 56.7% of the cases were at least 3.5cm on the greatest dimension. About 71% of the cases had perineural invasion (88.3% Pancreatic) and 21.3% showed Lymphovascular invasion . About 22% of cases of ductal pancreatic adenocarcinoma were on top of chronic pancreatitis.
Conclusion: On the basis of 108 Egyptian cases with malignant obstructive jaundice more common in males with a median age 54 years old. It is more common due to pancreatic adenocarcinoma and it is mostly moderately differentiated, with perineural invasion in most cases.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Devalland, Christine Hopital Nord Franche Comte Dept. de Anatomie Pathologique Belfort France	Poster	Al Masry, Zeina Mlawhi, Manel Bazan, Fernando Arnould, Laurent Baltres, Aline Zerhouni, Nourredine
Abstract No. 009				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Comparison of histopathological features and multi-gene signature oncotype DX score in luminal B mammary carcinomas

ABSRACT TEXT

Objective: The Oncotype DX (ODX) assay is a multi-gene test for breast cancers. It determines a recurrence score (RS) at 10 years and predicts a benefit of chemotherapy.
To compare the ODX RS and the classical data of invasive breast carcinoma.
Methods: A retrospective study at the Nord Franche Comté hospital and CAC of Dijon from 2012 to 2018:91 patients Luminal B type tumors.The tumor samples have histological study and immunostaining: Receptor Estrogens (ER) Progesterone (RP), HER2, ki67 and molecular analysis to Genomic Health Inc : 3 classes RS: low 0-1, intermediate 18-30, high 31-100. Two statistical tests : a parametric independence test "Pearson's chi-square test" and a non-parametric Spearman test.
Results: Average age 57.6 years, average tumor size : 18.80 mm . Histological types: 84 non-specific carcinomas, 1 micro papillary carcinoma, 6 lobular carcinoma. TNM : If we group the T1a and T1b classes, we notice an absence of relationship with RS by the Khi2 test (p = 0.6811). By the chi-square test there is no association between lymph node status and the RS score (p = 0.9150). By grouping the modalities between grade 1 and 2, there is a relationship between grade and RS score by the chi square test (p = 0 .0122). The ODX and IHC results RE, RP, HER2 are correlated. The mean Ki67 is 27.5% and is positively correlated. Follow up : 84 patients without recurrence: 7 metastatic progressions 3 high-risk RS patients; 4 patients low RS and discordance with pathological data :tumor size 24 mm, ki67 24%, macro metastasis.
Conclusion: There is a good correlation of ODX for grade I and II tumors with low or intermediate RS and discordance on grade III tumors. There is a concordance of the RS score with KI67. It may be interesting for discrepancy to confront the pathological data and ODX.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Hurnik, Pavel CGB Laboratory a.s. Pathology Ostrava Czech Republic	Poster	Zidlik, Vladimir Ziak, Dusan Sporkova, Marie Stembirek, Jan Buchtova, Marcela Cermakova, Zuzana Dvorackova, Jana
Abstract No. 009				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Perineural invasion of squamous cell carcinoma of the head and neck - the beginning of the path

ABSRACT TEXT

Objective: Perineural invasion has been defined as the ability of cancer cells to invade through, in or around nerves and is clinically associated with elevated recurrence and diminished survival. It was defined more than 100 years ago and it is morphologically described in solid head and neck tumors, prostate, pancreatic or colorectal cancer. Only a few years ago, the attention was devoted to the factors leading to it.
Methods: We have retrospectively analyzed cases of 532 pacients with squamous cell carcinoma of head and neck in age from 33 to 86 years. In all cases, cervical block dissection was also perfomed with the resection of the main tumor. Patients without cervical block dissection were excluded. All cases were paraffin embedded and 3 um sections were stained by means of the hematoxylin and eosin. The tumor size, depth of invasion, the presence and morphology of perineural invasion and the presence of lymfangioinvasion and hemangioinvasion were evaluated.
Results: From the total number of 532 cases, 70 (13,15%) cases with perineural invasion, 22 (4,13%) with hemangioinvasion and 60 (11,27%) with lymphangioinvasion were encountered. Generalisation to ipsilateral lymph nodes was found in 249 (46,80%) cases, contralateral generalisation was present in 39 (7,33%) cases. These factors were statisticaly compared with final statistical signifikance.
Conclusion: We focused mostly on the perineural invasion (PNI), which is probably based on the chemotropism of tumor cells that can be stimulated by nerve tissue to further growth. The interactions between tumor and neural cells is not only limited to cell migration and tumor growth from the primary location but such interaction can also stimulate axonogenesis or extend the nerves themselves together with increasing number of axons. The subject of our further study and this poster will bet he analysis of changes in epithelial-mezenchymal transformation and the presence and distribution of chemoatraktans of nerve tissue.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Ilyés, Ágota Emergency County Hospital Pathology Miercurea Ciuc Romania	Poster	Nedeloiu, Tiberiu Marian, Cristina
Abstract No. 009				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Coexistence of HHV-8 infection associated Kaposi's sarcoma and hyaline vascular variant of multicentric Castelman's disease in a HIV negative patient

ABSTRACT TEXT

Objective: The human herpesvirus 8 (HHV-8) is an oncogenic virus associated with Kaposi's sarcoma and some lymphoproliferative disorders like multicentric Castleman's disease, which are found mostly in HIV positive individuals, but rarely are diagnosed in seronegative patients.
Methods: We present a case of a 59 years-old male with no significat medical history, who was admitted to the Internal Medicine Department accusing severe asthenia and fatigue, diffuse abdominal pain, vomiting and nausea.
Results: The clinical examination revealed generalized lymphadenopathy and hepatomegaly associated with severe inflammatory syndrome, so a lymphoproliferative disorder was suspected. An osteomedullary biopsy (OMB) and an inghinal lymph node biopsy was performed. The OMB presented normal cellularity with minimal reactive lymphocytosis, and the morphology of the lymph node was suggestive for hyaline vascular variant of Castleman's disease. Test for HIV infection was carried out, which was negative. The patient followed simptomatic and- corticotherapy with favorable clinically outcome. After 3 months he was admitted again in the same Department with severely altered general status, persistence of the lymphadenopathy, high fever and a broad confluent maculo-papular violaceous eruption on his right leg. Clinically an autoimmune vasculitis was suspected and a cutaneous and a mesenteric lymph node biopsy was perfomed. The morphology of the lymph node was similar with the previous one and on the skin biopsy we noted the presence of a diffuse infiltrative vascular proliferation, lined by a single layer of plump endothelial cells with hyperchromatic nuclei and some pleomorfism, around with eosinophilic spindle cells admixed with chronic inflammatory cells. The diagnosis of a plaque stage Kaposi's sarcoma and multicentric Castleman's disease was made and the HHV-8 infection was proved by immunohistochemistry and by blood tests.
Conclusion: HHV8-associated neoplasms represent a unique group of rare malignancies, associated in most of the cases with HIV infection or immunosuppression. In our case we could not prove the presence of any immunosupression, the advanced age was the only risk factor.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Jalaly, Jalal Penn Medicine, HUP Pathology Philadelphia USA	Poster	Ioannidis, Ioannis Baloch, Zubair
Abstract No. 009				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Endobronchial Ultrasound-guided Fine Needle Aspiration (EBUS-FNA) of thoracic lesions: Literature review

ABSTRACT TEXT

Objective: Endobronchial Ultrasound-guided Fine Needle Aspiration (EBUS-FNA) has largely replaced mediastinoscopy for the diagnosis and staging of lung cancer. Our aim was to perform a comprehensive review of the literature to assess the diagnostic categories used and their associated risk of malignancy.
Methods: We searched Medline database for published original articles in the English language that had more than or equal to 40 EBUS-FNA cases of various lesions (lung nodules and/or lymph nodes). The search keywords included: lung, FNA, EBUS, cytology, and lymph nodes. We included studies with surgical pathology follow-up and excluded those before 2008.
Results: Twenty-two studies met the search criteria, of which 9 had surgical pathology follow-up. The number of EBUS-cases in these studies ranged from 40 to 727. The cytology diagnostic categories utilized for reporting ranged from two (benign and malignant) to five (non-diagnostic, benign, atypical, suspicious, and malignant). The risk of malignancy for each diagnostic category was calculated based on surgical pathology follow-up (see tables).
Conclusion: The ROM for cases diagnosed as malignant ranged from 87-100%. However, the reported ROM for benign EBUS cytology ranged from 0-24.5%, this may be related to the lack of agreed upon adequacy criteria. It should be noted that an unavoidable caveat in calculating the ROM based on surgical follow-up is the selection bias for clinically high risk cases. This phenomenon leads to over-estimation of the true ROM, which probably resides somewhere in between the lowest and highest range.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Koh, Fong Seen Dorevitch Pathology Dept. of Anatomical Pathology Albury Australia	Poster	
Abstract No. 009				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Nodular pulmonary amyloidosis: A Frozen Section for Lobectomy?

ABSTRACT TEXT

Objective: Discussion about the clinical presentation, frozen section, histopathology and ancillary findings of pulmonary amyloidosis
Methods: We presented a frozen section of a solitary lung lesion for further lobectomy if indicated. The differential diagnosis given were broad and included infection, benign neoplasm of the lung, primary pulmonary malignancy or metastasis.
Results: Clinicopathological and radiological correlation is important to differentiate nodular pulmonary amyloidoma from neoplasm, especially during a frozen section for further lobectomy
Conclusion: It is important to distinguish the entities and the differential diagnosis of a nodular pulmonary amyloidosis to prevent unnecessary lobectomy during a frozen section
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	Mungania, Mary Kenyatta National Hospital Laboratory Medicine Nairobi Kenya	Poster	
Abstract No. 009				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Summary of autopsy findings at a private paediatric health facility in Nairobi-3yr review

ABSTRACT TEXT

Objective: To determine a 3yr total mortality, autopsy rate and trends, concordance of antermortem and post mortem diagnosis in a medium sized, private paediatric health facility located in Nairobi, Kenya.
Methods: : Retrospective descriptive cohort study of all deaths and autopsies at Gertrude's Children Hospital occurring between January 2013 and December 2015 was done. Total mortality data, total male and female autopsies, age distribution, antemortem and postmortem diagnoses classification using the Goldman's criteria were determined. Data was summarized and tabulated in Excel and Stata 13 software was applied for statistical analysis.
Results: : A total of 166 deaths were recorded in the three year period. There were 91 males (55%) and 75 females (45%) giving a ratio of 1.2:1. A total of 32 autopsies were performed, rate of 19%.Male,38% and female 62%.68.8% of the autopsies were performed in the age group <12months.Using the Goldman's criteria, complete concordance between ante mortem and post mortem diagnosis was 71.9% while new diagnosis was made in 9.4%.
Conclusion: The mortality rate at this private institution was 0.8 %.The autopsy rate was 19% while there was no significant autopsy trend (P Value=0.594) noted over the period. The majority of antemortem diagnosis were recorded as infectious processes(62.5%).The concordance between antemortem and postmortem diagnoses was 71.9%.The autopsy rate is low as compared to findings elsewhere, and may be explained that this being a private institution,clinical definitive diagnosis is attained due to available and thorough investigations performed. The hospital population is also low as compared to similar studies done in much larger institutions.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Muzashvili, Teona Tbilisi State Medical University Dept. of Pathology Tbilisi Georgia	Poster	Burkadze, George
Abstract No. 009				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Astroblastoma in a young adult patient: A case report with histopathological and immunohistochemical correlations

ABSTRACT TEXT

Objective: Astroblastoma is an uncommon brain tumor of glial origin, with typical manifestation in the young age, although few congenital cases have also been described. Sometimes isocitrate dehydrogenase 1/2 (IDH1/2) mutations, common in gliomas, have been also suspected in astroblastoma.
Methods: Patient 25-year-old male presented with a history of three months headache. No other clinical comorbidity was presented. Magnetic resonance imaging (MRI) of the brain demonstrated well circumscribed, intra-axial abnormal signal intensity lesion measuring 4×3 cm in the occipital region of the brain. Histopathological examination, was done formalin fixed and paraffin embedded tissue and immunohistochemistry staining method too.
Results: Histologicaly, was revealed a neoplastic lesion with columnar to elongated and showed abundant eosinophilic cytoplasm with a prominent, stout and tapering cellular process terminating on central hyalinized blood vessels in rosette. There was no anaplastic features, atypical mitotic figures and necrosis. According to these features differential diagnosis included of ependymoma. Accordingly, immunohistochemistry for GFAP (clone - EP672Y), EMA (clone - E29) , S100 (polyclonal) , AE1/AE3 (clone - A1E/AE3) , Ki67 (clone - MM1) , P53 (clone DO7), Vimentin (clone - V9) was performed using standard methods like histopathology. Results showed us GFAP and Vimentin positivity, EMA and S100 were focally positive, AE1/AE3 and P53 were negative and ki67 was 5%.
Conclusion: Histological features and immunohistochemical results for ependymoma and astroblastoma look like each other. However, according to magnetic resonance imaging localisation is more specific for astroblastoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Njim, Leila F. Bourguiba Hospital Monastir Monastir Tunisia	Poster	Belkacem, Oussama Ben Abdeljelil, Nouha Njima, Manel Chouchen, Sara Ben Khalifa, Sara Moussa, Adnene Zakhama, Abdelfatteh
Abstract No. 009				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Nodular Fasciitis: A retrospective study of 16 cases

ABSTRACT TEXT

Objective: Nodular Fasciitis (NF) is a rare benign fibroblastic-myofibroblastic soft tissue tumor. It is commonly found in the upper extremities, the trunk and the head and neck region. The aim of this work was to study the different clinicopathological features of NF diagnosed in the pathology department of Monastir University Hospital and to compare them with the data of the literature.
Methods: Sixteen cases of NF diagnosed from January 2003 to December 2016 were reviewed for pathological features, clinical and surgical follow-up data.
Results: The average age was 22.6 years old with a slight female predominance (sex ratio =1.3). None of our patients reported the notion of local trauma neither functional complaints. The lesion was unique in all patients. It was located in the head and neck area in 5 cases, in the trunk in 4 cases and in lower extremity in 4 cases.
Grossly, the size of the tumors ranged from 2 to 4 cm with an average of 2.7 cm.
Histologically, the lesion was subcutaneous in 13 cases, intrafascial in 2 cases and intramuscular in 1 case. A zone phenomenon characterized by variable cellularity and alternating fibrous zones and edematous or even myxoid zones was found in 13 cases. The lesion consisted of proliferation of fusiform cells with eosinophilic abundant cytoplasm and a clear oval nucleus. Mitoses were not atypical and visible in 8 cases.
After surgical resection, no recurrence was noted during follow-up, with a decline ranging from 1 to 5 years.
Conclusion: The NF is a benign tumor treated by a complete surgical excision. However, sometimes the rapid growth of NF and its cellular characteristics with mitotic richness can mimic tumors of more pejorative prognosis, such as sarcomas. It must therefore be formally identified and recognized by the pathologist in order to avoid aggressive therapeutic attitudes.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13	Pathology of infectious diseases	Rakislova, Natalia Hospital Clínic Barcelona Pathology Dept. of Pathology Barcelona Spain	Poster	Hurtado, Juan Carlos Castillo, Paola Castrejon, Natalia Carrilho, Carla Ordi, Jaume
Abstract No. 009				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Postmortem interval and diagnostic performance of the autopsy methods

ABSTRACT TEXT

Objective:
Postmortem studies, including the complete diagnostic autopsy (CDA) and the minimally invasive autopsy (MIA), an innovative approach to post-mortem sampling and cause of death investigation, are commonly performed within 24 hours after death because the quality of the tissues deteriorates over time. This short timeframe may hamper the feasibility of the MIA particularly in health facilities located in rural or remote areas. We compared the diagnostic performance of the MIA and the CDA when carried out earlier and later than 24 hours after death, as well as the impact of increasing postmortem intervals (PMIs) on the results of the microbiological tests.
Methods: 282 coupled MIA/CDA procedures were performed (18 stillborn babies, 41 neonates, 54 children, 57 maternal deaths and 112 adolescent and adults older than 15 years) in Central Hospital of Maputo, Mozambique between 2013-2015. 214 procedures were conducted within 24 hours of death (early autopsies), and 68 MIA/CDA after 24 hours (late autopsies). The bodies were refrigerated until the autopsies were performed.
Results: No diagnostic differences were observed between the early and late autopsies, and no significant differences were observed in the number of cases that were non-conclusive (2/214 [1%] vs.1/68 [1%] p=0.5645 for the CDA; 27/214 [13%] vs. 5/68 [7%] p=0.2332 for the MIA). Increasing PMI were associated with a raise in the number of bacteria identified in the MIA (rate: 1.014 per hour (p=0.0228). This increase was mainly due to rising numbers of bacteria of the Enterobacteriaceae family and Pseudomonas genus strains.
Conclusion: Performing the MIA and the CDA more than 24 hours after death can render reliable diagnosis, not only for non-infectious conditions but also for many infectious diseases. However, the contribution of Enterobacteriaceae and Pseudomonas spp. as etiological agents leading to death may be overestimated when the procedures are performed more than 24 hours after death.
This abstract is submitted with a IAP Bursary Application for trainees
Policy of full disclosure

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Athanasiou, Evangelia Microdiagnostics Pathology Thessaloniki Greece	Poster	Michalopoulou Manoloutsiou, Electra Bobos, Mattheos Goupou, Eleni Fytili, Panagiota Hatzibougias, Dimitris
Abstract No. 010				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Adenoid cystic carcinoma of Bartholin's gland: Report of a case

ABSTRACT TEXT

Objective: Primary adenoid cystic carcinoma of Bartholin's gland is a rare tumor entity. We report a case of a 40-year-old woman, presenting a slow growing palpable painful mass on the left side of vulva. A surgical excision was performed.
Methods: Grossly the grayish white solid tumor measured 3,6 cm. Microscopic examination revealed organoid cribriform pattern with nests of tumor cells arranged around gland-like spaces, filled with granular basophilic material. Extensive perineural invasion was present. Immunohistochemically, the tumor cells expressed CK8//18, S 100, CKAE1/AE3 and CEA and surrounding basement membrane was immunoreactive for type IV Collagen. The resection margins were clear.
Results: The final diagnosis was Adenoid cystic carcinoma of Bartholin's gland. One month later, a wide local excision and ipsilateral inguinal lymph node resection were performed. All lymph nodes were free of metastases.
Conclusion: Adenoid cystic carcinoma of Bartholin's gland is an extremely rare tumor that clinically mimicks a benign process. Diagnosis is based exclusively on microscopic examination. The aim of surgical excision is to achieve clear resection margins in order to avoid recurrences since there is lack of consensus on the best management protocol so far.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 010 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Avci, Arzu Izmir Katip Celebi Universites T1bbi Patoloji Klinigi Izmir Turkey	Poster	Ekinci, Nese Dilek, Fatma Hüsniye Kücükzeybek, Betül Aydin, Ilgin

ABSTRACT TITLE:
Histopathologic evaluation of 27 esophageal submucosal dissection: A single center experience

ABSTRACT TEXT

Objective: With the development of minimally invasive endoscopic techniques in recent years, superficial tumors of the esophagus and tumor-like lesions are resected more reliably and less traumatically on competent hands. In this study, we aimed to evaluate 27 cases of endoscopic submucosal dissection (ESD) of the eophagus diagnosed in our department retrospectively.
Methods: Between May 2013 and May 2017, 27 esophageal ESD were performed at İzmir Katip Çelebi University Atatürk Training and Research Hospital Gastroenterology Clinic and pathologic evaluation in our laboratory. All resected specimens were placed on a formaline board styrofoam and pinned to identify the horizontal margins. Phorographs of the specimens are taken and the whole material are step sectioned at 4-5 mm intervals. All cases were evaluated according to age, gender, location in the esophagus, diameter of the lesion, histopathologic diagnosis, resection margins, depth of invasion in malignant cases, pathological stage, presence of lymphovascular-neural invasion and associated lesions.
Results: The age of the patients ranged from 41 to 80 years (mean 63.3). Thirteen patients were female, 14 were male. According to the localisations, 1 case was located in the upper third of the esophagus, 15 cases in the middle and 11 in the lower third of the esophagus. The diameter of the lesions varied between 1-8 cm (mean 2.6 cm). Histopathological diagnoses were as follows; invasive squamous cell carcinoma (SCC) in 9 cases, leiomyoma in 8 cases, insitu SCC in 3 cases, adenocarcinoma in 2 cases, basaloid SCC in 1 case, Barrett's esophagus in 1 case, seborrheic-keratosis like lesion in 1 case and IgG4-associated tumor in one case. 6 of 9 invasive SCC cases were diagnosed as pT1b, 3 were pT1a; 1 of the 2 cases of adenocarcinoma were evaluated as pT1a and the other as pT2. In 1 invasive pT1b SCC and in 1 pT2 adenocarcinoma cases, vertical margins were positive for cancer. In the rest 25 cases, all lateral and vertical margins were free of tumor.
Conclusion: 2 patients out of 27 went radical surgery for the vertical margin positivity. All 25 cases that have free horizontal and vertical margins are endoscopically on follow up.There are no recurrences in the rebiopsies of these cases. The ESD method widely used in the stomach and colon has been used successfully in the experienced hands for the esophagus in recent years. This method is of great benefit for the patient as a minimally invasive method rather than radical surgery, and en bloc resection of the lesion with safe surgical margins provides precise detailed histopathologic evaluation.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21 Abstract No. 010 Date 17.10.2018 & 18.10.2018	Neuropathology	Bellil, Khadija Hopital des FSI la Marsa Service d´Anatomie Pathologique La Marsa Tunisia	Poster	Nfikha, Zeinab Nfikha, Zeineb Ben Ghachem, Dorra Dhaoui, Amen Nefoussi, Haifa Hemdani, Nesrine

ABSRACT TITLE:
Granular cell tumor of the mesentery: A second case report

ABSTRACT TEXT

Objective: We report herein the second case of a mesenteric location of a granular cell tumor (GCT), a benign neural tumor of Schwann cell origin occurring commonly as a solitary painless nodule in the dermis or subcutis. This tumor can also be found in internal organs including the larynx, bronchus and gastrointestinal tract. This case represents the second mesenteric location of GCT found in literature and the first one not associated with colic location.
Methods: A 27 years old man with a HIV infection presented with an abdominal pain. Clinical examination and colonoscopy were normal. CT scan showed a mesenteric nodule, 3 cm in diameter. Surgical resection was realized.
Results: Gross examination showed a firm, unencapsulated mass measuring 3 cm in diameter. Microscopically, it was composed of solid nests and ribbons of round to polygonal cells separated by slender fibrous septae. Neoplastic cells were histiocytelike, bland-looking with abundant granular eosinophilic cytoplasm containing PAS-positive granules. Nuclei were small, uniform with virtually absent mitotic figures. The great majority of cells showed both cytoplasmic and nuclear reactivity for S-100 immunostain. CD117 and cytokeratin were negative.
Conclusion: The presence of GCT nodules in the mesentery is somewhat perplexing and difficult to explain. It may be a result of a direct extension of the tumor from the muscle propria into the mesentery, or a synchronous development of a tumor from the Schwann cells present in the mesentery.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10 Abstract No. 010 Date 15.10.2018 & 16.10.2018	Immunohistochemistry	Bellil, Khadija Hopital des FSI la Marsa Service d´Anatomie Pathologique La Marsa Tunisia	Poster	Dhaoui, Amen Ben Ghachem, Dorra Hemdani, Nesrine Nfikha, Zeineb

ABSRACT TITLE:
PAX-5 expression in neuroendocrine tumors

ABSTRACT TEXT

Objective: Paired Box 5 (PAX-5), a well-established B-cell marker, is preferentially expressed in small cell lung carcinoma. Its expression in neuroendocrine carcinoma of the digestive system has not been systemically evaluated. In this study we aim to evaluate PAX-5 expression in neuroendocrine digestive and lung tumors.
Methods: We retrospectively selected 35 tissue samples from the archives of the Department of Pathology, FSI Hospital, La Marsa. Representative tumor sections were subject to immunohistochemical stain for PAX-5.
Results: Our cases were as follows: 13 small cell lung carcinomas, 2 large cell lung carcinomas, 2 small bowel tumors, 8 stomach tumors, 3 appendicular tumors, 1 Sigmoid tumor, 2 pancreatic tumors, 2 peritoneal and 2 hepatic secondary localisations. Nuclear PAX-5 staining was observed in 8 (23%) cases in total, 53% (7/13) of small cell neuroendocrine lung carcinoma and in large cell neuroendocrine lung carcinoma. PAX5 expression was negative in all digestive neuroendocrine tumor samples with a positive internal control. Studies have shown that cytoplasmic granular PAX-5 staining in the absence of nuclear staining is specific for L-cell type rectal carcinoids. Here we do not have a rectal tumor. Our data show that PAX-5 is commonly expressed in small cell lung carcinomas. However results should be interpreted along with CD20 immunephenotype.
Conclusion: This observation warrants a cautious approach when interpreting PAX-5 immunostaining in small cell lung carcinoma. Further studies of a wide array of carcinomas are necessary to delineate the diagnostic usefulness and clinical significance of Pax-5 expression in neuroendocrine tumors.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 010 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Chikha, Adisa Clinical Center of University Sarajevo Dept. of Pathology Sarajevo Bosnia and Herzegovina	Poster	Ibisevic, Nermina Skenderi, Faruk Junuzovic, Dzelaludin Vranic, Semir

ABSRACT TITLE:
A Bilateral Sex Cord – Stromal Tumor of the Testis : Report of the case

ABSTRACT TEXT

Objective: Mixed or unclassifiedtesticular sex cord-stromal tumors (SCST) are very uncommon may be composed of any sex cord cell type and stromal component with fibroma/thecoma appearance,or undifferentiated features. Bilateral testicular SCST are extremely rare.
Methods: We present a case of 28-years old male with bilateral testicular tumors, surgically resected in two separate operations in 2016 and in 2018.
Results: A 28- year old male clinically presented with bilateral painless testicular swelling, without gynecomastia and normal levels of LHD, beta-HCG and Alpha fetoprotein. Left testis measured 150x105x90mm, while right testis measured 87x85x55mm. Both testes showed a well circumscribed grey-white tumors replacing almost completely the normal testicular parenchyma. Histologically, both of the lesions were sex cord stromal tumors with predominant stromal myoid component, particularly the left sided tumor, which showed low mitotic activity (2-4 mitoses/HPF) and minor sex cord component. Necrosis and invasive growth pattern were not present. By immunohistochemistry tumors were inhibin, calretinin and CD56 positive in sex-cord component, while stromal component was SMA (+/-) h-caldesmon (+/-), desmin (-), S100 (-), CD34 (-), excluding gastrointestinal stromal tumor, solitary fibrous tumor, and leiomyoma.
Conclusion: Testicular sex cord-stromal tumors are rare neoplasms with different histological subtypes, presenting a diagnostic challenge. Nevertheless, they should be distinguished from morphologically similar, but more aggressive lesions, to avoid patient overtreatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Elghobashy, Maiar University of Birmingham - Birmingham United Kingdom	Poster	Elshafie, Mona Shaaban, Abeer M
Abstract No. 010				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Calciphylaxis: A rare cause of mammographic calcification

ABSTRACT TEXT

Objective: Calciphylaxis is a serious medical condition which involves ectopic deposition of calcium in arterioles of various tissues and organ systems. This occurs in patients with end stage renal failure leading to disturbances in calcium metabolism.
Methods: Here, we present a rare case of mammographic calcification in a patient on longstanding renal dialysis.
Results: This is a 57 year-old female who has been on renal dialysis for over twenty years due to polycystic kindey disease. She presented to the breast clinic with unilateral severe pain and lumpness of her breast. There was no history of trauma. On mammography, a U3 echogenic lesion with adjacent low echogenic area containing calcification was identified. An image guided core biopsy showed numerous foci of histological calcification within a large area of fat necrosis. Some of the calcification was located within arterioles and small sized blood vessels. This was confirmed by CD31 immunohistochemistry. There was no evidence of atypia or malignancy and a broad spectrum cytokeratin was negative. The diagnosis of fat necrosis with benign calcifications due to mammary calciphylaxis (B2) was made and the patient remains uneventful after 3 months of follow up.
Conclusion: The hallmark of calciphylaxis is the deposition of calcium within small to medium sized vessel walls. This leads to iscahemia and necrosis of tissue. The condition commonly affects the skin and is rarely seen in other organs. In the breast, only a few cases were reported in which patients presented symptomatically with a necrotic lesion resembling carcinoma. Awareness of this condition is vital when considering patients with concomitant longstanding renal disease to ensure appropriate and timely patient management.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Francalanci, Paola Children´s Hosp Bambino Gesu´ Dept. of Pathology Roma Italy	Poster	Diomedi Camassei, Francesca Grimaldi, Chiara Monti, Lidia **Co-Author:** Zin, Angelica Boldrini, Renata
Abstract No. 010				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Congenital infantile fibrosarcoma of the liver: A rare tumor in an unusual site.

ABSTRACT TEXT

Objective: Congenital infantile fibrosarcoma (CIFS) is rare malignant soft tissue tumor, usually presenting before 2 years of age. CIFS affects extremities in over 70% of cases but have also identified in other areas, including the head, neck and abdomen. We report herein a liver CIFS diagnosed in an infants
Methods: A 3-month old boy was referred to our hospital for labiopalatoschisis. A large palpable mass filling the left hepatic lobe was discovered. On abdominal ultrasound scan (USS) and CT scan it had vascular features consistent with vascular malformation. Surgery was performed.
Results: A 5 cm grey mass with sharp edges within left hemihepatectomy was present. Histological examination revealed a highly cellular spindle or ovoid shaped cell proliferation organized in interlacing bundles with a haemangiopericytomatous vascular pattern and vascular "lakes". It was diffusely positive for vimentin and scarcely for SMA (smooth muscle actin). Desmin, CD31, CD34, GLUT1 (glucose transporter 1), Fact VIII, HHV8, cytokeratin, and HepPar1 (hepatocyte paraffin 1) antibodies were negative. Ki67 antibody labeled 20% of the nuclei. The ETV6-NTRK3 translocation was detected by FISH and RT-PCR. It was concluded to be a CIFS of the liver. USS imaging after surgical resection of the tumor showed no residual hepatic abnormality. No chemotherapy was done. Serial USS imaging up to 31 months after surgery has shown no evidence of local or distal recurrence.
Conclusion: CIFS of the liver has never been reported. Its diagnosis is based on histology, immunohistochemistry, and, whenever possible, on the detection of the reciprocal translocation t(12;15) resulting in the gene fusion ETV6-NTRK3. Its prognosis is good with low rates of recurrence and/or distant metastasis and surgical resection is the mainstay of treatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Erashdi, Madiha Jordan University of Science and Technology Irbid Jordan	Poster	Al-Khatib, Sohaib M. Al Zoubi, Mohammad Hammad Ayesh (Haj Yousef), Mahmoud
Abstract No. 010				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Philadelphia chromosome positive-diffuse large B-cell lymphoma in a patient with chronic myeloid leukemia; a rare event with unclear pathogenesis and poor prognosis

ABSTRACT TEXT

Objective: Chronic Myeloid Leukemia (CML) is a myeloproliferative neoplasm that is rarely coexist with lymphoid malignancies. Almost all the previously reported cases represent lymphoid blast crisis. What is interesting about this case is that: (1) it demonstrate the rare coexistence of CML and Philadelphia chromosome positive-Diffuse large B-cell lymphoma(Ph+DLBCL), (2) the previously reported Non-Hodgkin lymphomas (NHL) in CML patients were mainly of precursor T-cell origin, (3) Despite being rare event, the decimal prognosis of the combined CML and Ph+ NHL open the door for further studies to provide clear pathogenesis and diagnostic criteria, leading to improve management of such cases.
Methods: Peripheral blood smears were air dried and stained with Leishman stain. The skin and bone marrow trephine biopsies were formalin-fixed, Paraffin-embedded, stained with Hematoxylin and Eosin stain and immunohistochemical stains, as well as, used for Fluorescence In Situ Hybridization (FISH). Karyotyping were carried out according to a standard technique.
Results: Here is a 41 year old, previously healthy man presented with dizziness and first degree family history of hematological malignancy. He was found to have anemia, thrombocytopenia and hepatosplenomegaly. The bone marrow was hypercellular for age (80%), infiltrated by myeloid precursors with left shifted maturation. The diagnosis of (CML; chronic phase) was established and confirmed by detection of t(9;22)(q34;q11) through karyotyping of peripheral blood (figure1). The patient was treated with Imatinib. Five months later, he developed cutaneous nodule on the chest wall. Histologicaly, It was reported as Non-Hodgkin DLBCL (figure2). The skin infiltrate was positive for BCR-ABL1 fusion gene and negative for BCL6, IGH, and MYC genes rearrangements, by FISH. The patient was treated by R-CHOP chemotherapy and suffered frequent episodes of severe thrombocytopenia. Finally he died, fifteen months later.
Conclusion: Our case highlights the development of Ph+ /surface immunoglobulin negative , mature DLBCL in a CML patient, and its poor outcome.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	Fridrihsone, Ilze Riga Stradins University Dept. of Pathology Riga Latvia	Poster	Strumfa, Ilze Abolins, Arnis Vanags, Andrejs Gardovskis, Janis
Abstract No. 010				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Cyclin D1 and p27 in follicular thyroid carcinomas and adenomas

ABSTRACT TEXT

Objective: To confirm thyroid follicular carcinoma (FC) versus follicular adenoma (FA), capsular, vascular, or extrathyroidal invasion, or metastasis must be found (Yoon et al., 2014). Some of these parameters develop only in advanced disease, while reliable identification of others can be difficult. Problems in differential diagnostics urge to explore carcinogenesis by tumour immunophenotype (Sobrinho-Simoes et al., 2011). The aim of this study is to compare expression of cyclin D1 and p27 in benign and malignant follicular thyroid tumours as well as surrounding thyroid epithelium.
Methods: In a retrospective study, 41 patients with morphologically confirmed thyroid follicular neoplasms (20 FA; 21 FC) were included. Tumours were diagnosed by WHO classification and criteria (DeLellis et al., 2004). Expression of cyclin D1 and p27 was detected by immunohistochemistry and assessed as the fraction of positive cells (%) by computer-assisted morphometry using NIS Elements software and optical system consisting of EclipseCi-L microscope/ DS-Fi2 camera (Nikon, Tokyo, Japan). Statistical analysis included descriptive methods (mean±standard deviation), calculation of 95% confidence interval (Altman et al., 2000) and Mann-Whitney test (IBM SPSS Statistics23; Armonk, USA). $p<0.05$ was considered significant.
Results: The mean fraction of cyclin D1-expressing cells was 63.3±19.3% [confidence interval (CI):54.8-71.8] in thyroid FA and 70.3±4.7 [CI:59.1-81.3] in FC, significantly exceeding ($p<0.001$) the expression in surrounding tissues: 18.0±10.5% [CI:13.3-22.7]. No significant ($p=0.213$) differences were found between cyclin D1 levels in FA and FC. The mean fraction of p27-positive cells in FC was 70.7±27.3 [CI:59.0–82.4] lacking significant ($p=0.045$) differences from surrounding tissues with expression in 82.4±20.5% [CI:75.8-89.0] cells. The difference between both follicular tumours also lacked statistical significance ($p=0.164$). There was significant difference ($p=0.002$) between thyroid FA: 62.3±24.5% [CI:51.6-73.0] versus surrounding tissues: 81.5±24.9% [CI:70.6-89.5].
Conclusion: Up-regulation of cyclin D1 suggests an important role in the development of thyroid follicular neoplasms. Study has to be continued to establish the role of p27.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Jezan, Husn University of Aden Dept. of Pathology Aden Yemen	Poster	
Abstract No. 010				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Metastasic neuroblastoma at initial diagnosis. A case report

ABSTRACT TEXT

Methods: case report
Results: Biopsy from the scalp and inguinal lymph nodes showed undifferentiated tumor tissue where medium sized atypical blastoid tumor cells are located in clusters and sheets in an eosinophilic sometimes fibrillary background showing blood vessels. The sinuses are also infiltrated by these tumor cells.
The PAS stain is negative.
Immune histochemically, Pan leucocyte antigen is negative as also myogenin and CD99. However, CD 56 and synaptophysin are strongly positive and the neuroblastoma marker is weakly positive in the neuropil-like structures and the cytoplasm of some tumor cells

Conclusion: Metastasic Neuroblastoma in scalp and lymph node
Policy of full disclosure: no conflict of interes

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Koufopoulos Nektarios Saint Savvas Cancer Hospital Athens Greece	Poster	Psichogiou, Eleni Vamvakaris, Ioannis Antoniadou, Foteini Theodorakopoulou, Maria Khaldi, Lubna
Abstract No. 010				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Lymphoepithelioma-like carcinoma of the lung

ABSTRACT TEXT

Objective: We present a case of lymphoepithelioma-like carcinoma of the lung (LELC-L) a very rare primary lung carcinoma, first reported in 1987, with few cases reported in the English literature.
Methods: A 67 year-old patient was admitted to our hospital due to chest pain, shortness of breath and weight loss.
A large mass was discovered in the right lower lobe on chest X-ray. CT scan showed a 9 cm lobulated lesion with well-defined contour. A right lower lobectomy was performed. On gross examination the tumor was well circumscribed, solid, grey-white in color and had a maximum diameter of 9.5cm.
Results: On microscopic examination the tumor had predominantly pushing borders consisting of solid, irregular nests and widely anastomosing islands. Tumor cells were large, with vesicular nuclei, prominent nucleoli and abundant eosinophilic cytoplasm. Mitotic activity was high. Tumor cells were intimately admixed with a prominent lymphocytic infiltrate consisting of lymphocytes, plasma cells and occasional neutrophils and eosinophils.
The differential diagnosis included inflammatory large cell lung carcinoma, lymphoma, melanoma and nasopharyngeal carcinoma metastasis. Tumor cells were positive for CK-7, CK-8/18 and negative for CK-5/6, P-63 and TTF-1. Ki-67 stained 50% of tumor nuclei. CD45, CD3, CD20 and CD8 showed uniform positivity in the lymphocytic infiltrate. Our findings were consistent with LELC-L. Epstein-Barr virus was detected by in situ hybridization. The patient received adjuvant therapy and is alive without evidence of recurrence or metastasis 6 months after surgery.
Conclusion: LELC-L is a poorly differentiated carcinoma similar to undifferentiated nasopharyngeal carcinoma. It is more common in Asian populations and is associated with Epstein-Barr virus infection. Its precise diagnosis is important due to significantly better 5-year survival compared with non-LELC with stage II/III/IV disease.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Karuga, Kamau Bliss GVS Healthcare Nairobi Kenya	Poster	
Abstract No. 010				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Pattern of pap test and cervical infections at Bliss GVS Healthcare nairobi

ABSTRACT TEXT

Objective: To determine the pattern of Pap test results in women attending Bliss GVS Healthcare Nairobi, Kenya.
Methods: Study design: This was a cross- sectional descriptive study.
Setting: Bliss GVS Healthcare cytology laboratory, between August and December 2017.
Participants: A total of 113 women aged 25 years and above were recruited from Bliss GVS Healthcare Nairobi, Kenya.
Material and methods: Demographic and clinical information was obtained by direct interview of the patients. Pap smears were collected by nurses in a standard manner to ensure the quality of Pap smears

Results: : A total of 113 patients were recruited. The mean age was 39.9 years (±6.96). About 79.6% were negative for intraepithelial lesion or malignancy (NILM) while 11.5% had atypical squamous cells of undetermined significance (ASCUS) or worse on Pap smear. Fourteen patients (11.7%) had infections, of these (9.2%) bacterial vaginosis and (2.5%) candida.
Conclusion: The majority of the patients had a negative pap test. There was no correlation between age and Pap test lesions
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Mokni, Moncef Farhat Hached Hospital Dept. of Pathology Sousse Tunisia	Poster	Bouriga, Ayda Mestiri, Sarra Baccouch, Atika Belhaj khlifa, Aya Yacoub, Sarra Ouédraogo, Aïda Sandrine Mhiri, Marwa
Abstract No. 010				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Osteosarcomas of intermediate and low grade: A retrospective series of 5 cases

ABSTRACT TEXT

Objective: Osteosarcomas account for 20% of primary malignant bone tumors. Unlike the conventional type made of a high-grade neoplasm, intermediate and low grade osteosarcomas are rare. The latter encompasses periosteal osteosarcomas (<2 %), parosteal osteosarcomas (3-5%) and intramedullary low-grade osteosarcomas (1%).
We aim to report the clinicopathological features of osteosarcomas of low and intermediate grade, as well as the difficulties of diagnosis.

Methods: We report a series of 5 cases of intermediate and low grade osteosarcoma recorded on a 15 year-period (1999-2013).
Results: Patients were mainly aged 41 years old with extremes ranged from 19 to 78 years old. The sex ratio H/F was 3/2. Symptomatology was dominated by mechanical pain, worsening and swelling of the limb. Radiological investigation showed an expansive, sclerotic lesion extending to the surrounding sissue in most cases. All patients had neodjuvant chemotherapy followed by surgical treatment and reconstruction. The histopathological diagnosis was that of parosteal osteosarcoma in 3 cases and periosteal osteosarcoma in 2 cases. The follow-up period ranged from 10 months to 185 months. One patient had a local recurrence requiring limb amputation and one patient had died. Median recuurrence-free-survival was 82 months.
Conclusion: Intermediate and low grade osteosarcoma tend to be misdiagnosed due to its misleading radiological features and the overlap of its pathological characteristics with those of benign bone tumors. Positive immunostaining for CDK4 or MDM2 may be used as a diagnostic adjunct. Clinico-radiollogical features, confronted to histopathological features are necessary in raising the correct diagnosis of such rare tumors.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13 Abstract No. 010 Date 15.10.2018 & 16.10.2018	Pathology of infectious diseases	Regragui, Meriem Ibn Rochd Pathology Casablanca Morocco	Poster	Benayad, Samira Bennani Guebessi, Nisrine Marnissi, Farida Karkouri, Mehdi

ABSTRACT TITLE:

Post-mortem histological findings in plasmodium falciparum infection: A case report

ABSTRACT TEXT

Objective: Malaria infection is an important cause of mortality and morbidity around the world. Even if it is not endemic in Morocco, an increasing in cases of imported infections was noted in the last five years. The major problem facing pathologists in non endemic areas is that they are not aware of the histopathological aspects of malaria and therefore do not consider it as differential diagnosis.

Methods: We report a case of a 54 years old man from Morocco, who presented flu-like symptoms for 15 days after a trip to Ivory Coast. He suddenly died after. External examination of the body showed cyanotic lips and fingernails. Internal examination showed a stenosis of the anterior interventricular artery with no significant atheromatous disease, the spleen was enlarged. Cut sections of liver and spleen showed congested vessels and multiple petechial hemorrhages. Histopathological examination showed vascular congestion with the presence of malarial pigment in capillaries of heart, liver and spleen. The cardiac myocytes were normal. The PCR performed confirmed the diagnosis of malarial infection by detecting Plasmodium falciparum.

Results: Malaria is the most important parasitic disease worldwide. Since its clinical symptoms are non-specific, forensic pathologists in non endemic areas do not consider it in the differential diagnosis of sudden death. The major histopathological post-mortem finding in this context is congested blood vessels filled with red blood cells laden with malarial pigment in various organs including spleen, liver heart, brain and kidney. Macrophages with engulfed parasites can also be encountered. PCR can be used to confirm the diagnosis and to type the parasite.

Conclusion: A meticulous microscopic examination of blood vessels in specimens received in a context of unexplained sudden death is mandatory especially if there is a history of travelling to a malaria-endemic zone.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 010 Date 17.10.2018 & 18.10.2018	Dermatopathology	Tounsi, Haifa Institut Pasteur of Tunis Dept. of Pathology Tunis Tunisia	Poster	Kacem, Monia Ben Ayed, Ines Jaballah, Amira Attafi, Salsabil Mokni, Mourad Boubaker, Samir

ABSRACT TITLE:

Immunohistochemical examination of ZO-1 in Darier disease

ABSTRACT TEXT

Objective: : Darier's disease (DD; OMIM 124200) is an autosomal dominant skin disorder characterized by warty papules and plaques in seborreheic areas, palmo-plantar pits and distinctive nail abnormalities. The main histopathologic features are suprabasal acantholysis and abnormal keratinisation. It is caused by mutations in the ATP2A2 gene which encodes the sarco/endoplasmic reticulum Ca2+ ATPase type 2 isoform (SERCA2). Zonula Occludens protein 1 (ZO-1) is a tight junction protein existing between keratinocytes which contribute to epidermal barrier function of the skin. In normal epidermis, ZO-1 is located in the granular layer. It is considered as a marker of terminal epidermal differentiation.

The aim of this study is to analyse the immunohistochemical expression of ZO-1 in the epidermis of patients with Darier's disease.

Methods: An immunohistochemical staining using anti-ZO-1 antibody was carried out on the epidermis of twenty-two DD patients (8 families). Controls included three cutaneous samples from normal individuals.

Results: In normal control skin, ZO-1 was detected in the cell membrane of the keratinocytes of the granular layer. In DD skin, ZO-1 displayed a cytoplasmic staining in the granular layer and membranous labeling was observed in acantholytic cells.

Conclusion: The premature expression ZO-1 could contribute to the impaired epidermal differentiation in DD patients. Thus, the changes in calcium concentration in DD affect the expression and localization of this tight junction protein in epidermis.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 011 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Babal, Pavel Comenius University Department of Pathology Bratislava Slovak Republic	Poster	Mosná, Kristina Janega, Pavol Sedlak, Jan

ABSTRACT TITLE:

Circadian rhythm protein Bmal1 alteration in chronic inflammatory bowel diseases

ABSTRACT TEXT

Objective: In mammals, similarly to many other organisms, tissues and organs functions are regulated by circadian clock mechanisms. The gastrointestinal tract also has 24-hour rhythms in many physiological functions that are believed to be outputs of the circadian clock: a molecular system that produces 24-hour rhythms in transcription/translation. Certain gastrointestinal illnesses are worsened when the circadian rhythms are disrupted. Changes in circadian proteins expression in colon cancer have been studied, less details are known about the role of the circadian clock in chronic inflammatory bowel diseases (IBD) like Crohn´s disease (CD) and ulcerative colitis (UC).

Methods: Expression of the circadian rhythm key activating protein Bmal1 was studied in archival biopsy specimens diagnosed with Crohn´s disease (24) and ulcerative colitis (25) taken before therapeutic intervention and control samples (25) of colon mucosa from areas remote >20 cm from pathological lesion, usually colon cancer. Immunohistochemical detection using the DAKO system was applied, multiplicative score of intensity (0-3) and percentage (0-100) of positive nuclei was calculated in mucosal epithelial and inflammatory interstitial cells.

Results: Nuclear translocation of the Bmal1 protein was evaluated as positive. High level of expression was detected in epithelial and inflammatory cells of control colon tissues. Bmal1 expression was significantly reduced in both epithelial and inflammatory cell types in both evaluated inflammatory bowel diseases CD and UC.

Conclusion: The results indicate that circadian rhythm is seriously altered in cells of the chronic inflammatory bowel diseases. Since many of the inflammatory mediators are under circadian rhythm control, alteration of such control might serve as one of the crucial factors participating at the pathogenesis of IBD.

Supported by APVV 14-318 grant.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 011 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Basheska, Neli UCRO Dpt.of Histopathology &Cytology Skopje Macedonia	Poster	Krstevska, Iskra Ognenoska-Jankovska, Biljana

ABSRACT TITLE:

Benign granular cell tumor of the uterine corpus: A case report

ABSTRACT TEXT

Objective: Granular cell tumors (GCTs) are relatively uncommon soft tissue tumors that are usually benign (0.5-2.0% malignant). They have been described in many sites and organs, although cases with genital involvement have rarely been reported. We present the clinicopathological features of a case of a uterine corpus GST.

Methods: A 37-year-old woman with secondary infertility was admitted at the University Clinic of Gynecology and Obstetrics for a hysteroscopic examination during which a polypoid isthmico-cervical lesion was detected.

Results: The biopsy excision specimen consisted of one smaller fragment of the endometrium and two larger semispherical fragments measuring 0.7x0.5x0.4 and 0.8x0.6x0.4 cm. Upon microscopic examination of the larger fragments under the partly pseudodecidualized endometrial or isthmic type of surface mucosa, a benign mesenchymal neoplasm was found composed of nests of large polygonal cells with an abundant eosinophilic granular cytoplasm and round to oval nuclei lacking conspicuous nucleoli or mitotic figures. In addition to PAS positivity, upon immunohistochemical staining, the large cells also showed vimentin, S-100, neuron-specific enolase, CD56, CD57, calretinin and Wilms tumor 1 positivity. The proliferative index determined by Ki-67 staining was <5%. Based on the pathological and immunohistochemical examinations, the diagnosis of a benign GCT was established. Due to the fact that the neoplasm was incompletely excised a wide local excision was recommended along with a careful follow-up of the patient. The patient refused the excision and is being well and preparing for in vitro fertilization 24 months following biopsy.

Conclusion: GCTs of the uterus and especially of the uterine corpus are extremely rare. To the best of our knowledge, this is a second reported case of uterine corpus GCT in the English-language literature. It is important for gynecologists as well as pathologists to be aware of the possibility of uterine corpus GCTs, for which accurate diagnosis, complete resection and long-term follow-up are crucial.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Choi, Chan Chonnam National University Dept. of Pathology Hwasun-gun Republic of Korea	Poster	Kim, Sung Soon
Abstract No. 011				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Subdivision of papillary renal cell carcinoma according to CK7 expression

ABSTRACT TEXT

Objective: Papillary renal cell carcinoma (pRCC) is traditionally subdivided into type 1 and type 2. However the cases with overlapping histologic features, the mixed type, ranges 16.1 to 53.1% of pRCC. The purpose of this study is to find a reproducible method to stratify pRCC.
Methods: We found 39 cases of pRCC out of 981 RCC in the archives of CNUHH pathology department between 2004 and 2017. They were 17 type 1, 7 type 2, and 15 mixed type. Immunohistochemical stain of CK7, CD10, EMA, p504s, vimentin, and ABCC2 were performed. They were correlated with the clinicopathologic features. The mRNA expression data (NEJM 2016;374:135-45) were interpreted.
Results: There were 26 CK7-positive pRCC (CK7+pRCC), and 13 CK7-patchy or negative pRCC (CK7-pRCC). CK7+pRCCs were found in 15 type 1, 1 type 2, 10 mixed type pRCCs and CK7-pRCCs in 2 type 1, 6 type 2, and 5 mixed type pRCCs. CK7+pRCC was associated with better survival compared with CK7-pRCC. However other markers were not significantly associated with survival. The lower expression of CK7 was associated with over-expression of epithelial mesenchymal transition-associated genes.
Conclusion: We found that CK7+pRCC is associated with better survival, and suggest to classify pRCC into CK7+pRCC and CK7-pRCC.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	De Los Reyes, Francia Victoria UERM Memorial Medical Center Pathology Laboratory Quezon City Philippines	Poster	Cruz-Yañez, Socorro
Abstract No. 011				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Primary pleomorphic leiomyosarcoma of the perinephric space - A case report and systematic review

ABSTRACT TEXT

Objective: Primary retroperitoneal pleomorphic leiomyosarcoma (P-LMS) that arises in the perinephric space is not a particularly well-characterized lesion, with only twenty-three described cases of retroperitoneal P-LMS documented in scientific publication, among the total of 81 published cases of P-LMS.
Methods: The aim of this report is to describe the case of a P-LMS arising from the perinephric soft tissues with intimate connection to the adipose tissues and vascular structures of the renal sinus. Furthermore, this research also compares the parameters of the case with the published data regarding the frequency, location, and response to therapy of such lesions.
Results: This is the case of a 77 year old female who presented with a one-week history of abdominal pain and fullness. Imaging studies showed a mass in the right upper retroperitoneal region that was characterized as suprarenal. Gross evaluation show showed a sarcomatous lesion involving the perirenal fat. Microscopic evaluation showed a high grade sarcoma with a predominantly pleomorphic component and a secondary spindle cell component. Immunohistochemistry for SMA, S100, CD99, and desmin were done and showed findings that were consistent with pleomorphic leiomyosarcoma.
Conclusion: Pleomorphic leiomyosarcoma is a rare, more aggressive, and highly malignant variant of leiomyosarcoma that accounts for 8.6% of all documented leiomyosarcomas according to the study of Oda et al. The importance of establishing the lesion as P-LMS versus well-differentiated in this case, can be noted in the report of Demicco et al, which showed a significant decrease in the overall survival probability by 96 months (48 months in P-LMS versus 144 months in WD-LMS), as well as in the report of Oda et al., which indicated death due to disease within one month in an excision biopsy. As such, elucidating the presence of this variant and the need for a more aggressive form of management may contribute to the optimization of management for prolonging overall survival.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Elghobashy Mirna University of Birmingham Birmingham United Kingdom	Poster	Shaaban, Abeer
Abstract No. 011				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
DCIS like breast carcinoma in core biopsy: A rare morphological appearance of metastatic mammary carcinoma

ABSTRACT TEXT

Objective: Metastatic carcinoma of the breast can exhibit morphological appearances reminiscent of DCIS. This includes the association with comedo necrosis and calcifications. It may therefore be challenging to ascertain whether the lesion represents primary or metastatic breast cancer.
Methods: We report a challenging case of nodal biopsy in a female with radiologically multifocal breast cancer.
Results: A 78-year-old female presented with a symptomatic lump in the right breast. Imaging revealed multiple suspicious foci and an abnormal axillary lymph node. An ultrasound guided biopsy axillary biopsy was performed. Histologically, this showed well circumscribed islands of malignant cells showing central comedo necrosis and focal calcification. There was adjacent dense lymphocytic infiltrate. The differential included solid ductal carcinoma in situ (DCIS) with luminal calcifications and comedo necrosis, primary breast carcinoma in axillary breast tissue or DCIS-like metastatic carcinoma in a lymph node. Careful examination revealed absence of a myoepithelial layer around the malignant islands confirmed by SMM andp63 immunohistochemistry. No normal mammary tissue was identified to suggest origin from axillary breast tissue and no benign inclusions were noted. The patient underwent a mastectomy and axillary node clearance. A large single grade 3 triple negative metaplastic carcinoma was confirmed. Two of the axillary nodes showed metastatic carcinomas which exhibited the same DCIS-like pattern identified on the diagnostic core biopsy.
Conclusion: DCIS like metastasis is a rare morphological presentation of metastatic breast carcinoma in the lymph node. Only two previous cases within nodal excision were reported in the literature. It can be diagnostically challenging particularly on a small core biopsy sample. Awareness of this entity is important and careful attention to the morphology and the lack of a myoepithelial layer by smooth muscle immunohistochemistry should help establish the diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	Fridrihsone, Ilze Riga Stradins University Department of Pathology Riga Latvia	Poster	Strumfa, Ilze Abolins, Arnis Vanags, Andrejs Gardovskis, Janis
Abstract No. 011				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Immunohistochmical expression of CD44 in follicular thyroid neoplasms

ABSTRACT TEXT

Objective: Few studies have been devoted to the immunohistochemical expression of CD44 in follicular thyroid tumors (Maruta et al., 2004; Nasir et al., 2004). However, the reported data are promising in regard to the diagnostic distinction between follicular carcinoma (FC) and adenoma (FA): a difficult dilemma in cases when capsular, vascular, or extra-thyroidal invasion, or metastasizing is not straightforward (Sobrinho-Simoes et al., 2011; Yoon et al., 2014). The aim of this study is to compare CD44 expression in benign and malignant follicular thyroid tumours as well as in surrounding thyroid tissues.

Methods: In a retrospective study, 39 patients with morphologically confirmed thyroid follicular neoplasms (20 FA; 19 FC) were included. Tumours were diagnosed according to the classification and criteria issued by World Health Organisation (DeLellis et al., 2004). Expression of CD44 was detected by immunohistochemistry and assessed as the fraction of positive cells (%) by computer-assisted morphometry using NIS Elements software and optical system of EclipseCi-L microscope/ DS-Fi2 camera (Nikon, Tokyo, Japan). Statistical analysis included descriptive methods (mean±standard deviation), calculation of 95% confidence interval (Altman et al., 2000) and Mann-Whitney test (IBM SPSS Statistics23; Armonk, USA). p<0.05 was considered statistically significant.
Results: The mean fraction of CD44-expressing cells was 58.5±32.6% [95% CI: 44.2-72.8] in thyroid FA versus 51.0±28.6% [CI: 41.5-60.5] in peritumoural tissues, lacking significant differences (p=0.322). In contrast, the expression level in FC, reaching 74.7±27.8% [CI: 62.2-87.2], was significantly different from surrounding tissues (p=0.004). The differences between both types of follicular tumours did not gain statistical significance (p=0.057).
Conclusion: Expression of CD44 is statistically significantly higher in thyroid FC than in peritumoural thyroid epithelium. Comparison of this marker at two biopsy sites – in the suspicious nodule and in surrounding thyroid tissues – could be helpful to diagnose follicular thyroid carcinoma prior to surgery.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Kabir, Balarabe Ahmadu Bello University T. y, ABUTH Dept. of Pathology Zaria Nigeria	Poster	Liman, Almustapha Aliyu Ahmed, Saad Aliyu Abubakar, Murtala Waziri, Garba Dahiru Abdullahi, Shehu
Abstract No. 011				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Human papillomavirus profile in head and neck squamous cell carcinoma in a tertiary hospital in Northern Nigeria

ABSTRACT TEXT

Objective: Head and Neck Squamous cell carcinoma (HNSCCs) are malignant neoplasms with squamous differentiation arising from the upper aerodigestive tracts. These are associated with cigarette smoking, alcohol ingestion and human papillomavirus infection (HPV). The study was aimed at determining aepidaemiological and anatomical distribution patterns and HPV frequency ratio of the HNSCCs seen in the department of Pathology, Ahmadu Bello University Teaching Hospital (ABUTH) Zaria.

Methods: A ten year retrospective review of all HNSCCs diagnosed in the department of pathology of ABUTH, Zaria between January 2004 to December 2013. DNA was extracted from archived tissue blocks using Q1Amp DNA FFPE tissue kit, quality assessed by PCR for human β-globin and PCR done using G5+/G6+ HPV. Type specific HPV primers were used to identify specific HPV serotypes.

Results: HNSCCs make up 5.3 % of all carcinomas seen during the study period. Seventy eight cases satisfied the inclusion criteria. The male:female ratio was 2.4:1. Mean age was 54.16±17.24 years. Oral cavity is the commonest site with 36 (46.15%) cases followed by sinonasal tract, larynx and oropharynx contributing 20 (25.64%), 12 (15.38%) and 10 (12.82%) respectively. DNA quality was satisfactory for PCR analysis in 63 of 78 (80.77%) cases. HPV was detected in 4 of 63 cases with HPV frequency ratio of 6.35%. All the four cases were HPV 16 serotype.

Conclusion: HNSCCs were common, with male predominance. Age at presentation and HPV frequency ratio were similar to many reports in Nigeria and other developing countries like Ghana, Senegal, and Sudan. The anatomic distribution pattern and low frequency ratio of HPV positive cases vary from most of the reports from the developed western countries. Thus, suggesting less dominant role of HPV in the development of these cancers.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Kacem, Monia Institut Pasteur of Tunis Pathology Department Tunis	Poster	Tounsi, Haifa Ben Ayed, Ines Fehri, Emna Mokni, Mourad Boubaker, Samir
Abstract No. 011				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Immunohistochemical analysis of tight junction proteins expression in Hailey-Hailey disease

ABSTRACT TEXT

Objective: Hailey Hailey disease (HHD) is an autosomal dominant skin disorder caused by mutations in calcium pump gene resulting in impaired epidermal differentiation. Histologically, HHD is characterized by desmosomal disruption and suprabasal acantholysis with abnormal keratinisation. Tight junctions (TJ) are located in the granular cell layer in normal skin and contribute to the epidermal barrier. They are considered as a marker of terminal epidermal differentiation. Aberrations in the epidermal differentiation, such as in Mal de Meleda, have been shown to lead to changes in the expression of TJ components. For this purpose we studied the expression of Claudin-1, occludin and ZO- 1 during the disruption of desmosomes in HHD lesion.

Methods: Eight skin biopsies of HHD were used for the study. Expression of TJs proteins was performed by immunohistochemistry with the polyclonal antibodies (claudin-1, occludin and ZO1). Normal human epidermis was used as a control.

Results: In normal human epidermis, occludin and ZO-1 were expressed in the membrane of the granular layer, whereas claudin-1 is expressed throughout the epidermis with increasing and upward intensity. In the lesional skin of HHD, claudin-1 was expressed in the cell membrane of the spinous layers. In contrast occludin and ZO-1 persisted in the granular layer and displayed a cytoplasmic staining. In HHD lesions the tissue distribution of occludin expanded to the acantholytic cells.

Conclusion: The current results suggest that TJ components follow different dynamics in HHD compared to the normal skin. The premature expression of TJs proteins could contribute to the impaired epidermal homeostasis. Thus, the changes in calcium concentration and epidermal differentiation in HHD affect the expression and localization of these proteins in epidermis.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Kanthan, Rani Saskatoon Canada	Poster	Wright, Glenda Miller, Sarah Shaw, John
Abstract No. 011				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Pancreatic vascular malformation with diffuse "nesidioblastosis-like" pancreatic neuroendocrine hyperplasia,- reactive, dysplastic or neoplastic?

ABSTRACT TEXT

Objective: Pancreatic vascular malformations are rare lesions, accounting for less than 1% of gastrointestinal vascular lesions. Association with neuroendocrine lesions have not yet been reported. We describe a case of concurrent pancreatic vascular malformation with diffuse nesidioblastosis-like neuroendocrine hyperplasia and explore its etiopathogenesis in the context of current literature.

Methods: A 62 year old male on long term follow up for multiple myeloma was found to have an asymptomatic lesion in the pancreatic tail that was identified on routine abdominal CT scan. The patient's medical history was significant for an autologous bone marrow stem cell transplant done for multiple myeloma, for which he was receiving regular follow up. The silent pancreatic lesion was presumed to be a neuroendocrine lesion. However multiple investigations including an octreotide scan were negative. Subsequent vascular subtraction imaging studies suggested the possibility of a vascular lesion. Laboratory tests showed pancytopenia, normal renal and liver function, and normoglycemia.

Results: A distal pancreatectomy was performed for definitive diagnosis of the pancreatic lesion. Gross examination revealed a hemorrhagic mass corresponding to the lesion identified on imaging. This lesion was confirmed to be a vascular malformation with small and large vessels of varied size and thickness on histopathology. The background pancreatic tissue showed diffusely increased and enlarged islets of Langerhans /endocrine dysplasia with a nesidioblastosis-like proliferation of neuroendocrine cells around exocrine ducts/ endocrine hyperplasia, and a single neuroendocrine microadenoma/endocrine neoplasia. Immunohistochemical stains confirmed the expression of multiple hormones within the neuroendocrine cells and all lesions were of a low proliferation index. A diagnosis of a pancreatic vascular malformation with diffuse nesidioblastosis-like neuroendocrine hyperplasia and a microadenoma was confirmed.

Conclusion: We report a unique pancreatic case of concurrent vascular malformation and diffuse neuroendocrine hyperplasia, and discuss the possible etiopathogenesis of diffuse neuroendocrine hyperplasia as reactive, dysplastic and/or neoplastic in the absence of an exocrine neoplasm.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Kenea, Tenerian ICL Addis Abeba Addis Abeba Ethiopia	Poster	Zewudie, Abraham Nigussie, Mesfin
Abstract No. 011				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Peripheral T cell lymphoma with generalized nodal and extra nodal involvement in HIV positive patient: A case report

ABSTRACT TEXT

Objective: Peripheral T cell lymphomas mainly present with nodal involvement but more generalized presentations can also be seen. Unlike B cell lymphoma, fewer HIV associated T cell lymphomas are reported. We present a case of peripheral T cell lymphoma in AIDS patient.

Methods: A 70 years old stage 4 HIV positive patient with CD 4 count of 90 presented with progressively enlarging neck swelling associated with anorexia and significant weight loss. On physical examination unilateral cervical, axillary and bilateral inguinal lymph nodes were identified. On ultrasound multiple retroperitoneal lymph nodes and hepatosplenomegaly were identified. Bilateral infiltrative opacities were seen on chest x-ray.

Results: A biopsy taken from the cervical lymph node shows diffuse effacement of the lymph node with medium to large lymphoid cells which have irregular and vesicular nuclei. The cells have prominent nucleoli. There are frequent mitoses. Eosinophils and small mature lymphocytes are present in the background. The neoplastic cells are positive for CD 3 while they were negative for CD 20. The patient became leukemic despite taking few cycles of chemotherapy

Conclusion: we presented a case of peripheral T cell lymphoma which has an aggressive behavior in AIDS patient.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 011 Date 15.10.2018 & 16.10.2018	Cytopathology	Khaled, Chirine American University of Beirut Dept. Pathology and Lab. Medicine Beirut Lebanon	Poster	Shabb, Nina

ABSTRACT TITLE:
Fine-needle aspiration interpretive errors

ABSTRACT TEXT

Objective: To identify common and unusual interpretive errors (IEs) of fine-needle aspirations (FNAs) in order to understand their cause and help avoid such errors in the future.
Methods: All FNAs and their corresponding pathology results are correlated yearly for quality assurance. Discrepant cases are segregated into sampling errors and IEs. All FNAs with IEs (other than breast) were collected from 2005-2017. The FNA and pathology slides were reviewed. The reasons for the erroneous diagnosis were tabulated.
Results: 30 cases were collected. 14 came from lymph nodes (LNs): 5 Non-Hodgkin's lymphoma (NHL) were misinterpreted as reactive LN (4) and metastatic carcinoma (1). 5 metastatic carcinomas as reactive LN (2), NHL (1), Hodgkin's Lymphoma (HL) (1) and granuloma (1). 3 HL as reactive LN (2) and carcinoma (1). One reactive axillary LN as metastatic breast carcinoma.
There were 11 thyroid IEs. 4 Hashimoto's thyroiditis (HT) were misinterpreted as suspicious for malignancy. 5 multinodular goiters (MNG) as suspicious for carcinoma. One medullary carcinoma and one papillary carcinoma were misinterpreted as suspicious for follicular neoplasm and HT, respectively.
There were 4 parotid gland IEs: A pleomorphic adenoma was misinterpreted as squamous cell carcinoma, a clear cell carcinoma as metastatic thyroid carcinoma, a Warthin's tumor as metastatic melanoma and a Maltoma as reactive process.
The rare cases with IEs were of a gastric pancreatic heterotopia as adenocarcinoma, adrenal hyperplasia as metastatic breast carcinoma, epithelioid sarcoma of finger as reactive spindle cell lesion, hepatic hamartoma as abscess and papillary carcinoma arising in a thyroglossal duct cyst as negative for malignancy.
Conclusion: FNA interpretation requires extreme attention to cellular components and their nuances. Being familiar with the different morphologies of Hodgkin cells and Hurthle cells, and being aware of focal atypia in MNG should help in decreasing IEs of LN and thyroid FNAs. FNA of unusual cases will always remain challenging.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24 Abstract No. 011 Date 17.10.2018 & 18.10.2018	Pulmonary pathology	Koufopoulos, Nektarios Saint Savvas Cancer Hospital Athens Greece	Poster	Psichogiou, Eleni Vamvakaris, Ioannis Antoniadou, Foteini Theodorakopoulou, Maria Pigadioti, Eleni

ABSTRACT TITLE:
Myoepitheliomal carcinoma of the lung: A rare tumor

ABSTRACT TEXT

Objective: Myoepitheliomal carcinoma (MEC) of the lung is a very rare salivary gland type neoplasm. We present a case of MEC of the lung.
Methods: A 57 year old asymptomatic patient, without previous history, was admitted due to an increased density in the right upper lobe on routine chest X-ray. FN biopsy was performed but the material was non-diagnostic. Further imaging studies were negative for distant metastasis. The patient was treated with lobectomy. On gross examination the tumor was circumscribed, nonencapsulated measuring 2.1cm.
Results: On microscopic examination the tumor consisted of small nests and single cells embedded in a myxoid stroma. Tumor cells were epithelioid, with eosinophilic cytoplasm showing mild to moderate degree of atypia. Some of them displayed plasmacytoid appearence. Few mitotic figures were present. Necrosis was not identified. Three lymph nodes were disease free. The differential diagnosis included mucoepidermoid carcinoma, acinic cell carcinoma, pulmonary pleomorphic adenoma, myoepithelioma, epithelial-myoepithelial carcinoma, metastatic MEC, and other metastatic carcinomas.
Immunohistochemical study was positive for Vimentin S-100, Ck-5/6, LMWK and negative for TTF-1, EMA, CD-68, CD-31, CD-34, SMA and LCA. Ki-67 stained 3-5% of tumor nuclei. Our diagnosis was low grade malignant neoplasm consistent with MEC. Adjuvant treatment consisting of a combination of chemotherapy and radiotherapy was administered. The patient is disease free 7 months after surgery.
Conclusion: MEC is a very rare type of lung carcinoma affecting men more often than women. Local recurrence is unlikely following complete surgical excision. According to some reports this type of tumor is resistant to chemotherapy and radiotherapy. The majority of patients develops metastasis, either synchronous, or metachronous. Data concerning its prognosis is limited due to rarity.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21 Abstract No. 011 Date 17.10.2018 & 18.10.2018	Neuropathology	Nweke, Michael University College Hospital Dept. of Pathology Ibadan Nigeria	Poster	Ogun, Gabriel Okolo, Clement Adeleye, Amos Adesina, Adekunle

ABSTRACT TITLE:
Determination of IDH-1 R132H mutation by pyrosequencing among a subset of astrocytic neoplasms at a tertiary African Hospital

ABSTRACT TEXT

Objective: Determination of IDH-1 R132H mutation by pyrosequencing among a subset of astrocytic neoplasms at a tertiary African Hospital
Methods: A retrospective cross-sectional study involving a review of all histologically diagnosed astrocytic neoplasms at the University College Hospital, Ibadan between January 2004 and December 2015. Selected slides of astrocytic neoplasms with their formalin fixed paraffin embedded (FFPE) tissue blocks were retrieved or re-cut and reviewed. Astrocytic differentiation was confirmed by GFAP immunohistochemistry. DNA was obtained from FFPE blocks, amplified by polymerase chain reaction and subsequently pyrosequenced using a Qiagen pyrosequencer (Valencia, CA 91355) The data obtained was analysed using a statistical software. The Chi-square test was used for discrete variables and the student's t test for continuous variables. The level of statistical significance was set at $p < 0.05$
Results: 36 samples were randomly chosen. These included WHO grade I (33.3%), WHO Grade II (2.8%), WHO Grade III (5.6%) and WHO grade IV (58.3%) astrocytomas. M: F ratio was 1.2:1. 27.7% of the samples had unamplifiable DNA for the pyrosequencing reaction. 72.3% of the tumors were negative for 1DH-1 R132H mutation
Conclusion: Several technical issues were encountered in the development of the protocol and the optimization of the analysis of the samples. There were no documented IDH-1 mutations among the samples analysed. This finding calls for more studies into the possible lack of IDH-1 RI32H mutation among astrocytomas from African cohorts with its implication for differing tumor biology and prognosis. This study also demonstrates that pyrosequencing of astrocytic neoplasms for IDH-1 R132H mutation is feasible and practicable with multicenter collaboration in our low resource setting. Quality control of tissue processing methods is however vital for a successful application of this technology.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23 Abstract No. 011 Date 17.10.2018 & 18.10.2018	Pediatric pathology	Nweke, Michael University College Hospital Dept. of Pathology Ibadan Nigeria	Poster	Mashor, David Ogun, Gabriel

ABSTRACT TITLE:
Autopsy findings in an unclassified multiple congenital birth anomaly. A case report from an African centre

ABSTRACT TEXT

Objective: Autopsy findings in an unclassified multiple congenital birth anomaly. A case report from an African centre. Congenital birth anomalies often involve specific organ systems of the body with a variety of causes implicated. Often times, these causes are unknown. The most severe of these anomalies are known as multiple congenital anomalies. Most cannot be identified clinically, thus the term "unclassified".
Methods: A pre-term neonate delivered lifeless to a 32-year-old para 2 woman through emergency caesarean section at a gestational age of 28 weeks due to a previous history of caesarean section and an ultrasound diagnosis of multiple foetal congenital anomalies. Prior antenatal history was uneventful.
Results: The body at autopsy is a grossly malformed macerated pre-term male foetus with facial dysmorphism, right fronto-parietal cephal-haematoma, and a right amelia of the upper limb. There is a midline defect over the right chest wall and abdomen with external herniation of the pericardium encased heart, abdominal organs (liver, stomach, small and large intestines) and left kidney. The Bowel appears gangrenous. The umbilical cord is shortened with a single umbilical artery. There is a hypoplastic right clavicle with an absent right thoracic cage. The great vessels are transposed. The aorta and pulmonary vein arise from the right and left ventricles respectively. The hypoplastic right lung is supplied by a bronchial artery from the aorta. The left lung is supplied by the transposed pulmonary artery. There is a unilateral right renal agenesis. An urachus connects the bladder and rectum. The vertebral column is arched forward to form a convex gibbus
Conclusion: Unclassified multiple congenital birth defects remain an important cause of perinatal mortality. No clinical association was found in this case. Most cases have no known causes and are inadequately documented. Birth defect registries and genetic analyses should be established for known cases.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-10 Abstract No. 011 Date 15.10.2018 & 16.10.2018	Immunohistochemistry	Sira, Mostafa National Liver Institute Pathology Shebin El-Kom Egypt	Poster	El Azab, Dina Tantawy, Mona Kandil, Mona Aiad, Hayam El Goday, Shereen

ABSTRACT TITLE:

Study of immunohistchemical expression of Hairy Enhancer of Split-1(HES1) and SOX17 expression in biliary atrsia and other neonatal cholestatic disorders

ABSTRACT TEXT

Objective: The aim was to evaluate immunohistochemical expression of Hairy Enhancer of Split-1(HES1), and SOX17 in BA and other cholestatic disorders to investigate their roles in the differentiation between BA and non BA cholestatic diseases

Methods: A ` retrospective study included 61 infants with neonatal cholestasis (NC) 32 with BA and 29 with non BA cholestasis) in whom liver biopsy is indicated for etiological diagnosis.

Results: :HES1 was expressed in about 85% of BA cases compared to 37.9% in non-BA cases with a p-value <0.0001, furthermore, about half of BA cases (51.9 %) showed high HES1 expression compared to only (18.2%) of non-BA cases, achieving a significant statistical difference between both groups (P-value=0.057). Regarding SOX17, it was positive in all studied cases. About 90% of BA cases showed low expression of SOX17, while more than half of non-BA (55.2%) showed high SOX17 expression with a p-value <0.0001. HES1 expression was a good diagnostic marker for BA with 81% sensitivity and 70% specificity. Low SOX17 expression was significantly associated with BA with 55% sensitivity and 88% specificity.

Conclusion: HES1 expression could be used as a good diagnostic marker for BA with high sensitivity and specificity.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-13 Abstract No. 011 Date 15.10.2018 & 16.10.2018	Pathology of infectious diseases	Tounsi, Haifa Institut Pasteur of Tunis Tunis Tunisia	Poster	Ben Ayed, Ines Kacem, Monia Jaballah, Amira Attafi, Salsabil Yaiche, Hamza Laassili, Thalja Maaloul, Afifa Abdelhak, Sonia Boubaker, Samir

ABSRACT TITLE:

HPV prevalence and type distribution in non melanoma skin cancers of Tunisaian immunocompetent patients

ABSTRACT TEXT

Objective: The role of mucosal human papillomavirus (HPV) in the induction and maintenance of cervical, anogenital, and some oropharyngeal carcinomas is well recognized. In non melanoma skin cancers (NMSC) however, this role was suggested but there is no strong epidemiological evidence linking specific HPV types to an increased risk of skin cancer. In this study we aimed to evaluate the prevalence of mucosal HPV in NMSC and to determine the specific types that may be a risk factor of these tumors.

Methods: 79 NMSC formalin fixed paraffin embedded tissues were enrolled. Histological analysis was performed by a pathologist to assess the histological type. Mucosal HPV detection and genotyping was performed by nested PCR (PGMY09/PGMY11/GP5+/GP6+) followed by reverse line blot hybridization.

Results: Histological types of NMSCs were distributed as follow: 35.4% squamous cell carcinoma (SCC), 26.5% keratoacanthoma (KA) and 37.9% Basal cell carcinoma (BCC). Among the 79 samples, 34.2% were positive for HPV DNA. The prevalence of HPV infection was 42.9% of SCC, 33.3% of KA and 26.7% of BCC with no statistical significant difference (p=0.197).

HR-HPV types were found in 88.9% of HPV positives, 41.7% of them were observed in SCC, 25% in KA and 33.3% in BCC with no statistical significant difference (p=0.485).

In total, we found 44 HPV infections with 9 different viral types. The most frequent HR-types were HPV16 in SCC, HPV16 and HPV 31 in KA and HPV66 in BCC. Single infections were detected in 55.6% of HPV positives predominantly with HPV66 (18.5% of single infections). Multiple infections were found in 44.4% of HPV positives mixing 2 to 4 HPV types predominately HPV16, HPV31 and HPV35.

Conclusion: In this study, we found a high prevalence of mucosal HPV types (34.2%) and HR HPV types (88.9% of positives) in NMSC. These findings are in agreement with the previous reports and support the role of HPV as risk factor in the development of these cancers. Types detected differ from one study to another. In this study the most prevalent types were HPV16 and 31 which are reported as ones of the most frequent types found in cervical cancer. Furthermore, these types were found in SCC and kératoacanthome which are considered as the same histological types as cervical cancer. This suggests that HPV16 and 31 may play a role in skin SCC carcinogenesis.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 012 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Belkralladi, Houria Djillali Liabes universty Sidi Bel Abbes Algeria	Poster	Diaf, Mustapha A.Tou

ABSTRACT TITLE:

A comparative study of the different subtypes of colorectal adenocarcinomas about 319 cases

ABSTRACT TEXT

Objective: The aim of this study was to document clinico-pathological features of different subtype of colorectal adenocarcinomas and to compare the frequency and the prognosis of each subtype.

Methods: Retrospective study of 319 cases of colorectal carcinomas diagnosed at our Anatomy-Pathology department over 6 years from January 2010 to December 2015. Data concerning frequency, gender, age, tumor location, histological subtypes, tumor grading, residual adenomatous component, lympho-vascular invasion, perineural invasion, tumor budding, lymph node metastasis, distant metastasis and TNM stage were analyzed for each subtype.

Results: The total number of cases was 319, including 184 males (57, 68%) and 135 females (42, 31%).The sex ratio is 1.3. Male predominance is noted in all histological subtypes of adenocarcinomas except serrated adenocarcinoma where the predominance is female.

The left colon and the rectum are the most frequent locations for all histological subtypes, whereas serrated adenocarcinoma is observed in 50% of the cases in the right colon.

In this study, the major subtype is conventional adenocarcinoma (n=262) 82,13%, followed by mucinous adenocarcinoma (n=33) 10, 35%, Signet-ring cell adenocarcinoma (n=14) 4, 38%, serrated adenocarcinoma (n=8) 2, 50% and finally medullary carcinoma (n=2) 0, 63%.

Signet- ring cell adenocarcinoma is the most pejorative histological subtype with vascular invasion in 50%, perineural invasion in 75%, tumor budding in 60% lymph node metastasis in 70% and distant metastases in 66.66% of cases. Most patients with serrated adenocarcinoma have a good prognosis with 37, 50 % of vascular invasion, perineural invasion and tumor budding. Lymph node metastasis in 25% and distant metastases in 12.50% of cases.

Conclusion: The purpose of this study was to discuss the clinicopathological features and evaluate the prognostic value of different histological subtypes of colorectal adenocarcinomas.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 012 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Ben Khalifa, Sarah Tunisia	Poster	Bdioui, Ahlem Abdessaid, Nihed Mestiri, Sarra Ben Abdelkader, Atef Sriha, Badeddine

ABSTRACT TITLE:

Unilateral ovarian luteinized thecoma with sclerosing peritonitis: A case report

ABSTRACT TEXT

Objective: Luteinized thecoma associated with sclerosing peritonitis (LTSP) is an enigmatic and rare condition characterized by frequent bilateral involvement and a very common association with sclerosing peritonitis.To the best of our knowledge, only a few cases of unilateral LTSP has been reported.

Methods: We report a rare association between unilateral luteinized thecoma of the ovary and sclerosing peritonitis

Results: An 18-year-old woman presented with gradually increasing abdominal pain of one month's duration.On physical examination, her abdomen was tender a palpable mass in the left iliac fossa. Radiologic examinations revealed a 20-cm heterogenous left pelvic mass, as well as free peritoneal fluid.The right ovary and uterus appeared normal. The human chorionic gonadotropin (βhCG) test was negative. The patient underwent laparotomy, which showed a left ovarian tumor with multiple implants in the peritoneal cavity and yellow watery ascites, suggesting malignancy.The right ovary, fallopian tubes, and uterus were unremarkable.Left salpingo-oophorectomy and intraoperative biopsy of the rignt ovary were performed.On gross examination, the outer surface of the left ovary appeared lobulated and grayish- white, measuring 16 cm across its largest diameter.The sectioned surfaces of the ovarian mass were solid and yellow with cystic areas. Microscopically, the tumor comprised of fascicles and sheets of plump spindle and oval cells. Within the spindle cell population, lutein-like cells were scattered singly or in clusters. Mitotic counts of spindle cells revealed 15 mitotic figures per 10 high-power fields. Right ovarian biopsy was histologically normal.Thus, histomorphological diagnosis of unilateral LTSP was made.

Conclusion: LTSP are relatively rare neoplasms (<1% of all ovarian neoplasms) that belong to sex-cord stromal group of tumors. In spite of its large size, wide-spread involvement, mitotic activity, and complications due to peritoneal involvement, behavior of this rare condition is benign. Standard guideline of treatment is yet to be formulated for this entity.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25 Abstract No. 012 Date 17.10.2018 & 18.10.2018	Soft tissue pathology	De Los Reyes, Francia Victoria UERM Memorial Medical Center Laboratory Quezon City Philippines	Poster	Cruz-Yañez, Socorro

ABSTRACT TITLE:
Primary malignant peripheral nerve sheath tumor of the chest wall - A case report

ABSTRACT TEXT

Objective: Malignant peripheral nerve sheath tumor (MPNST) is a rare malignant soft tissue tumor that arises de novo from a peripheral nerve or as a transformation from a pre-existing neurofibroma or ganglioneuroma. Although this tumor accounts for 5% of all soft tissue sarcomas, the incidence of MPNST in the general population is noted only at 0.001%, but comparatively increases to 4.66% in patients with Neurofibromatosis type 1 (NF-1).
Methods: With this in consideration, this report presents a primary chest wall MPNST in a patient with no known family history of NF-1 and no clinical evidence of NF-1 de novo mutation.
This is a case of a 36-year-old male with a chest wall mass that grew from 1 cm to 6.5 cm in greatest dimension within a three-month duration. Wide resection showed a 5.5x6.5x2.5 cm, fairly well encapsulated, ovoid, firm to fibrous tumor with a tan to light gray outer surface and a tan to light gray, firm to gritty cut surface with irregular islands of pale blue to pale gray, myxoid material. The lesion was limited to the soft tissues of the pectoralis minor and the intercostal muscles with a good plane of separation with the 4th and 5th rib segment.
Results: Histologic sections showed a malignant spindle cell neoplasm with associated intratumoral benign osseous and chondroid metaplasia. Targeted immunohistochemistry for CD99 and S100 given the behavioral and morphologic correlation that limits soft tissue tumors with the predisposition to benign osteoid and chondroid metaplasia within the tumor. Immunohistochemistry confirms the diagnosis of MPNST.
The patient has no identifiable stigmata of NF-1 and has no history of previous surgical procedures for lesions indicating NF-1-associated nerve sheath tumors.
Conclusion: The discussion of primary chest wall MPNST arising de novo in a patient with no identifiable co-morbid conditions, particularly in a limited income setting, addresses the need for awareness regarding this relatively rare soft tissue tumor occurring in the chest wall, while responding to the need for prompt and precise pathologic diagnosis within the constraints of health care delivery system capabilities to provide a multidisciplinary approach to treatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 012 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Farid, Rola M . Faculty of Medicine Ain Shams Dept. of Pathology Cairo Egypt	Poster	Sammour, Sanaa Abd El-Maged Shehab El-Din, Zeinab Abd El-kader Salman, Manal Ibrahim Omran, Tag Ibrahim

ABSRACT TITLE:
Implications of CD24 and CD133 cancer stem cells for targeted therapy in urinary bladder carcinoma

ABSTRACT TEXT

Objective: Identification of bladder cancer stem cells (CSCs) is ultimately needed to conduct the development of targeted therapies. Nevertheless, the origin of these bladder CSCs and their induction process are ambiguous. This study aims to investigate the relationship and clinical significance of two putative CSC markers, CD24 and CD133, in bladder cancer.
Methods: The expression of CD133 and CD24 was immunohistochemically analyzed in urinary bladder carcinoma (n= 60). Cases were categorized, according to the pattern of staining of both markers, into low versus high expression. The correlation between the expression of each marker and clinicopathological parameters was then analyzed.
Results: Immunoreactivity of CD133 and CD24 was detected in 22 (36.67%) and 17 (28 .3%) cases, respectively. The remaining 31 (51.7%) studied cases were negative for both markers. Combined CD133 and CD24 expression was detected in 29/60 cases (48.33%). Ten cases (10 /29) shared a similar pattern of expression of both markers (CD 24 and CD 133). The remaining cases (19/29) showed variable degree of expression. In schistosomal associated lesions, combined CD133 and CD2 was detected in 60% of the cases. Moreover, combined CD133 and CD24 expression was detected in 80% of cases associated with lymph node metastasis and all cases associated with distant metastases. The expression of both markers was significantly frequent in high grade tumors and in advanced stages. Patient's age and gender, and, histological tumor type did not influence the expression of either CD133 or CD24.
Conclusion: Both, CD133 and CD24 may be involved in tumor progression, aggressive behavior and metastasis. They can be potential markers for targeted therapy. Beside, their prognostic significance may select high-risk patients for more aggressive therapy.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19 Abstract No. 012 Date 17.10.2018 & 18.10.2018	Hematopathology	Khatanbaatar, Gerelee Bona Vita Laboratory Dept. of Pathology Ulaanbaatar Mongolia	Poster	Bayarsaikhan, Enkhjargal

ABSTRACT TITLE:
Kikuchi Fujimoto Disease: The case report of Mongolia

ABSTRACT TEXT

Objective: Kikuchi-Fujimoto Disease (KFD) is a rare, benign condition of necrotizing histiocytic lymphadenitis, typically presenting in young women. This report is on the first diagnosed and cured case of KFD in Mongolia.
Methods: The patient was a 24 year old, female, who presented with fever, night, sweats, rash and cervical lymphadenopathy. Based on clinical features, histopathology and immunohistochemistry findings, the diagnosis of KFD was confirmed.
Results: Full recovery was achieved using symptomatic treatment.
Conclusion: To minimize diagnostic confusion and potentially harmful and unnecessary treatment, emphasize that clinicians should be aware of this condition.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 012 Date 15.10.2018 & 16.10.2018	Cytopathology	Koh, Fong Seen Dorevitch Pathology Dept. of Anatomical Pathology Albury Australia	Poster	

ABSRACT TITLE:
Parathyroid carcinoma: From Cytology to HIstology

ABSTRACT TEXT

Objective:
Fine-needle aspiration (FNA) between parathyroid and thyroid lesions can show similar cytomorphological findings and is diagnostically challenging.
Methods:
A literature review and discussion about parathyroid carcinoma and its differential diagnosis on FNA findings with histo-cytological correlation.
Results:
FNA cytology of the parathyroid may look similar to Hurtle cell neoplasm, adenomatous thyroid nodules with Hurtle cell change or chronic lymphocytic thyroiditis.
Conclusion: FNA cytology of parathyroid can mimic thyroid lesion. Clinical history, laboratory, imaging, and FNA correlation are important to aid in diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	Koufopoulos Nektarios Saint Savvas Cancer Hospital Athens Greece	Poster	Psichogiou, Eleni Vamvakaris, Ioannis Antoniadou, Foteini Theodorakopoulou, Maria Pigadioti, Eleni Khaldi, Lubna
Abstract No. 012				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Warthin-like papillary thyroid carcinoma: Description of a case

ABSTRACT TEXT

Objective: Papillary Thyroid Carcinoma (PTC) is a the most common primary malignant tumor of the thyroid. There are several variants including the very rare Warthin-like variant of PTC. We present a case of this neoplasm.
Methods: A 51 year old patient was admitted due to bilateral 1.1 and 1.05 cm thyroid nodules as incidental findings on ultrasound examination. Both lesions had irregular margins. Ultrasound-guided fine-needle aspiration biopsy was performed. The cytological diagnosis was bilateral Bethesda grade III lesions. The patient underwent total thyroidectomy.
On gross examination two irregular, solid, grey-white tumors located one in each lobe with a maximum diameter of 1.1cm each.
Results: On microscopic examination the tumor of the right lobe consisted of cells with eosinophilic cytoplasm, nuclear chromatin clearing, grooves, pseudoinclusions and a dense lymphoplasmacytic infiltrate in the background of Hashimoto thyroiditis. On the same lobe a focus of microcarcinoma measuring 0.1cm was found. The tumor of the left lobe consisted of the follicular variant of PTC. There was no perithyroidal soft tissue extension of either tumor or regional lymph node metastasis.
Immunohistochemical study was positive for AE-1/AE-3, Ck-7 and HBME-1. Our histological findings were consistent with multifocal carcinoma of the thyroid consisting of three foci one of them consistent with Warthin-like variant of PTC. The patient received adjuvant treatment with I-131. At 24 month follow-up the patient is free of local recurrence or distant metastasis.
Conclusion: Warthin-like variant of PTC shares histological features with Warthin tumor of salivary glans. It is often associated with Hashimoto thyroiditis. Its prognosis is similar to the conventional type of PTC of similar size and stage.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Koufopoulos Nektarios Saint Savvas Cancer Hospital Athens Greece	Poster	Psichogiou, Eleni Vamvakaris, Ioannis Antoniadou, Foteini Theodorakopoulou, Maria Pigadioti, Eleni Khaldi, Lubna
Abstract No. 012				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Solitary fibrous tumor of the lung: Case presentation

ABSTRACT TEXT

Objective: Solitary fibrous tumor (SFT) of the lung is a rare mesenchymal tumor. Its occurs more commonly in soft tissue, nasal cavity, pleura, meninges and bone. We present a case of SFT of the lung.
Methods: A 75 year old patient was admitted due to non-specific symptoms (chest pain and cough). Chest X-ray and CT scan revealed a 4.5 cm well-defined mass of the right lower lobe. CT guided fine needle biopsy was performed. The pathology report was mesenchymal neoplasm consistent with SFT. MRI and PET scan were negative for metastatic disease. A right lower lobectomy was performed. On gross examination the tumor was encapsulated, whorled, grey-white in color and had a maximum diameter of 4.5cm.
Results: On microscopic examination the tumor consisted of fascicles of uniform spindle cells displaying a patternless growth pattern on a collagenous background. Several irregularly distributed thick walled vessels were identified. Increased cellularity, marked nuclear atypia, pleomorphism, or prominent necrosis were not present. Mitotic figures were few (up to 2/10 hpf).
Immunohistochemical study was positive for CD-34, SMA, BCL-2 and negative for CK-8/18 and Desmin. Ki-67 stained 5% of tumor nuclei. Our findings were consistent with SFT. Tumor margins were free. There has been no recurrence or metastasis in the 24 months since surgery.
Conclusion: SFT is a relatively rare benign mesenchymal tumor arising commonly in the pleura, accounting for <5% of pleural tumors. It presents more frequently in middle-aged adults, with no sex predilection. SFT of the lung is very rare. Surgical resection with free margins is usually curative. Its prognosis is excellent. However careful postoperative follow-up is necessary due to the possibility of local recurrence (2-8% of cases).
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Lee, Kiryang Seoul National Univ. Hospital Department of Pathology Seoul Republic of Korea	Poster	Lee, Yangkyu Lee, Hyejung Lee, Youngeun Kim, Haeryoung
Abstract No. 012				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Nrf2 overexpression is a poor prognostic factor in hepatocellular carcinoma and associated with multidrug resistance after transarterial chemoembolization treatment

ABSTRACT TEXT

Objective: Nuclear factor-E2- related factor2 (Nrf2) activation has been associated with cytoprotective effects, including detoxification, antioxidant and anti-apoptotic properties. However, the same
properties in cancer cells result in augmented malignant growth, as shown in vitro studies on hepatocellular carcinomas (HCCs). In this study, we analyzed the expression status of Nrf2 and its regulator Keap1 in human HCCs, and correlated with findings with clinicopathological features and survival.
Methods: Tissue microarray slides consisting of 306 surgically resected HCCs were immunohistochemically stained with Nrf2, Keap1, carbonic anhydrase-9 (CA9), multidrug resistance proteins (MDR1, BCRP), an epithelial-mesenchymal transition (EMT)-related marker (ezrin) and Ki-67. Apoptotic index was evaluated by TUNEL analysis.
Results: Cytoplasmic Nrf2 overexpression in HCC was associated with poor overall survival (p<0.001), smaller tumor size, lower apoptotic index, increased expression of MDR1, BCRP, ezrin
and CA9 (p<0.05, all). On multivariate analysis, high Nrf2 expression was a significant independent predictor of poor overall survival [hazard ratio 3.89, 95% CI (1.92-7.89); p<0.001] in addition to pT stage (p=0.016). On subgroup analysis according to preoperative transarterial chemoembolization (TACE) status, Nrf2-high HCCs with preoperative TACE (n=96) more frequently showed increased multidrug resistance protein expression (MDR1 p=0.009; BCRP p<0.001), while no association was seen between MDR1/BCRP expression status and Nrf2 status in treatment-naïve HCCs (n=191). Keap1 expression status was only marginally associated with reduced progression-free survival
(p=0.090). Conclusion: Cytoplasmic Nrf2 overexpression was a significant independent predictor of decreased overall survival in HCCs, and was associated with increased expression of EMT-related marker and decreased apoptosis, suggesting an association between Nrf2 overexpression and aggressive behavior.
In addition, while chemoresistance-related protein expression was significantly increased in post-
TACE HCCs with Nrf2 overexpression, the same association was not seen in treatment-naïve HCCs,
suggesting a role for Nrf2 in the induction of chemoresistance after TACE.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Mhiri, Marwa Farhat Hached Hospital Dept. of Pathology Sousse Tunisia	Poster	Mestiri, Sarra B H khalifa, Aya Ouédraogo, Aida Sandrine Sriha, Badreddine
Abstract No. 012				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Epidermodysplasia verruciformis: A case report

ABSTRACT TEXT

Objective:
Fine-needle aspiration (FNA) between parathyroid and thyroid lesions can show similar cytomorphological findings and is diagnostically challenging.
Methods:
A literature review and discussion about parathyroid carcinoma and its differential diagnosis on FNA findings with histo-cytological correlation.
Results:
FNA cytology of the parathyroid may look similar to Hurtle cell neoplasm, adenomatous thyroid nodules with Hurtle cell change or chronic lymphocytic thyroiditis.
Conclusion: FNA cytology of parathyroid can mimic thyroid lesion. Clinical history, laboratory, imaging, and FNA correlation are important to aid in diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Nweke, Michael University College Hospital Dept. of Pathology Ibadan Nigeria	Poster	Obeta, Emmanuel Adeoye, Adewunmi
Abstract No. 012				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Case report of a rare collision tumour of the intracranial compartment involving a meningothelial meningioma and an invasive metastatic adenoid cystic carcinoma of the cerebrum

ABSTRACT TEXT

Objective: Case report of a rare collision tumour of the intracranial compartment involving a meningothelial meningioma and an invasive metastatic adenoid cystic carcinoma of the cerebrum. Metastatic cancers to the brain are relatively common but may rarely occur in the presence of benign and malignant primary intracranial neoplasms. One of these scenarios involves rare occurrences of collision tumours. These are defined as simultaneous occurrences of tumours of different histology at the same time in the same location.

Methods: A 50-year-old woman presented with a history of recurrent headaches of 11 months, left eye swelling, ptosis and visual deterioration each of 4 months. Her Glasgow coma score was 15. She had multiple cranial nerve palsies involving cranial nerves I, II, II, IV, V and VI. MRI showed isointense contrast enhancing mid-basal and left superior orbital masses extending to the para-sellar region and temporal fossa. Intra-op findings showed extension to the para-sellar and temporal regions with a firm olfactory groove noted. Macroscopically the masses received were heterogeneously greyish white and fragmented.

Results: Histology showed a simultaneously occurring WHO grade I meningothelial meningioma and a metastatic cerebral adenoid cystic carcinoma (cribriform variant) primarily from the left lacrimal gland. Immunohistochemistry showed positive expression of PR by the meningioma and EGFR, CD117, and CD43 by the adenoid cystic carcinoma. Ki-67 Immunohistochemistry showed a proliferation index less than 1%.

Conclusion: Collision tumours involving the intracranial compartment are relatively uncommon. Meningiomas remain the most common intracranial host of malignant metastasis. This has been attributed to their favorable unique immunological and hormonal environment. However, cases involving a metastatic adenoid cystic carcinoma are quite rare. Clinical accuracy in diagnosing these tumours macroscopically and radiologically is limited. Thus, the importance of extensive sampling of all tumor masses received. This finding is of significance in the clinical management of the patient

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	Oguntunde, Olubanji University of Lagos Dept. of Anatomic and Molecular Lagos Nigeria	Poster	Awolola, Nicholas Daramola, Ebunoluwa Abdulkareem, Fatimah Banjo, Adekunbiola
Abstract No. 012				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

P57 immunostaining pattern of Complete Mole in Lagos University Teaching Hospital

ABSTRACT TEXT

Objective: P57 immunohistochemistry has been proven as a veritable ancillary technique in diagnosis of molar pregnancy especially in differentiating between partial and complete mole (CM). CM does not express the staining because p57 is paternally imprinted and maternally expressed. This study is aimed at highlighting the p57 staining pattern amongst CM diagnosed in our institution.

Methods: Formalin Fixed Paraffin Embedded sections from archived blocks within the study period were made for p57 immnuohistochemistry using auto immunostaining processing according to DAKO guidelines. The staining was referred as adequate with positive internal control (decidua, extravillous trophoblasts) or external control (normal products of conception). The staining pattern of the cytotrophoblast nuclei and stroma villus cells were recorded.

Results: 100% of the CM stained negatively for p57 with 75% having positive internal control. 25% of the cases had no internal control staining positive, however the external control in the batches were positively stained. The CM seen in our environment were largely within the 2nd trimester accounting for 90% of the gestational ages with majority showing degenerative changes like calcifications.

Conclusion: In conclusion, the pattern of staining of CM amongst African origin has been found to be comparable with that of developed countries despite the commoner mid trimester presentation and degenerative changes

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Olteanu, Gheorge-Emilian UMFT Victor Babes Timisoara Romania	Poster	Ioana-Maria, Mihai Anderco, Denisa Alis, Dema Jurescu, Aura Gheju, Adelina
Abstract No. 012				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

A small pathology department study of patterns of metastatic spread in breast carcinoma

ABSTRACT TEXT

Objective: The aim of this study was to prospectively investigate the pattern of metastasis based on the 'intrinsic' molecular subtypes of breast cancer (luminal A, luminal B, Triple-negative, and HER2), and to further clarify the potential for metastatic disease.

Methods: Our pathology department database was assessed for cases of breast carcinoma with confirmed metastases spanning a period of 5 years (2013 - 2017). The inclusion criteria in the study were primary breast carcinoma and molecular subtyping with IHC staining.

Results: A total of 102 cases were included in the study (100 female patients and 2 male patients), age range at the initial time of diagnosis 24 - 90 years, 68 breast surgical specimens and 34 metastatic tissue specimens.

Metastasis location: regional lymph node/s (n=66), brain (n=9), skin (n=3), bone (n=16), epiploon (n=2), liver (n=1), contralateral breast (n=1), colon (n=1), gallbladder (n=1), inguinal lymph node (n=1). The main molecular subtype was Luminal A - 51 cases, the second most common was Luminal B - 19 cases, the 3rd most common was HER2+ (ER-) - 18 cases, and Triple-negative - 18 cases.

Conclusion: Luminal A remains the most common subtype encountered in everyday pathology practice, and with the most prevailing metastasis of all the 4 molecular subtypes. Out of 102 cases, regional lymph node/s metastasis was observed in 66 cases (64.7%), with bone the second most common (15.6%), a clear correlation was highlighted between the molecular subtype and the location of metastasis. Furthermore, HER2+ (ER-) subtype showed bone metastasis predilection, Luminal A, Luminal B, and Triple-negative a predilection for brain metastasis.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Rekik, Wafa Tunisia	Poster	Zehani, Alia Chelly, Ines Bouali, Sofiene Chelly, Beya Ghorbel, Zinet Azouz, Heifa Haouet, Slim Kchir, Nidhameddine
Abstract No. 012				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Intracranial chondrosarcoma: A rare entity

ABSTRACT TEXT

Objective: To focus on a rare entity and define the anatomo-clinical features of intracranial chondrosarcoma

Methods: We are reporting here a case of intracranial chondrosarcoma that is quite unusual

Results: A 33-year-old man presented with a diffuse headache of 3 months duration. He was admitted with weakness in the right extremities that had been persisted for over a month. The neurologic examination revealed right hemiparesis.

Cranial magnetic resonance imaging (MRI) demonstrated a well demarcated, parasagittal left frontal mass, which compressed to the lateral ventricle. Preoperative diagnosis was a meningioma radiologically. Left fronto-parietal craniotomy with complete excision of mass done. Tumor was well circumscribed greyish white in colour, firm to hard in consistency, relatively avascular, loosely adherent to surrounding brain parenchyma. A plane of cleavage was present at the lesion brain interface. On histopathology, sections shows circumscribed lobulated growth pattern with areas having hyaline cartilage. The lobules are variable in size. The capsule is moderately thickened and is showing mild lymphocytic infiltrate. The tumor has low to moderate cellularity and nuclear pleomorphism. Predominantly the lacunae are mononucleated however binucleated and multinucleated lacunae are also seen. Focal areas of calcification and fibromyxoid changes are also seen. Overall morphology is in favour of chondrosarcoma grade -1. Postoperative period was uneventful and patient was discharged on fourth postoperative day without any neurologic deficit. He did not receive any additional adjuvant treatment.

Follow-up of the patient with cranial magnetic resonance imaging (MRI) for 26 months after the surgery did not show any evidence of tumor recurrence.

Conclusion: Intracranial chondrosarcoma is a rare malignant cartilaginous tumor that generally arises from the base of the skull. Due to its rarity and similar imaging findings with meningioma, a differential diagnosis is often challenging. Pathological diagnosis is the gold standard and neurosurgical resection is the mainstay of therapy, although, as a result of its high propensity for recurrence, radiotherapy is often necessary.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Belkralladi, Houria Djillali Liabes Universty Dept. of Medicine Sidi Bel Abbes Algeria	Poster	H.Belkralladi, W.Senouci, K.T.Douidi, T.Guendouzi, F.Ouadah, A.Tou
Abstract No. 013				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Gastric signet ring cell adenocarcinoma associated with Menetrier's disease: A case report

ABSTRACT TEXT

Objective: Menetrier's disease is an uncommon disease characterized by diffuse hypertrophy of gastric mucosa and giant gastric rugae with an increased risk of gastric cancer. Only a few reports supporting its association with gastric cancer have been found.
Methods: We present the case of signet ring cell adenocarcinoma associated with Menetrier's disease. A 54 year-old female.
Results: A 54-year-old woman was admitted to our hospital with history of anemia, anorexia and 10 kg weight loss. During her hospitalization the patient presented with an extradural hematoma. A biopsy was performed revealed a bone metastasis of carcinomatous process.
Abdominal computed tomography demonstrated diffuse thickening of the gastric wall. A gastric biopsy specimen showed thickened gastric mucosa and cystic dilatation of glands compatible with Menetrier's disease and diffuse infiltration by signet ring cell adenocarcinoma.Total gastrectomy was perfomed. Unfortunately,postoperative convalescence was complicated and the patient died 7 days after diagnosis was made,and no therapy could be initiated.
Conclusion: A patient with signet ring cell adenocarcinoma associated with Menetrier's disease is reported.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Boateng, Akosua Korle Bu Teaching Hospital Dept. of Pathology Accra Ghana	Poster	
Abstract No. 013				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Maternal Floor Infarction as cause of intrauterine foetal death: An autopsy case report

ABSTRACT TEXT

Objective: Introduction: Maternal floor infarction is an uncommon idiopathic placental lesion that is associated with high perinatal morbidity and mortality. It has been linked with some maternal conditions such as pregnancy-induced hypertension, pre-eclampsia, as well as some immune-mediated diseases.
I present the case of an intrauterine foetal death with Maternal Floor Infarction as the cause of death.
Methods: Clinical history: The mother (31years old, para 3) was a known chronic hypertensive patient whose hypertension was well controlled during the pregnancy. The pregnancy had been uneventful and she reported in the second stage of labour at term (39weeks 3days) without fetal cardiac activity. She delivered spontaneously a 2.4kg macerated male foetus. The 3rd and 4th stages of labour were uneventful.
Results: Autopsy findings: Externally, the body of the foetus was meconium stained, had extensive epidermal bullae of the abdomen and both thighs as well as extensive peeling of the skin of the face, neck and both arms. There were no dysmorphic features. Internally, there were red serous effusions in the pleural and peritoneal cavities. The internal organs showed extensive autolytic changes. The placenta weighed 430g, had a pale fibrinous material covering about 80% of the maternal surface. The cut surfaces of the placenta also showed pale areas.
Conclusion: Histology: Sections of the placenta showed thick eosinophilic fibrinous material within the intervillous space, encasing chorionic villi and covering the basal plate in areas. Additionally villous capillaries were obliterated; some mononuclear extravillous trophoblastic cells were trapped within the fibrin.
Conclusion: A diagnosis of Maternal Floor Infarction as a cause of death was made based on the histologic appearance of the placenta.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	El-Daba, Somaia Ahmed Ain Shams University Dept. of Pathology Cairo Egypt	Poster	
Abstract No. 013				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Proximal type of epithelioid sarcoma presented as huge retroperitoneal mass in an old man; a case report and review of literature

ABSTRACT TEXT

Objective: Epithelioid sarcoma (ES) is a tumor of unknown origin . It is a rare deep dermal soft tissue sarcoma that was first described by Enzinger in 1970. Then, Guillou et al described a different proximal deep seated type that frequently occurs in older patients.
Methods: A 61-year-old male presented with chronic intestinal obstruction, CT scan revealed huge retro¬peritoneal mass, adherent to the posterior wall of ascending colon. Clinically colonic adenocarcinoma was suspected; so carcinoembryonic antigen (CEA) and colonoscopy were done but revealed no abnormalities. Clinical examination and body scan revealed no masses in any other organ. On exploration, a large unresect¬able retroperitoneal mass was found so incision biopsy was taken
Results: Sections examined showed predominantly large epithelioid cells surrounding areas of necrosis, resulting in necrobiotic granulomatous like pattern. Those cells showed deep eosinophilic cytoplasm and vesicular nuclei with prominent nucleoli. Although, these features are characteristically seen in ES, A list of additional differential diagnoses were suspected such as epithelioid type of malignant peripheral nerve sheath tumor, alveolar soft part sarcoma, epithelioid leiomyosarcoma, metastatic undifferentiated carcinoma, synovial sarcoma, epithelioid angiosarcoma, melanoma, epithelioid GIST, and anaplastic large cell lymphoma. In the view of these differential diagnoses, a panel of immunohistochemical markers was performed, including (vimentin, pancytokeratin, S100, desmin, CD117, CD31, CD34). This panel revealed strong diffuse cytoplasmic staining of the neoplastic cells to vimentin and CK . All other immunostains were totally negative. The histopatholologic features in association with the expressed immune markers and the provided clinical and radiologic features were important diagnostic clues for proximal type ES.
Conclusion: Proximal type/ES is a diagnosis of exclusion as a range of differentials needs to be ruled out on the basis of the clinical profile, morphology and a wide panel of relevant immunohistochemical markers before making such diagnosis.
Policy of full disclosure: I ask for Bursary application

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Gobbi, Helenice De Brot, Marina A.C.Camargo Cancer Center Uberaba Brazil	Poster	Costa, Talita Domingos, Tabata Balabram, Debora Rocha, Rafael Soares, Fernando
Abstract No. 013				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Androgen receptor expression in triple negative breast cancer: Association with clinicopathologic features and outcome

ABSTRACT TEXT

Objective: To investigate androgen receptor (AR) expression in a series of triple-negative breast cancer (TNBC).
Methods: We selected 66 cases of TNBC. Clinical, histopathological and survival data were obtained from medical records. A TMA containing 2 cores from each tumor was constructed and immunohistochemistry for AR, CK5, CK14, EGFR, p63, and p53 was performed. We considered basal-like breast cancer to be any TNBC CK5, CK14, and/or EGFR-positive.
Results: Mean age at diagnosis was 55 years (range, 32-83 years) and average tumor size was 5 cm. The majority of tumors were grade III (86%) and of ductal/no special type (79%). Axillary metastases were detected in 37 (56%) patients and 33 (50%) had stage III disease at diagnosis. The TNBC expressed AR (9 cases, 14%), CK5 (74.0%), CK14 (29.0%), EGFR (38%), p63 (35%), and p53 (67%). In addition, 77% were basal-like TNBC. Amongst AR+ cases, most were intermediate to high-grade invasive ductal carcinomas, except for 2 (22%) invasive apocrine carcinomas, with a mean tumor size of 6 cm and positive axilla in 55% of patients. AR expression was not significantly associated with tumor size, histologic type/grade, stage, nodal status, and basal-like phenotype. The only exception was EGFR expression, which was found to be more frequent among AR-positive TNBC (p=0.001). Patients with AR-positive TNBC seemed to be older (mean, 62 yrs x 54 yrs; p=0.05). Overall survival was 32 months (mean, 43 months; range, 0-159 months) and 27 patients (41%) relapsed with locoregional recurrence (12%) or distant metastasis (36%), lungs, brain, and bones being the most common sites. Nineteen patients (29%) died from breast cancer. No significant associations were found between AR expression and survival.
Conclusion: AR-positive TNBC comprised 14% of all TNBC in our series, occurred in older individuals and had an apocrine phenotype in 22% of cases, with no prognostic impact.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Hammam, Makram Mohammed Suez Canal University Faculty of Medicine Ismailia Egypt	Poster	Atwa, Maha Mansour, Sahar Abd EL-Maksoud, Rasha
Abstract No. 013				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Assessment of immunohistochemical expression of Claudin 1 in patients of urothelial cell carcinoma of urinary bladder in Suez Canal University Hospital

ABSTRACT TEXT

Objective: The development of urothelial carcinoma follows the acquisition of several genetic alterations and accumulation of such alterations is responsible for malignant transformation. The tight junction is part of the apical junction complex and is closely associated with both paracellular permeability and cell polarity, changes in expression/cellular localization of Claudins during tumorigenesis. The Claudin genes encode transmembrane proteins that belong to the super family of proteins, that have essential roles in TJ formation and junctions and has been proposed as a mediator of cell-cell adhesion and proliferation, which can contribute to tumorigenesis. The objective of the study is to evaluate expression of Claudin-1 protein in urothelial carcinomas and its correlation with the invasion of urothelial carcinoma to the bladder wall.
Methods: This is a retrospective descriptive study that included Sixty five paraffin embedded blocks of urinary bladder tissue from the pathology laboratory, Suez Canal University Hospital. Parrafin blocks included 14 cases of non-invasive urothelial carcinoma and 51 cases of invasive urothelial carcinoma. The blocks reviewed for clinicopathological prognostic factors and stained by Claudin-1 monoclonal antibody by immunohistochemical method.
Results: Claudin-1 protein was significantly overexpressed (p< 0.05) in cases of invasive urothelial carcinoma compared to non-invasive urothelial carcinoma. Claudin-1 was significantly correlated with tumour stage, however; it did not correlate with tumour grade, age of the patient, or histological architecture of urothelial carcinoma.
Conclusion: Claudin-1 protein is overexpressed in invasive urothelial carcinoma and could be proposed as a good prognostic factor that might contribute to progression of urothelial carcinoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Koufopoulos, Nektarios Saint Savvas Cancer Hospital Athens Greece	Poster	Pigadioti, Eleni Vaida, Simona Proestou, Despina Khaldi, Lubna Daskalopoulou, Dimitra
Abstract No. 013				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Cytological diagnosis of rare salivary gland tumors: A retrospective 10-year study

ABSTRACT TEXT

Objective: The aim of this retrospective study is to investigate the diagnostic potential of fine needle aspiration cytology (FNAC) in the evaluation of rare salivary gland tumors and the concordance rate with histological findings.
Methods: A number of 2476 salivary gland tumor FNACs were performed in the cytology department during a 10-year span from 2007 to 2016.
Pleiomorphic adenoma and cystadenolymphoma (Warthin's tumor) were the most frequent diagnoses, while mucoepidermoid carcinoma, adenoid cystic carcinoma, acinic cell carcinoma and adenocarcinoma not otherwise specified were diagnosed less frequently.
Rare entities included twelve myoepitheliomas, eight oncocytomas, four basal cell adenocarcinomas, nine squamous cell carcinomas, four epithelial-myoepithelial carcinomas, three small cell carcinomas, three cases of Miculicz syndrome, seven Non-Hodgkin lymphomas (three MALT, three follicular and one DLBCL), twelve Schwannomas and fourteen metastatic carcinomas of unknown primary. All diagnoses of primary tumors were morphological. Immunocytochemistry was performed in eight out of fourteen metastatic carcinomas.
Results: Out of seventy-seven cases sixty-nine were examined histologically in the pathology department. Comparison of cytologic and histologic diagnosis revealed concordance in sixty-six out of sixty-nine cases (96% concordance). There were only three cases with different diagnosis, namely one case of oncocytoma versus Warthin's tumor, one case of squamous cell carcinoma versus mucoepidermoid carcinoma and one case of basal cell carcinoma versus solid variant of adenoid cystic carcinoma.There no false positive or false negative cytological diagnosis. The three discordant cases concerned the histologic type.
Conclusion: FNAC displays high diagnostic reliability in rare salivary gland tumors when performed by experienced cytopathologists. The level of concordance with pathological findings is satisfactory.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Krayem, Dima Institute of Pathology Yabroud Syria	Poster	
Abstract No. 013				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Pathological study of plasma cell neoplasm and evaluation of the positivity of cd56

ABSTRACT TEXT

Objective: As there is a lack of studies on plasma cell neoplasms in Damascus University Hospitals , and since Damascus hospitals receive hundreds of cases each year of plasma cell neoplasms coming from all over Syria, we had started our pathological study for the plasma cell neoplasms diagnosed at Al-Assad University Hospital and subtype it to multiple myeloma, Plasmacytoma, plasmacytosis then investigate positivity or negativity of CD56 on the tumor cells. our study is retrospective study , Cross sectional.
Methods: 90 biopsies of plasma cell neoplasms from bone marrow or soft tissues had been sent to pathology department in Al-Assad university hospital between 2015 and 2016 .
Review H&E slides in addition to immunohistochemistry for CD138, CD20,Kappa, Lamda and special stains like Congo red and Masson, beside the patient's clinical history and radiological images to complete the diagnosis according to "WHO Classification of Tumours of Haematopoietic and Lymphoid Tissues IARC , Lion ,France ,2008" .
Then we applied CD56 for all cases regarding that CD56 considered as a prognostic factor in many recent studies .
We also applied CD56 on normal plasma cells in normal tissues from colon and lymph node but we didn't involve them in statistics .
Results: Of 90 cases , 62% were females , the ages of the patients range between 21 and 85 years old.
Average age for our patients was 58.686 .
12%, 78%,1%, 9% of cases were diagnosed as plasmacytosis, multiple myeloma , osseous Plasmacytoma ,and extra osseous Plasmacytoma respectively .
All the cases of Plasmacytoma And plasmacytosis were negative for CD56 .
Normal plasma cells in normal tissues were negative for cd56 .
Conclusion: 51% of the cases of multiple myeloma were positive for CD56 , Overall positivity (51%) is significantly lower when compared to recently published data from some other studies ,taking into consideration that the percentage is 40 % from the total patients in our study.
Of 70 cases of MM we found two cases with amyloid depositions that has red to green birefringence in polarizing microscope .
Prevalence rate of MM between age categories is similar to WHO reports and that was between 50 and 70 years old , whereas its prevalence rate between males and females differs from WHO reports , because females with MM was more in our study.
CD56 is negative in reactive and normal plasma cells and in cases of Plasmacytoma and plasmacytosis .
The positivity of CD56 in MM cases in our study is approximates but lower than studies in other countries that may be caused by the lower sensitivity of the antibodies used .
It was noticed that CD56 was positive in MM cases that contain high grade plasma cells
CD56 is a prognostic factor in MM and is positive in neoplastic plasma cell .
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Lam-Ubol, Aroonwan Srinakharinwirot University Bangkok Thailand	Poster	Sanvarinda, Pantip
Abstract No. 013				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Anti-inflammatory effect of ethanol extract of moringa oleifera lam. Leaves in lipopolysaccharide-stimulated monocytes

ABSTRACT TEXT

Objective: Moringa oleifera Lam. is a plant widely distributed in many tropical countries over the world. It was shown to have anti-oxidant and anti-inflammatory properties. Gram negative oral bacteria exerts lipopolysaccharide (LPS) that can stimulate innate immune system cells and lead to inflammation. Previous studies showed that Moringa oleifera Lam. suppressed Escherichia coli LPS-induced inflammation in mouse macrophages. Porphyromonas gingivalis is periodontopathic bacteria. Its LPS was shown to action via different toll-like receptor from E. coli. Effect of Moringa oleifera Lam. on inflammation induced by P. gingivalis LPS has never been tested. Objective of this study was to evaluate anti-inflammatory effects of ethanol extract of Moringa oleifera Lam. leaves in human monocytes stimulated with E. coli and P. gingivalis LPS.
Methods: Human monocytic cell line (THP-1) was pre-treated with 0.1, 1 and 10 ug/ml of ethanol extract of Moringa oleifera Lam. leaves for 2 hours before stimulated with 100 ng/ml of E. Coli LPS or with 1 and 10 ug/ml of P. gingivalis LPS for 24 hours. Levels of tumor necrosis factor-alpha (TNF-alpha) from the supernatants were evaluated by ELISA.
Results: Ten microgram per ml Moringa extract reduced TNF-alpha production by 20% from control when stimulated with E.coli LPS. However, moringa extract failed to suppress TNF-alpha production induced by P. gingivalis LPS.
Conclusion: Moringa extract at appropriate concentration can reduce inflammatory cytokine production induced by E. coli LPS. However, P. gingivalis LPS may employ different mechanism and cannot be suppressed using current moringa extract. Future study should be done in order to evaluate possible mechanism which will be beneficial for intraoral use of moringa.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 013 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Lee, Yangkyu Seoul Nat´l Univ Bundang Hosp . Gyeonggi-Do Republic of Korea	Poster	Park, Hyunjin Lee, Youngeun Lee, Kiryang Lee, Kyoungbun Ahn, Soomin Yoon, Yoo-Seok Choi, Gheeyoung Kim, Haeryoung

ABSTRACT TITLE:
The prognostic value of lymph node metastasis number, size and extracapsular extension in distal and perihilar bile duct cancers

ABSTRACT TEXT

Objective: The concept of N stage was changed from the location of lymph nodes (LNs) to the number of metastasized LNs in the 8th edition of the AJCC TNM staging systems for distal bile duct cancer (D-BC) and perihilar bile duct cancer (P-BC). We evaluated the prognostic significance of the revised nodal staging system for D-BC and P-BC, and the additional prognostic significance of metastastic tumor burden and extranodal soft tissue extension (ENE).
Methods: A retrospective analysis was performed on two independent cohorts of surgically resected D-BCs and P-BCs. Cohort 1 (Seoul National University Bundang Hospital) consisted of 93 D-BCs and 90 P-BCs, and cohort 2 (Seoul National University Hospital) consisted of 84 D-BCs and 99 P-BCs. The number of total and metastasized LNs, the size of the largest LN metastases, and the presence of ENE were recorded, and correlated with the overall survival (OS) and progression-free survival (PFS).
Results: For cohort 1 D-BCs, the revised N stage was significantly associated with decreased OS (p=0.002) and PFS (p<0.001); however, the difference between N1 and N2 stages were not significant. Metastasis size≥1cm and the presence of ENE were associated with decreased OS (p<0.001 and p=0.001, respectively) and PFS (p<0.001, both). In cohort 2, metastasis size≥1cm and ENE were associated with decreased PFS (p<0.001, both), but not with OS. For P-BCs, no significant associations were found between the nodal parameters and survival in both cohorts.
Conclusion: LN metastasis size and the presence of ENE were significantly associated with decreased survival in D-BCs in both cohorts. Neither the current N staging system nor the additional nodal factors were correlated with survival for P-BCs. Including LN metastasis size and ENE in the pathology reports may provide valuable prognostic information for D-BCs in addition to the number-based pN stage.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24 Abstract No. 013 Date 17.10.2018 & 18.10.2018	Pulmonary pathology	Mohamed, Shima Cork University Hospital Dept. of Histopathology Cork Ireland	Poster	Nicholson, Siobhan O Connell, Finbarr

ABSRACT TITLE:
A lung cancer with a cystic twist

ABSTRACT TEXT

Objective: Evaluation of a cystic lesion in close association with a pulmonary adenocarcinoma in a 53 years old woman
Methods: Radiological and microscopic correlation
Results: A 55 year old woman, treated over the course of a year for recurrent lower respiratory tract infections. She was referred to St James's Hospital, Dublin, Ireland, for further investigation .
Computed Tomography of the thorax reported a consolidation in the lower lobe of the right lung.
Chest X-rays at another institution, over the preceding 3 years, reported similar abnormality with a fluid level mentioned. Sequestration was raised as a differential.
At bronchoscopy, the mass was sampled by EBUS FNA and reported as mucinous adenocarcinoma.
The patient underwent right middle and lower bilobectomy. Macroscopic examination showed a partly cystic, mucoid tumour in the periphery of the right lower lobe.
Histology confirmed invasive mucinous adenocarcinoma. The cyst was an abnormally dilated airway. We suggest adenocarcinoma arose in association with a congenital pulmonary airway malformation (CPAM).

Conclusion: There is an association between CPAM, a rare developmental disorder of the lower respiratory tract, and the development of adenocarcinoma. It is estimated that mucinous adenocarcinoma develops in approximately 1% of unresected CPAMs.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16 Abstract No. 013 Date 17.10.2018 & 18.10.2018	Endocrine pathology	Moon, Woo Sung Chonbuk National University Ho Jeonju Republic of Korea	Poster	Lee, Seung Ok Kim, Kyoung Min

ABSTRACT TITLE:
Diagnostic pitfall of thyroid fine-needle aspiration-induced fibrosis: Follicular adenoma mimicking medullary carcinoma

ABSTRACT TEXT

Objective: Fine-needle aspiration (FNA) is a frequently utilized method for diagnosis of the thyroid lesions. Although, the technique is proven have clear advantages, the injury caused by FNA can induce various histologic alterations. Herein, we report a case of follicular adenoma showing histologic alterations possibly caused by FNA, mimicking medullary carcinoma.
Methods: A 39-year-old man presented with a thyroid mass. Ultrasonography of the thyroid revealed 2.2cm sized mass in right lobe with microcalcification. FNA was performed three times on the mass, and the results of the cytology were all atypia of undetermined significance.
Results: Thereafter, the patient underwent right hemithyroidectomy. The histologic findings of operative frozen section suggested a medullary carcinoma with massive amyloid deposition. However, after evaluating the permanent section and immunohistochemical staining, the mass was diagnosed as follicular adenoma showing extensive fibrosis.
Conclusion: Knowledge of a previous fine-needle aspiration procedure and awareness of its effects on histology of the subsequent surgical specimens are necessary to avoid potential misdiagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 013 Date 17.10.2018 & 18.10.2018	Dermatopathology	Myant, Nathalie Institut de Pathologie Gosselies Belgium	Poster	Ngendahayo, Placide

ABSRACT TITLE:
Primary cutaneous osteosarcoma with gastro-intestinal metastases and MDM2-CDK4 amplification: A case report with review of the literature

ABSTRACT TEXT

Objective: The authors report here a case of a 66-year-old man presenting with a solitary nodular lesion of the scalp with rapid gastro-intestinal metesatases and presenting histologically features of a conventional high grade osteosarcoma. The differential diagnosis is discussed and a review of the litterature is presented.
Methods: The resected nodule was fixed in 10% bufferd formalin and routinely processed. Paraffin sections were stained with haematoxylin and eosin. Immunohistochemical studies were performed using antibodies against cytokeratins AE1/3 and 5/6, CD10,S100 protein, p63, MDM2 and CDK4. Fluorescent in situ hybridisation (FISH) was performed using a double LSI VYSIS MDM2 probe specific for MDM2 in 12q15 and a double LSI VYSIS CHOP (DDIT3) probe, the centromeric probe of which covers the CDK4 gene in 12q15.
Results: The nodule as well as the metastases presented histological features of a conventional high gade osteosarcoma and were strongly positive for MDM2 and CDK4. FISH revealed MDM2 and CDK4 amplification in 12q15 and 12q13 respectively.
Conclusion: Primary cutaneous osteosarcoma can behave as agressively as those from their deeper counterparts and MDM2 and CDK4 amplification is not restricted to low grade osteosarcomas or those who progressed from low grade ones.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21 Abstract No. 013 Date 17.10.2018 & 18.10.2018	Neuropathology	Nweke, Michael University College Hospital Dept. of Pathology Ibadan Nigeria	Poster	

ABSTRACT TITLE:
To determine the histopathologic pattern of oligodendrogliomas at the University College Hospital, Ibadan, Nigeria, over a seventeen-year period

ABSTRACT TEXT

Objective: To determine the histopathologic pattern of Oligodendrogliomas at the University College Hospital, Ibadan Nigeria over a seventeen-year period
Methods: Haematoxylin and Eosin Slides of all patients with clinical and radiological features of intracranial space occupying lesions were reviewed over a seventeen-year period. Formalin Fixed Paraffin Embedded (FFPE) blocks were retrieved for all cases. The FFPE blocks were serially sectioned for immunohistochemical staining using mutant isocitrate dehydrogenase 1 (IDH-1 R132H), p53 and Alpha Thalassemia Mental Retardation X-linked antibodies.
Results: There were 10 histologically diagnosed cases of Oligodendrogliomas. Oligodendrogliomas constituted 2.9% of Central Nervous System tumours and 0.07% of all diagnosed malignancies in our department. 3 (30.0%) were males and 7 (70.0%) were females with a M: F ratio of 1:2.3. The median age of the patients was 22.4 years. Age range spanned 5 years - 64 years. Grade II Oligodendrogliomas accounted for 5 cases (50.0%) while Grade III (Anaplastic Oligodendrogliomas) accounted for the remaining cases (50.0%). All Oligodendrogliomas were supratentorial in location (100%), located in the various regions within the cerebral hemispheres. Immunohistochemical staining showed positive expression of Glial Fibrillary Acidic Protein and Alpha Thalassemia Mental Retardation X-linked antibodies. There was no expression using mutant isocitrate dehydrogenase 1 (IDH-1 R132H) and p53 antibodies
Conclusion: Oligodendrogliomas are relatively rare central nervous system neoplasms seen in our hospital. All cases seen show a female predominance, supratentorial location, younger age group with atypical immunohistochemical expression of contemporary diagnostic immunohistochemical markers used to attempt characterization.
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Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23 Abstract No. 013 Date 17.10.2018 & 18.10.2018	Pediatric pathology	Reshetnikova, Olga Baltic Federal University Dept. of Fundamental Medicine Kaliningrad Russia	Poster	Rudiuk, Liudmila

ABSRACT TITLE:
Histopathological and immunohistochemical studies of placentae in pregnancies with congenital heart defect

ABSTRACT TEXT

Objective: Pregnancies in women with congenital heart defect (CHD) have higher risk of adverse outcomes both for mother and fetus. Appropriate care for women with CHD requires knowledge of adaptation mechanisms in feto-placental unit and their limits. Histopathological and immunohistochemical features in placentae under CHD conditions were the aim of present study
Methods: 35 term placentas were collected at maternity unit of the regional hospital. They were divided into groups: I - 20 cases of CHD and 15 cases of physiological pregnancy (control group). Maternal medical history data, as well as anthropometric parameters of the fetus were recorded. Placental organometric, macroscopic and histological characteristics have been studied. The standard immunohistochemical staining protocol with monoclonal mouse antibodies to VEGF (RTU, Spring), SMA (Dako, 1:500) for placental tissue samples has been developed. Volume fraction of histopathological changes and level of VEGF, SMA expression were analyzed in both groups. Differences between groups' data reveled by non-parametric Wald-Wolfowitz test with reliability $p<0.05$.
Results: Placentas in cases of CHD had a lower weight, increased volume fraction of pathologic changes (ischemic injuries, foci of immaturity, fibrinoid accumulations within intervillous space, etc). Terminal villi proliferation and thinning of placental membrane were detected with great consistency. Immunohistochemistry revealed higher VGEF, SMA expression in cases of CHD compared with control group. Fetal weight in I group was lower than in controls.
Conclusion: Pregnant women with CHD more likely to have lower weights both fetuses and placentas. CHD and pregnancy are associated with placental ischemic injuries, compensatory remodeling of fetal capillaries and thinning of the placental membrane. High level of placental adaptation may prevent adverse fetal outcomes.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 014 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Bista Roka, Pratibha NAMS NAMS, BIR HOSPITAL Bir Hospital Kathmandu Nepal	Poster	Roka, Kumar

ABSTRACT TITLE:
TO SEE THE INCIDENCE, LOCATION, SIZE, HISTOLOGICAL TYPES AND THEIR RELATIONSHIP WITH MALIGNANCY IN GASTRIC POLYPS: THREE YEARS STUDY BASED ON BIR HOSPITAL PATIENTS.

ABSTRACT TEXT

Objective: Gastric polyps are found inadvertently on upper gastrointestinal endoscopy performed for an unrelated indication and only in rare cases they cause symptoms. The diagnosis of the polyps by histopathology is still a sine-qua-non as some these polyps have malignant potential or harbinger a malignancy at the time of their diagnosis.
This is a retrospective study done in Department of Pathology of Bir hospital, National Academy of Medical Sciences (NAMS), Kathmandu to see the incidence of gastric mucosal epithelial polyps, their location within the stomach, their size, different histological types and their association with malignancy on all the patients who had upper gastrointestinal endoscopy in the Department of Gastroenterology
Methods: A total of 40,060 upper gastrointestinal endoscopy were done in Bir hospital, NAMS, over the period of three years starting from January 2012 to December 2015. Pertinent demographic data and clinical indications for upper gastric endoscopy were retrieved from Department of Pathology, histopathology section. All biopsies were sent for histopathological examination to confirm the diagnosis.
The biopsy samples were received and after adequate fixation in 10% formalin, the specimen were processed in tissue processor, embedded in paraffin and serial sections were stained with hematoxylin and eosin (H&E). The slides were evaluated and concluded by junior pathologists followed by senior consultant pathologist.
Results: The present study showed that the hyperplastic polyps were the most common type of polyps and constituted 63.80%, followed by fundic gland polyps comprised 26.6% and least were contributed by adenomatous polyps 9.52%. Focal adenocarcinoma were found in two cases of hyperplastic polyps which comprised 2.09% of the hyperplastic polyps. A single case of adenomatous polyp which was of 2cm size and adjacent mucosa on histopathological evaluation showed high grade dysplasia in the polyp and the adjacent mucosa showed well differentiated adenocarcinoma. Dysplasia and malignancy were not found in the fundic gland polyps in present study.
Conclusion: The upper gastrointestinal tract endoscopy is the safest and an efficient method to assess the gastric lesion particularly gastric polyps when patients do not present with any symptoms. All the polyps must be evaluated as some of these polyps can transform into malignancy or are present to adjacent to the site malignancy.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 014 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Bouaouni, Saida INSTITUT PASTEUR D´ALGERIE Alger Algeria	Poster	Ait-Kaci, Hayat

ABSRACT TITLE:
Extensive morules in endometrial hyperplasia without atypia: a case report with immunohistochemical studies

ABSTRACT TEXT

Objective: Squamous metaplasia is often associated with endometrial adenocarcinoma and benign lesions, such as endometrial hyperplasia and chronic endometritis.
Studies have been conducted showing controversial results on the nature and source of the component cells of the morules, which appear to be distinct from squamous metaplasia in benign endometrial lesions and squamous differentiation in endometrial adenocarcinomas.
To focus on the histological and immunohistochemical features of the morules and compare our study to those reported in the literature.
Methods: A 40 year old woman without children (primary sterility of 3 years) having consulted for abnormal uterine bleeding, imaging showed endometrial thick- ening.
Endometrial curettage biopsy was performed, showing numerous morules encrusted within a endometrial hyperplasia
The morules consisted of round and spindle cells, devoid of atypia. No malignancy was recognized
A panel of antibodies was used for immunohistochemistry, namely cytokeratins: AE1 / AE3, CK7, CK20, Ck5 / 6, P63, Ki67, estrogen receptor, progesterone receptor, CA125, S100 protein, NSE.
Results: The morules observed were uniform cell clusters, with no squamous differentiation. They were immunonegative for the cytokeratins CK7, CK20, CK5 / 6, for ER and PR, CA125, P53, PS100, ki-67, but were positive for neurone specific enolase (NSE), weakly positive for AE1 / AE3, and P63.In contrast, the endometrial glands were positive for CK7, AE1 / AE3, PgR, ER, CA125, P53, P63, Ki67 (labeling = 15%), but were negative for CK20, CK5 / 6, PS100, NSE.
Conclusion: Our study joins that of literature which considers that morules are distinct from squamous metaplasia. Morules are thought to be neuroectodermal- like cell clusters.
Other studies of endometrial morules are needed; in particular, their functional characteristics and the relation between morules and the prognosis of cancer.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 013 Date 15.10.2018 & 16.10.2018	Breast pathology	Gyan, Eric Cape Coast Teaching Hospital Dept. of Pathology Cape Coast Ghana	Poster	Derkyi-Kwarteng, Leonard Akakpo, Patrick Kafui Brown, Ato Ampomah Derkyi-Kwarteng, Abigail

ABSTRACT TITLE:

Benign breast conditions in Ghana: An eight - year single - centre histopathological review of cases at the Korle-Bu Teaching Hospital

ABSTRACT TEXT

Objective: In recent times, there has been a remarkable increase in breast care seeking
behaviour among African women mostly due to heightened breast cancer awareness.
Physician, oncologist, surgeons and pathologist are confronted on daily basis with onus of deciphering between a trivial benign lesion and a more life threatening invasive carcinoma of the breast.This study determines the relative frequencies of the various benign breast conditions among patients who attended the Korle- Bu Teaching Hospital, Accra, Ghana.
Methods: This retrospective study included breast biopsy reports of all patients presenting with breast lumps between January 2006 and December 2013 at Korle-Bu Teaching Hospital,
Accra, Ghana. The data was analysed using SPSS version 16.5 and Microsoft Excel 2010.
Results: A total of 2,805 patients within the age range of 1 and 86 (mean 26.99 ±11.03 years) presented with various forms of benign breast conditions (BBC). The modal age range of presentation of benign breast conditions was 20-24 (29.6%) with 85.0% of the patients below the age of 40 (mean age of 23.19±5.98 years) while 15.0% were aged 40years and above (mean age of 48.5± 7.9 years). The commonest benign breast condition was Fibroadenoma (76%) occurring mostly in patients below 40 years (93.4%) with a predominant right breast preference (77.1% vs 73.3%; p=0.038). The second most common lesion was fibrocystic change (12.4%), a commoner in the older age group (43% vs 7%; p=0.000) with a bimodal peak prevalence was recorded at 25-29 and 45-49 year ranges. This was followed by fibroadenomatoid changes/hyperplasia and tubular adenoma with 2.8% and 2.1% respectively. Lower atypical epithelial hyperplasias (0.5%) predominantly presenting in patients above 40 years.
Conclusion: In conclusion, this current study revealed fibroadenoma as the most prevalent BBC in Ghana. Age and increasing size of mass are the two important demographic parameters associated with BBC in Ghana. (This Abstract is for an IAP Bursary Application)
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25 Abstract No. 013 Date 17.10.2018 & 18.10.2018	Soft tissue pathology	Hacene, Fatima EHU ORAN 1er Novembre 1954 Oran Algeria	Poster	

ABSTRACT TITLE:

Sarcoma of the soft tissue

ABSTRACT TEXT

Objective: These are extra-skeletal connective tumors except glioma tumors, lymphoid, blastematous and melanocytic tumors. Their incidence in Algeria in 2003 is 0.6%; according to the OMS it is 1 per 100000 inhabitants.
Methods: Our study includes 34 cases collected from 2014 to 2017. A standard eosin hematein study was performed followed by an immunohistochemistry study.
Results: Several histological variants have been found: Rhabdomyosarcomas, fibrosarcomas, liposarcomas, angiosarcomas, malignant tumors of the sheaths and peripheral nerves, and PNET
The histological study is based on architecture, the mitotic index, cytonuclear atypia, the study of necrosis and tumor stroma. The FNLCC grading with its 3 criterias: differentiation, mitotic index and extent of necrosis are sought. An application of the Eneking System and the classification of Hadju have been applied. Some associations with genetic diseases and some syndromes such as Li Fraunemi Syndrome, Lynch Syndrome and Von Recklinghausen disease have been found.
Conclusion: Soft tissue sarcomas are rare and complex because of their heterogeneity. The histological diagnosis is refined by the contribution of immunohistochemistry and molecular biology. A multidisciplinary approach is essential.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 014 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Khalil, Balgis Bakri Mohamed Ibn Sina Specialized Hospital department Dept. of Histopathology Khartoum Sudan	Poster	Elsayed, Elnazir

ABSTRACT TITLE:

A case report of villous adenomas of the urinary tract associated with adenocarcinoma of gastrointestinal tract

ABSTRACT TEXT

Objective: Villous adenoma of the urinary bladder is a rare but important lesion. Despite its benign Morphological features, coexistence with malignancies else where had been reported.The mechanism underlying the origin of villous adenoma in the urinary tract is still speculative.More studies will be needed to explore these tumors.
Methods: Clinical and pathologic findings of a case of villous adenoma of urinary tract (bladder and ureter) with adenocarcinoma in gastrointestinal tract (rectum) were analyzed by gross examination and microscopic investigation.The related literatures were reviewed.
Results: This 50-year-old man presented with hematuria and right iliac fossa mass. There was no fever, vomiting or lower urinary tract symptoms. There was history of right nephrectomy done 15 years back because of staghorn renal stone. Ct showed right bladder mass in posterior lateral wall infiltrating to right ureter. Transurethral resection was performed and cystoscopy was done. Bladder and ureter biopsies were taken for histopathology; which revealed tubulovillous architecture, lined by columnar epithelium with goblet cells, mild dysplasia no muscle invasion. Diagnosed as bladder and ureter villous adenomas. As part of investigation to exclude any bladder or GIT Tumor, colonoscopy was done, shows rectal mass, biopsy taken revealed sever dysplastic cribriform glandes with invasion of the lamina propria diagnosed as rectal adenocarcinoma.
Conclusion: villous adenoma of the urinary tract should be removed completely and sampled thoroughly to avoid missing more aggressive component careful examination for areas of in situ and invasive adenocarcinoma is essential, therefore, follow-up of all patients is recommended.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 014 Date 15.10.2018 & 16.10.2018	Cytopathology	Krishnani, Narendra S.G.P.G.I.M.S . Dept. of Pathology Lucknow India	Poster	Kumari, Niraj Baranwal, Harshita Chaudhary, Nandita

ABSTRACT TITLE:

Intraoperative Squash Cytology: Useful Tool in Immediate Surgical Management

ABSTRACT TEXT

Objective: Intraoperative consultation helps to provide preliminary diagnosis in neurosurgical specimens to decide immediate surgical management. Squash cytology is an effective, rapid and simple method for CNS lesions. The objective was to correlate diagnostic accuracy of squash cytology with histopathology and identify reasons for deferment, disagreement and partial agreement.
Methods: All cases of squash cytology received from January, 2014 to April, 2018 were reviewed and correlated with final histopathological diagnoses. Deferments, disagreements and partial disagreements were reviewed to look for possible reasons.
Results: Two hundred ninety-six cases were received of which 277 were evaluable (232 intra-cranial, 36 intra-spinal, 9 miscellaneous sites) and 19 were non-evaluable. No major cytological – histological discrepancy was seen in 247 cases with an overall diagnostic accuracy of 89.1%. Good correlation was seen in schwannoma (100%), pituitary adenoma (100%), astrocytoma (94.9%), medulloblastoma (90.9%), meningioma (86.9%), and metastatic carcinoma (80%), whereas poor correlation was seen in ependymoma (56%) and lymphoma (25%). Oligodendroglioma was most difficult diagnosis on cytology as all cases were diagnosed non-specifically either as glioma or astrocytoma because of increased cellularity. Ependymoma was misdiagnosed because of high cellularity and misinterpretation. Lymphoma is misdiagnosed as neoplastic cells spread out and get intermixed with fibrillary matrix, mimicking glial neoplasm
Conclusion: Cytology provides good cellular details in easily smearable tumors. It permits reliable intraoperative guidance. Oligodendroglioma, ependymoma and lymphoma showed low diagnostic accuracy. Accuracy can be improved by adequate intraoperative information, clinico-radiological correlation and proper morphological evaluation of cytological smears.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	**Lee, Youngeun** **SNUH Department of Pathology Seoul Republic of Korea**	**Poster**	Kim, Haeryoung Lee, Hyejung Lee, Kiryang Lee, Yangkyu Park, Hyunjin
Abstract No. 014				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Intratumoral IgA-positive plasma cell infiltration is associated with aggressive features of hepatocellular carcinoma

ABSTRACT TEXT

Objective: It has been recently demonstrated that accumulation of immunoglobulin A (IgA)-producing cells is associated with chronic inflammation and fibrosis in fatty liver disease and suppression of cytotoxic T-lymphocytes, supporting fatty liver-related hepatocarcinogenesis. In this study, we aimed to examine the infiltration status of IgA-positive plasma cells (IgA+PC) in human hepatocellular carcinomas (HCCs) and background chronic liver disease of various etiologies, and to correlate the IgA+PC infiltration status with the clinicopathological characteristics.
Methods: Tissue microarrays of 305 surgically resected HCCs were immunostained for IgA, programmed cell death ligand-1 (PD-L1), keratin 19 (K19) and urokinase plasminogen activator receptor (uPAR). IgA+PC counts were counted per high-power field for each HCC and its corresponding non-neoplastic liver, and tumoral expression of PD-L1, K19 and uPAR were evaluated semiquantitatively. The immunohistochemical stain results were then correlated with the clinicopathological characteristics.
Results: IgA+PCs were seen in 207 (72.4%) of HCCs and 227 (86.0%) of non-tumorous livers, and there was no difference in IgA+PC infiltration status according to the etiology. As expected, IgA+PC counts were increased in non-neoplastic livers with cirrhosis (p=0.017) and higher porto-periportal/septal activity (p=0.006), and intratumoral IgA+PC counts were positively correlated with PD-L1 expression status (p=0.014). In addition, intratumoral IgA+PC counts were significantly higher in HCCs with abundant intratumoral fibrous stroma (p=0.026), infiltrative gross type (p=0.017), portal vein invasion (p=0.008), and expression of K19 (p=0.047) and uPAR (p<0.001).
Conclusion: Here we show that IgA+PC are present in HCCs and chronic liver disease of various etiologies, and that the presence of intratumoral IgA+PC is associated with aggressive features of HCC, such as vascular invasion, infiltrative growth pattern, and "stemness"-related and epithelial-mesenchymal transition-related marker expression. Therefore, although further validation is required, tumor-infiltrating IgA+ cells may play an important role in HCC progression.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	**Liman, Almustapha Aliyu** **Ahmadu Bello University Zaria Nigeria**	**Poster**	Balarabe, Kabir Abdullahi, Shehu Abubakar, Murtala
Abstract No. 014				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Parotid Sialolipoma: A report of two cases from a Northern Nigerian hospital

ABSTRACT TEXT

Objective: INTRODUCTION
Although ordinary lipoma is the most common mesenchymal neoplasm; occurring quite frequently in the head and neck region, sialolipoma is a distinct but rare benign lipo-epithelial neoplasm of salivary glands. With few exceptions, these lesions affect mainly adults, especially the elderly. A few pathogenetic mechanisms have been hypothesized. The most frequently reported clinical presentation was a painless swelling. They are mostly cured with excision and carry no risk of recurrence.
We present two cases involving a child and an adult. To the best of our knowledge, this is the first report of sialolipomas from Nigeria.
Methods: Case Report
Results: PATIENTS
The first case is of a ten years old male who presented to our hospital with a painless, right parotid swelling of eight years duration. Excision biopsy revealed a yellowish, nodular, greasy 9.5 x 7 x 5.5cm mass. Histology showed an encapsulated, lobulated mass of mature adipocytes within which are serous-mucinous salivary gland acini and ducts. No recurrence was noted after two years. The second case is of a 41 years old man with a painless, right parotid mass. Grossly, it was an oval-shaped fibrofatty mass (9 x 8 x 5cm) with gray-yellow surfaces. Microscopy revealed lobules of mature adipocytes interspersed with salivary glandular tissues with focal chronic inflammation. The patient did well post-surgery.
Conclusion: CONCLUSION
Sialolipoma may occur at any age and grow to large sizes.
Policy of full disclosure

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	**Mekhelef, Khalida** **CHU Benimessous Dept. of Pathology Algiers Algeria**	**Poster**	Acherar, Farida Bouzid-Bendisari, Kheira Slimani, Assia Louanchi, Linda Aboura, Chahira Boudjerra, Nadia
Abstract No. 014				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
MYC/BCL2 proteine coexpression is a better predictor of prognosis than cell-of-origin classification in diffuse large B-cell lymphoma

ABSTRACT TEXT

Objective: Diffuse large B-cell lymphoma (DLBCL) is the most common subtype of non-Hodgkin lymphoma, It represents a group of highly heterogeneous neoplasias, diverse in clinical presentation, morphology, molecular alteration, and therapeutic response. DLBCL can be divided into germinal-center B cell–like (GCB) and activated-B cell–like (non-GCB) subtypes, prognostically different by gene-expression profiling (GEP). In recent studies, MYC/ BCL2 protein coexpression is considered as new prognostic marker. We used immunohistochemistry (IHC), to assess the prognostic value of MYC/BCL2 coexpression.
Methods: Paraffin-embedded lymphoma samples from 57 patients with de novo DLBCL, treated with rituximab, cyclophosphamide, doxorubicin, vincristine, and prednisone (R-CHOP) were studied using IHC, CD20, CD10, BCL6, MUM1/IRF-4, Ki67, BCL2 and MYC.
Results: There were 36 men and 21 women with a median age of 54 years (16–96). CD10 is positive in 22, 80% of cases, BCL6 in 47,37%, and MUM1 in 70% of cases. Using Hans algorithm, we classified 33,33% of cases as GCB subtype, and 66,67% of cases as non-GCB subtype. BCL2 expression is observed in 59, 64% of cases, mainly of non-GCB subtype. MYC expression is observed in 59% of cases and Ki67 in 63, 16% of cases. MYC and Ki67 expression are significant predictors of overall survival (P=0,014 - P=0,02) respectively, whereas BCL2 is not associated with OS (P=0,24). A significant correlation between MYC expression ≥ 40 and a high proliferation rate Ki67 ≥ 80% (P=0,004) is noted. MYC/BCL2 coexpression occurred in 42% of cases, more commonly (52,63%) in non-GCB subtype and has a significant correlation with prognosis (P=0,040).
Conclusion: LDGCB is the most common lymphoma in Algeria (53.88%). The GCB subtype is less common than the non-GCB subtype. The GCB / non-GCB phenotype according to Hans algorithm does not have a significant prognostic impact. MYC, Ki67 and MYC / BCL2 coexpression are significant prognostic factors, unlike BCL2 alone.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Pulmonary pathology	**Munkhdelger, Jijgee** **Intermed Hospital Ulaan Baatar Mongolia**	**Poster**	Altangerel, Bold Bat-Ochir, Oyun-Erdene
Abstract No. 014				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Intrapulmonary mature cystic teratoma: A rare case with prostatic tissue

ABSTRACT TEXT

Objective: Introduction: Intrapulmonary teratoma (IPT) was first described by Mohr in 1939 and a few cases have been reported since (1). We present a rare case of IPT with prostatic tissue.
Methods: Case presentation: A 45-year-old man presented with cough, haemoptysis and chest pain, continued for 2 weeks. He was diagnosed with pulmonary hemorrhage in other hospital and came to Intermed Hospital for emergency operation. The left pneumonectomy operation was done. Macroscopically, the cystic mass (8 cm x 7 x 5.5 cm) had a direct bronchial communication and showed intraluminal keratinous material and hairs, thick fibrous wall with focal fatty and cartilagenous tissue (Figure 1A). Microscopically, the cystic wall contained epidermal, skin adnexal, fatty and cartilage tissues (Figure 1B). Prostate gland tissue with corpora amylacea was also seen (Figure 1C). A focus of small glands with prominent nucleoli was found next to the prostatic tissue (Figure 1D) and it was confirmed as submucosal salivary type glands by immunohistochemistry. The final diagnosis was intrapulmonary mature cystic teratoma.
Results: Discussion: Criteria for primary pulmonary teratoma are 1) exclusion of a gonadal or extra-gonadal primary site and 2) origin entirely within the lung (2). Morgan et al. reported 7 patients with metastatic IPT arising from testicular embryonal and teratocarcinoma, and those were indistinguishable from primary tumor. Direct bronchial communication is a distinguishing feature of IPT and has been reported in 2/3 of the cases (3). In our case, the tumor was located entirely within the lung and showed direct bronchial communication. The patient did not have any other tumor.
Conclusion: Conclusion: Histologically, the interesting finding in our case was the presence of prostatic tissue. Although there are several reports of prostatic tissue in ovarian mature cystic teratoma (4,5), to our knowledge, it is the first case of IPT with prostatic tissue.
***NOTE: This abstract is for IAP Bursary application.**
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	Murshed, Khaled Hamad Medical Corporation Doha Qatar	Poster	Akhtar, Mohammad
Abstract No. 014				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Subacute thyroiditis: A possible complication of fine needle aspiration

ABSTRACT TEXT

Objective: To determine whether subacute thyroiditis can occur as a secondary complication to a recently performed fine needle aspiration. In addition, a literature review for well-documented complications following this procedure has been performed.
Methods: We have performed a comprehensive literature review for reported and well-documented complications that could follow the procedure of thyroid fine needle aspiration, and whether any cases of subacute thyroiditis have been described secondary to the procedure. This has been performed by searching PUBMED using the search headings: complications, thyroid gland, fine needle aspiration, FNA, subacute thyroiditis, granulomatous thyroiditis and de Quervain's thyroiditis.
Results: After extensive review of the medical literature, to our knowledge, no cases of subacute thyroiditis have been described to occur following the procedure of fine needle aspiration.
Conclusion: Our overall findings suggest that subacute thyroiditis can arise secondary to a recent fine needle aspiration procedure. This conclusion may add to our understanding to the pathogenesis of the disease. In addition, it may add to the list of possible complications of this very commonly performed procedure.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Nikolaidou, Anastasia Anticancer Hopital Theagenion Thessaloniki Greece	Poster	Galidis, Eleftherios Mixiou, Maria Nikolaidou, Ioanna Patakiouta, Freideriki
Abstract No. 014				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Sporadic type of the Ferguson-Smith variant of multiple keratoacanthomas syndrome - A case report

ABSTRACT TEXT

Objective: Multiple keratoacanthomas comprise a set of extremely rare syndromes, in which patients present with large numbers of keratoacanthomas. There are several distinct clinical types recognized. The Ferguson-Smith variant is a familial type of multiple keratoacanthomas, inherited by an autosomal dominant mode and characterized by early onset. Sporadic cases of this type have also been described, though.
Methods: We report a case of a 50 year old female, who presented 1 year ago with multiple (7) papules on her extremities, measuring 3-9 mm in maximum diameter. The lesions had developed rapidly and almost simultaneously, with accompanying pruritus. No relevant family history and no personal medical history of malignancy were referred, except a diagnosis of well differentiated squamous cell carcinoma on her left thigh 5 years ago. Physical and laboratory examination didn't reveal any internal organ malignancy. All the lesions were surgically excised.
Results: Histopathological examination of all the surgically excised material revealed a similar pattern of squamous epithelial proliferative lesions, with both exophytic and endophytic components, buttressing of their edges and a large central keratin plug. The keratinocytes comprising the lesions appeared bland, with eosinophilic to glassy cytoplasm. The mitotic activity was low.
A histopathological diagnosis of multiple keratoacanthomas of the extremities was established.
Conclusion: The clinical characteristics of the disease (small number of lesions, with maximum diameter >3mm and pattern of distribution which spares the trunk and the oropharyngeal mucosa) in combination with the lack of other substantial pathological condition in the same patient, indicate that this is a case of the Ferguson-Smith type of multiple keratoacanthomas. Furthermore, the lack of a family history and the relatively late onset (5th decade of life) of the disorder, imply a case of the sporadic type of the disease.
The differential diagnosis includes other types of multiple keratoacanthomas, such as the Grzybowski type, the Witten and Zac type and the Muir-Torre syndrome.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Ochirjav, Enkhee National Center for Pathology Ulaanbaatar Mongolia	Poster	Dorj, Bolortuya Baldandorj, Tuul Enkhbat, Bayarmaa
Abstract No. 014				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Analysis of survival and prognostic factors of patients with brain glioma in Mongolia

ABSTRACT TEXT

Objective: To estimate survival and prognostic factors of brain glioma patients diagnosed in the National Center for Pathology, Mongolia.
Methods: We retrospectively analyzed data of 107 glioma patients, who were diagnosed from January 2006 to May 2017. There were 52 (48.5%) male-patients and 55 (51.5%) female-patients, as totally. The mean age was 38.04 years old (ranged from 3 to 77). Clinico-pathologic analysis was performed by using archival slides and formalin-fixed, paraffin-embedded tissue. The Kaplan-Meier method was used for survival analysis, and we used univariate and multivariate analysis for prognostic factors.
Results: All among the cases, glioblastomas were most frequent 35 (32.7%), followed by diffuse astrocytomas 18 (16.8%). Regarding to anatomic location, involvement of multiple lobes was predominated 33 (30.8%), followed by the frontal lobe 22 (20.6%). Overall survival time of gliomas was 19.2 months, for low grade gliomas 28.5 months and 11.7 months for high grade, respectively. According to overall survival, tumor grading ($p<0.001$) and surgery type ($p<0.005$) were independent prognostic factors.
Conclusion: Histological tumor grading and surgery type were independent prognostic factors of glioma patients in Mongolia.
This abstract is for the Bursary application.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	Toru, Havva Serap Akdeniz University Dept. of Pathology Antalya Turkey	Poster	Bayramoglu, Zeynep
Abstract No. 014				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
What is more with congenital cardiac anomalies? A nine-teen years autopsy experience of a tertiary centre and literature review

ABSTRACT TEXT

Objective: Congenital cardiac anomalies are one of the most common structural anomalies in the newborn and occur at a rate of 3,3-8,1 at 1000 births. Their incidence in stillbirths is higher (27.5 per 1000) than in live births (5.6 per 1000). We aimed to retrospectively investigate the 19 year fetal and neonatal autopsy findings performed in our institude and determine the incidence of cardiovascular anomalies. We also identified other anomalies associated with cardiovascular anomalies and compared them with statistical data in other studies.
Methods: Between 1997 and 2016 a total of 1285 perinatal autopsies were evaluated in Akdeniz University Pathology Department . Cardiovascular anomaly was detected in 42 of 1285 autopsy cases. All information about the cases was reviewed retrospectively from the autopsy registry files in the pathology unit of our institude. Gender distributions of the cases, fetal autopsy diagnoses and congenital heart anomalies and pathologic findings were recorded.
Results: Cardiovascular anomalies were detected in 42 of 1285 autopsy cases between 1997 and 2016. 42.8% of our cases were male, 52.3% were female, 4.7% had sex determination due to maceration and early gestational age failed.
The average age of the mother is 29.1. The average gestational week is 23.2. Distribution of cardiac anomalies are given in table 1. Among these cases 6 cases were associated with a syndrome or association.
Conclusion: In a study by Açıkalın and his colleagues, 2150 autopsy cases found cardiovascular system malformation of 7.5%and 27% of these cases had complex anomalies. Özkan and his colleagues found cardiac system malformation in 25 (6.9%) of 362 autopsy cases, 22% of them were complex anomalies. Cardiac anomaly was detected in 99 cases (13.6%) of 726 autopsies performed by Ramalho et al. When we compare the incidence of congenital cardiac anomalies between studies, there is a variable incidence. This may have regional, social and economic reasons but also it may depent on the experience of the pathologist.
Fetal and perinatal pathology is an area of expertise that is concerned with the causes and mechanisms of death and congenital anomalies is based primarily on autopsy.
Perinatal autopsy gives a brief information about congenital cardiac defects and associated anomalies. It also high lights if these anomalies are associated with a syndrome or an association. These findings give chance to genetic counseling for further pregnancies. Thus detailed perinatal autopsy should be performed by experienced pathologists.
Note: This abstract is is for an IAP Bursary Application.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 015 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Boubaker, Samir Institut Pasteur de Tunis Dept. de Pathologie Tunis Tunisia	Poster	Yaiche, Hamza Tounsi-Kettiti, Haifa Ben Ayed, Ines Jaballah, Amira Mezghani, Najla Habbechi, Assia Maaloul, Afifa Abdelhak, Sonia Ben Jemii, Nadia

ABSTRACT TITLE:

Smoothened receptor expression and colorectal adenocarcinoma in Tunisian patients

ABSTRACT TEXT

Objective: Canonical Hedgehog (Hh) pathway is important for development and maintenance of several types of tumor, its implication in colorectal carcinogenesis remains unclear.

The aim of this study is to investigate the expression of Smoothened (SMO) receptor of Hh pathway in normal mucosa and colorectal adenocarcinoma, and to assess its correlation with clinicopathological features.

Methods: Our study enrolled 60 formalin fixed and paraffin-embedded specimens of colorectal adenocarcinoma and 5 samples of normal colon mucosa as controls. We investigated SMO expression by immunohistochemistry (IHC) in all cases studied. SMO expression was based on the intensity and proportion of immunolabelled cells. Statistical analysis was performed using SPSS version 20.

Results: IHC slides analysis show positive SMO expression for both normal mucosa crypts and adenocarcinoma. High expression was found in 63% of colorectal adenocarcinoma. Immunostaining was shown both in the cytoplasm and the membrane of all staining cells, and was focal to diffuse in immune infiltrate and vessels of the tumor microenvironment. The immunolabelling in adenocarcinoma was significantly associated with lymph node metastasis (P < 0.03). However, no significant association was found between SMO expression and other clinicopathological features.

Conclusion: Our data suggest that canonical Hh signaling could be implicated rather in constant renewing and differentiation of the colonic epithelium than in colorectal cancer proliferation. The association between SMO expression and lymph node metastasis suggests that this pathway may play an important role in CRC dissemination.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 015 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Chang, Ruby Baylor College of Medicine Dept. of Pathology Houston, TX USA	Poster	Anderson, Matthew Masand, Ramya

ABSTRACT TITLE:

Uterine carcinosarcomas: A clinicopathologic study of 23 cases

ABSTRACT TEXT

Objective: This study focuses clinical significance of specific pathologic features of uterine carcinosarcomas (UCS), particularly the types and proportion of carcinomatous and sarcomatous elements in primary and metastatic tumors and their relationship to prognosis. We also looked into immunohistochemical (IHC) expression of mismatch repair proteins in UCS.

Methods: Histology slides of UCS cases from 2006-2017 were re-reviewed. Patient (pt.) data and histological characteristics were noted. Tumors were categorized as either carcinoma-predominant (CP) or sarcoma-predominant (SP) depending on the component >50%. MSI testing by IHC was performed.

Results: 23 cases were retrieved (12 SP, 11CP). Median age (62 years); most common presenting symptom: abnormal uterine bleeding. 4 women reported use of hormone replacement therapy, while 1 was on tamoxifen. 5 reported family history of breast/gynecologic malignancies.

Tumor size:4.5-18 cm. Metastases was seen in 7/12 SP and 5/11 of CP cases. Heterologous elements were identified in 1 CP and 7 SP cases; of which 5/7 SP and 1 CP case had metastatic disease. Metastatic sites in SP and CP cases include lymph nodes (7), ovaries (7), abdominopelvic soft tissue (7), lung (4), vagina (2), adrenal (1), brain (1). Mean follow-up was 19 months. 7 pts. died of disease [Stage I (1), III (3), IV (3)]. 4 pts. are alive with disease [Stage III (2), IV (2)], 12 pts. are alive without disease [Stage I (7), II (3), IV (2)]. 2 of 21 cases had loss of MLH1 and PMS2 by IHC.

Conclusion: Presence of heterologous elements places patients at an increased risk of metastatic disease. Metastases are more frequent in SP cases; however, carcinoma is the most common component at metastatic sites. Further studies are necessary to determine if SP cases are biologically more aggressive and require additional therapy geared toward the sarcoma component.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 015 Date 15.10.2018 & 16.10.2018	Breast pathology	Ibisevic, Nermina Clinical Center Sarajevo Dept. of Pathology Sarajevo Bosnia and Herzegovina	Poster	Chikha, Adisa Bilalovic, Nurija Humackic, Alen Guzin, Zlatko Skenderi, Faruk

ABSTRACT TITLE:

Diagnostic performance and concordance of histological and radiological findings on breast core needle biopsy: Three years experience

ABSTRACT TEXT

Objective: Core needle biopsy (CNB) has become a standard for evaluation of suspicious breast abnormalities detected radiologically. Our aim was to evaluate the diagnostic performance of histological and radiological findings of breast CNB.

Methods: We analyzed medical records of breast CNB cases performed from year 2014 to 2017 in our institution. Cases were radiologically assessed using Breast Imaging-Reporting and Data System (BIRADS), and histologically using Reporting system of UK National Health Service Screening Programme (B1 to B5). To calculate false positive and false negative rates BIRADS 5 and 4 were considered positive, while BIRADS 3 and lower were considered negative for malignancy.

Results: There were 246 breast CNBs performed of which 18 were excluded due to missing BIRADS. Invasive malignant lesions (B5b) were found in 145/228 (63.5%) cases. Of those 93/145 (64%) were assigned BIRADS 5; 47/145 (33%) BIRADS 4; and 5/145 (3%) BIRADS 3 or 2. In situ malignant lesions (B5a) were found in 3/228 (1.3%) cases. Lesions histologically suspicious for malignancy (B4) were found in 3/228 (1.6%) cases and were designated BIRADS 4 in all three cases. Lesions of uncertain malignant potential (B3) were found in 31/228 (13.5%) cases and have been designated mostly BIRADS 4 (19/31 cases), then BIRADS 3 or 2 (9/31 cases), or BIRADS 5 (3 cases). Most frequently BIRADS 3 lesions were atypical ductal hyperplasia. Benign lesions (B2) were found in 44/228 (19.2%) and they were assigned BIRADS 4 in 18/44 (40%) and BIRADS 3 or 2 in 26/44 (60%) cases. Most frequent benign lesions were fibroadenoma and fat necrosis with non-specific inflammation.

Conclusion: False negative rate for malignancy was low (~3%), while false positive rate was high (~40%) although most of the false positive lesions were assessed as low suspicion for malignancy (BIRADS 4a). Improvement of radiological assessment methods may reduce the false positive rate and unnecessary CNB procedures.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 015 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Kilitci, Asuman Ahi Evran University Hospital Dept of Pathology Kirsehir Turkey	Poster	Uygun, Nesrin Emir, M. Levent

ABSTRACT TITLE:

Sarcomatoid type of paratesticular malignant mesothelioma in a dry-cleaning employee exposed to asbestos and diagnostic value of WT-1

ABSTRACT TEXT

Objective: From among the three major histologic types of paratesticular malignant mesothelioma (PMM),many cases of epithelial or biphasic mesothelioma have been reported in the literature.Pure sarcomatoid PMM is the least common but the most aggressive of the three major histologic types of mesothelioma cells.It is limited to only 2 cases.We present a case who has been exposed to asbestos for years due to dry cleaning and was diagnosed with sarcomatoid type of PMM and had a relatively good prognosis.

Methods: A 60-year-old man was admitted with a complaint of swelling in the left scrotum.He owned a dry-cleaning business for 37 years.There was no history of operation or trauma in the patient with a history of asbestos exposure.A testicular tumor was suspected preoperatively.A left radical inguinal orchiectomy was performed.

Results: Macroscopically,the outer surface of the material seemed as a nodular appearance. Tumor nodules with the largest size of 5.5x4.2x3.5 cm that were located mostly in the tunica vaginalis and perforated the outermost mesothelial layer of the material.Tumor nodules were also present in the spermatic cord.Testicular parenchyma,epididymis and ductus deferens appeared normal.Histopathologic examination demonstrated a malignant tumor which had a multinodular growth pattern in the paratesticular area and were arranged in a fascicular or storiform pattern and had a spindle and polygonal form and consisted of atypical cells with eosinophilic cytoplasm and eccentric oval-round nucleus.No epithelial or other components except for sarcomatoid component were found.The tumor was diffusely positively stained with Vimentin and WT-1;negatively stained with D2-40,calretinin,panCK,CAM5.2,HBME-1,CK5/6,CD138,desmin,SMA,CD34,CD45,S100, OCT4,AFP, CD30, HCG, CD117, PLAP,CEA.

Conclusion: Tumors with mesothelial origin should be considered in cases having extensive tumor nodules.The history of asbestos exposure should be questioned in detail.Sarcomatoid type of PMM can be confused clinically and histologically with true sarcomas.Therefore,immunohistochemical methods should be applied for proper clinical management.Critical importance of WT-1 should not be forgotten.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 015 Date 15.10.2018 & 16.10.2018	Cytopathology	Kushnarev, Vladimir Petrov Cancer Research Center Dept. of Pathology St. Petersburg Russia	Poster	Yatsenko, Anton Ustinov, Egor Leonov, Denis Artemyeva, Anna

ABSTRACT TITLE:
Development of tumor cells on the 3D scaffold of modified gelatin with controlled architecture for cell migration

ABSTRACT TEXT

Objective: Three-dimensional bioprinting is one of method for fabricating 3D scaffolds that capture tumor heterogeneity. Biomaterials containing cells and other bioactive factors can be stacked to form 3D scaffolds that mimic native tumor living tissue. Automation, precision, and reproducibility for tumor models – key design goals in our search for techniques to pattern heterogeneous tumor models. We think that 3D collagen scaffolds are appropriated to be analogues of complex tissues in vitro and are suited to routine histological, biochemical, immunohistochemical studies.
Methods: The overall scheme of the experiment including histologic characterization of primary tumor, the preparation of primary single-cells from tumor tissue, characterization of the primary cell culture by scanning electron microscopy and immunohistochemistry (IHC) validation. To create a scaffold of gelatin methacrylate, we used a a prototype of an extrusion type biological printer. We created the scaffold with a mesh structure, 60 m in height, with dimensions of 5x2 cm and a mesh line thickness of 200 µm. The desmoplastic spindle-cell melanoma cells were placed in a scaffold for colonization. After 72 hours, we examined the fixed scaffold, cut 3 microns. Cuts were examined under a scanning electron microscope and a light microscope with standard histological staining of hematoxylin-eosin. The concentration of cells in the scaffold was estimated on an area of 2 mm using the program Qpath with the Cell Detection module.
Results: The desmoplastic spindle-cell melanoma was confirmed by IHC S100, SOX10, TLE1 (focal), CD56 (focal), NSE (focal) positive and KBA62, HMB45, melanomas, tyrosinases, CD31, CD163, desmin, F13a, NF, GFAP, CD34, AE1 \ AE3, EMA negative. The isolated melanoma cells adhered to the surface of the scaffold, had a morphology similar to the primary tumor, with the predominance of epithelial-like cells. The cell concentration per area was 700 cells. Mobility of cells is minimal, the mitosis figures remain (up to 10 per 1 mm2).
Conclusion: We can use the obtained model for 3D cell cultivation, morphological and immunohistichemical models testing. The obtained model does not have negative properties for the migration of tumor cells, their proliferation and adhesion capabilities.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07 Abstract No. 015 Date 15.10.2018 & 16.10.2018	Head and neck pathology	Liu, Honggang Beijing Tongren Hospital , China	Poster	Zhao, Yihua Zhang, Hong Su, Caili Bai, Yuping

ABSRACT TITLE:
A clinicopathological study of oropharyngeal squamous cell carcinoma associated with high-risk human papilloma virus: the Beijing Tongren Hospital study

ABSTRACT TEXT

Objective: To observe the clinicopathological features of oropharyngeal squamous cell carcinoma（OPSCC） associated with high-risk HPV(OPSCC-HPV) and evaluate the effect of in situ hybridization methods for HPV in pathological diagnosis.
Methods: 11 cases of OPSCC-HPV were collected from January 2016 to April 2018. These cases are in accordance with the new WHO classification of head and neck tumours. The histopathologic features were analyzed. P16, Ki-67,and P53 were evaluate by Immunohistochemistry and HPV DNA was detected by ISH. HPV mRNA was evaluated by RNAScope.
Results: OPSCC-HPV typically presents at an advanced clinical stage, 6 with cervical lymphadenopathy (large and cystic), 4 with tonsillar swelling, 1 with odynophagia. Microscopically the tumors exhibits distinctive non-keratinizing squamous cell carcinoma morphology. Nodal metastases in cervical were large and cystic. Capsule of lymph node were thickning. OPSCC-HPV arises from crypt epithelium and grows beneath the surface epithelial lining of tonsillar as nests and lobules, often with central necrosis. Tumor cells displays a high N:C ratio and a high mitotic and apoptotic rate. Tumour nests are often embeded in lymphoid stroma, and may be penetrated by lymphoid cells. 11 cases (11/11) were strongly positive for P16. Ki-67 index was >90% and focally positive or negetive for P53. Seven cases (7/7) were negative for HPV DNA 6/11,one case(1/7) was focally positive for HPV DNA16/18. 9 cases (9/9) were strongly positive for HPVmRNA16, synchronously, one case focally positive for HPVmRNA18.
Conclusion: OPSCC-HPV is a pathologically and clinically distinct form of head and neck squamous cell carcinoma showing an extensive lymph node metastasis. Microscopically the tumors exhibits distinctive non-keratinizing morphology. Immunohistochemical staining of P16 and Ki-67 was strongly positive, and P53 was focally positive or negative. OPSCC-HPV is caused by high-risk HPV, with type 16 responsible for all cases. Detection of high-risk HPV16 mRNA with RNAscope method in diagnosis and pathogen identification was higher sensitivity and specificity.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 015 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Maher Taie, Doha National Liver Institute Dept. of Pathology Shebin Elkom Egypt	Poster	Elleboudy, Samar El Sayed, Behairy Allam, Alif Khedr, Mohamed

ABSTRACT TITLE:
Effect of hepatic fibrosis on the outcome of Kasai Procedure in cases of biliary atresia

ABSTRACT TEXT

Objective: To evaluate the effect of hepatic fibrosis on biliary drainage in patients with biliary atresia who undergone Kasai procedure.
Methods: This study included 75 infants with Bilary atresia (BA) in whom liver biopsy was indicated for etiological diagnosis. BA was further divided 3 months after Kasai Hepatoportoenterostomy (HPE) procedure according to total bilirubin level into successful outcome (total bilirubin <2 mg/dl) and failed outcome (total bilirubin ≥2 mg/dl). They were divided into two groups; Group 1: successful HPE group (n = 16), Group 2: failed HPE group (n = 59). A third group with healthy neonates (n = 30) were enrolled in the study as controls. Liver biopsy from all cases was subjected for histopathological assessment of characteristics of BA. Masson Trichrome stain for assessment of stages of fibrosis. Morphometric analysis using image analyzer was applied on Sirius red stained sections to assess the degree of fibrosis.
Results: A statistical significant difference was detected between grades of fibrosis in both succeeded and failed group (P<0.048), where higher grades of fibrosis were associated with failed Kasai. By correlation between each grade of fibrosis and the outcome, high prediction of succeeded outcome is contributed to grade 2 than grade 3 and grade 4 (P=0.016). Regarding morphometric analysis, a significant statistical difference was found between succeeded group and failed group (P<0. 008).
Conclusion: Early diagnosis of BA and accurate defining of liver fibrosis grades before Kasai operation has become a demand and a need to increase success rate and native liver survival.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19 Abstract No. 015 Date 17.10.2018 & 18.10.2018	Hematopathology	Mhiri, Marwa Farhat Hached Hospital Dept. of Pathology Sousse Tunisia	Poster	Mestiri, Sarra Jacoub, Sarra Bourigua, Ayda Hmissa, Sihem

ABSRACT TITLE:
Langerhans Cell Histiocytosis revealed by atlanto-Axial osteolytic lesions

ABSTRACT TEXT

Objective: Langerhans cell histiocytosis (LCH) is a rare condition mostly seen in children and adolescents. Eosinophilic granuloma is one of its three clinical entities and is considered as a benign osteolytic lesion. Many reports of patients with spine histiocytosis are well documented in the literature; it is not the case of atlantoaxial localisation.
Methods: A 4-year-old boy without significant medical history was admitted for limited neck motion since 3 weeks. The physical examination showed an irreducible torticollis with analgesic attitude of cervical spine. There was no tumoral syndrome and the neurological examination as well as skin examination and laboratory tests were normal. The magnetic resonance imaging (MRI) of cerebro-spinal cord uncovered an infiltrative mass involving the C2 disc extending to the surrounding soft tissues leading to an increase in C1-C2 space, without compression of the spinal cervical cord.
Complement CT showed a fragmented disc with important C1-C2 dislocation. The odontoïd and mass biopsy was performed by endoscopic guidance.
Results: Histological features were consistent with inflammatory eosinophilic granuloma. The positivity of the immunostain by the antibody anti Ps100 and the antibody anti CD1a confirms the diagnosis of LCH. The patient was successfully treated with systemic chemotherapy and surgery.
Conclusion: Atlantoaxial LCH is rare. A delay in the diagnosis of this disease may lead to progressive neurological deterioration and increasing compression affecting largely the prognosis. The combination of chemotherapy and surgical procedure seems to be an effective treatment in such lesions.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 015 Date 17.10.2018 & 18.10.2018	Dermatopathology	Njima, Manel Fattouma Bourguiba Hospital Dept. of Pathology Sousse Tunisia	Poster	Ben Khlifa, Sarra Ben Abdeljelil, Nouha Belkacem, Oussama Hamdani, Moez Zakhama, Abdelfattah Njim, Leila

ABSTRACT TITLE:
Merkel cell carcinoma: A clinicopathological study of 3 cases

ABSTRACT TEXT

Objective: Merkel cell carcinoma (MCC) is a quite rare aggressive cutaneous neuroendocrine malignancy; first described by Toker in 1972. It is defined loosely by small case series and reviews. Our objectifve is to determine the epidemiological, etiopathogenesis and clinicopathological characteristics of MCC
Methods: It is a retrospective study of 3 cases of MCC collected from our department over a 6-year-period
Results: There were a 64 year old male; 74 and 83 year old female. They presented a red, indurated skin tumefaction which was located respectively on the knee, on the leg and on the forearm. Clinical examination revealed well defined, painless nodule that measured between 2 and 3.5 cm. Patients underwent a wide local excision. The morphological aspects and the immunohistochemical profile are those of MCC
Conclusion: Merkel cell carcinoma affects predominantly the white advanced age population with male predilection. It presents mainly on the extremities and head and neck.
Multiple factors contribute to the etiology of MCC such as ultraviolet radiation, immunosuppression. But since 2008 Merkel cell polyomavirus was found to be the main etiological agent of this skin cancer. Identification of this tumor virus has led to new opportunities for early diagnosis and targeted treatment of MCC
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21 Abstract No. 015 Date 17.10.2018 & 18.10.2018	Neuropathology	Poyraz, Aylar Gazi Universitesi Ankara Turkey	Poster	Pamukcuoglu, Selma

ABSRACT TITLE:
Detection of RELA fusion gene by FISH and immunohistochemical stain with P53 in ependymomas

ABSTRACT TEXT

Objective: RELA fusion-positive ependymoma is the only genetically defined subtype accepted by World Health Organization Classification of Tumors of the Central Nervous System in 2016. It occurs at supratentorial region. RELA fusion positivety is associated with worse prognosis and also immunopositivity for p53 was established as a marker for poor prognosis in ependymomas. In this study we investigated RELA and P53 and their relationship with other prognostic parameters and each other.
Methods: 110 ependymomas diagnosed between 2006 and 2017 in the Pathology Department of Gazi University Medical School are included in this study . Age, histological tumor grade, location, resection type, recurrence, and survival were collected for each patients. We studied immunohistochemistry for Ki-67, p53, and EMA in tumor tissues. Additionally, we investigated the RELA fusion gene in microarrays of tumor tissues by RELA FISH. We compared all the relevant parameters and searched for all prognostic values.
Results: We found RELA fusion gene by break apart FISH probe in 2 cases: A child with a grade 2 ependymoma at supratentorial region and an adult with grade 3 anaplastic ependymoma at the same region. In both cases, high degree of staining with ki-67 and p53 was also observed. The presence of RELA gene fusion is dependent on location whereas it is independent of tumor grade.
Conclusion: Tumor supresor gene P53 a frequently inactivated in ependymomas and P53 is inactivated by MDM2 . RELA fusion gene is related to NF-Kb signal pathway , upregulation of this pathway induce MDM2 expression thereby resulting in p53 inactivation. Additonally p14/ARF downregulation, frequently caused by CDKN2A deletion, is associated with biologically aggressive tumours and p53 accumulation. Our results supports that patients with RELA fusion positive ependymomas can benefit from chemotherapeutics that reactivates p53 function.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24 Abstract No. 015 Date 17.10.2018 & 18.10.2018	Pulmonary pathology	Regragui, Meriem Ibn Rochd Hospital Department of Pathology Casablanca Morocco	Poster	Benayad, Samira Bennani Guebessi, Nisrine Marnissi, Farida Karkouri, Mehdi

ABSTRACT TITLE:
Malignant deciduoid mesothelioma: An unusual entity

ABSTRACT TEXT

Objective: Primary malignant deciduoid mesothelioma is a rare subtype of epithelioid mesothelioma characterized by cytomorphological features resembling decidualized tissue.
Methods: We report a case of primary malignant deciduoid mesothelioma in a 57 years old male patient with no history of asbestos exposition. Clinical examination and imaging revealed ascites with a slight small bowel thickening. An exploration surgery was performed. The small bowel wall appeared normal; peritoneal and epiploicbiopsies were done. On histopathological examination, they both showed a diffuse proliferation composed of discohesive large epithelioid cells. The cytoplasm was dense and eosinophilic; the nuclei were irregular, with clumped chromatine and prominent nucleoli. Binucleation and multinucleation were frequent. Mitotic figures were numerous (9/10HPF) with some atypical figures. On immunochemistry, the cells were diffusely positive to cytokeratin AE1AE3, calretinin (nuclear and cytoplasmic stain), podoplanine (membranous staining), EMA. Staining with cytokeratin 5/6 and vimentine was patchy. Staining with Cytokeratin 7, Cytokeratin 20, CDX2, desmin, CD56, anti-hepatocyte, RCC, PSA were negative. Based on clinical features combined to morphological and immunochemistry features, the diagnosis of primary malignant deciduoid peritoneal mesothelioma was made. The patient is on chemotherapy. He currently has a 5 months survival.
Results: Primary malignant deciduoid mesothelioma was first described in young women without history of asbestos exposure in peritoneum and was thought to be a distinct clinicopathological entity with an ominous prognosis. Its clinical presentation and imaging are nonspecific. Histopathological examination and immunochemistry are crucial to determine this diagnosis and to exclude differential diagnoses. On morphology, it is characterized by large cells with abundant glassy eosinophilic cytoplasm resemblingdecidualized cells. Pleomorphism is variable. Its immunoprofile is similar to other epithelioid mesotheliomas. Treatment is based on surgery, chemotherapy and radiotherapy. The prognosis is the same as other epithelioid mesotheliomas, and seems to depend on histological grade.
Conclusion: We highlight through this case a particular variant of epithelioid mesothelioma that can be easily confused with neoplastic and non-neoplastic lesions.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25 Abstract No. 015 Date 17.10.2018 & 18.10.2018	Soft tissue pathology	Talaat, Suzan Ahmed Maher Teaching Hospital Cairo Egypt	Poster	Harsha, Salem Salem, Eman

ABSRACT TITLE:
Recurrent lower extremity angiomatoid fibrous histocytoma: A case report

ABSTRACT TEXT

Objective: To study a case of recurrent left thigh mass in 12years old girl.
Methods: Histopathological and immunohistochemical study of the case.
Results: Panel of immunohistochemical markers confirmed the diagnosis of Angiomatoid fibrous histiocytoma.
Conclusion: Although AFH is a rare tumor,it should be kept in mind in differentials of recurrent soft tissue lesions in children and young adults.It should be managed with appropriate surgical excision seeking negative surgical margins then close follow up .Local radiation therapy may be helpful in managing the recurrence.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	Zawati, Imen Salah Azaiez Institute Departement of pathology Tunis Tunisia	Poster	Adouni, Olfa Betaieb, Ilhem Goucha, Aida Ben Slimen, Maher Moukh, Haithem Bouzaine, Hatem Boubaker, Samir Rahal, Kaled Gamoudi, Amor
Abstract No. 015				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

EBV-positive nodular sclerosis Hodgkin's lymphoma associated with bladder neuroendocrine carcinoma: A case report

ABSTRACT TEXT

Objective: This study aimed to report a case of nodular sclerosis Hodgkin lymphoma (HL) associated with bladder neuroendocrine carcinoma.
Methods: A 50-year-old man was referred to Salah azaiez Institute (Tunis, Tunisia) due to gradually increasing inguinal lymphadenopathy in Avril 2017. Scintigraphy with SPECT –CT imaging scans was used in the diagnosis.
Results: A first screening, including showed a bladder neuroendocrine neoplasm coupled with magmas of left pelvic and inguinal lymphadenopathy intensely fixing the radiotracer. A partiel cystectomie was performed with bilateral inguinal lymph node dissection. Histopathological study and specific immunohistochemical staining test detected a grade 3 bladder neuroendocrine neoplasm infiltrating mescule layer. Left iliac and inguinal lymph nodes contain an EBV (LMP-1) positive nodular sclerosis Hodgkin's lymphoma. Chemotherapy using VIP protocol remains the first-line treatment which may be active on both Hodgkin lymphoma and neuroendocrine carcinoma.
Conclusion: In our knowledge we report the first case of association between bladder neuroendocrine carcinoma and an EBV positive nodular sclerosis Hodgkin's lymphoma involving the iliac and inguinal lymphadenopathy is very rare form of association tumors. The clinical diagnosis is not specific, on histological and immunohistochemical evidence as there are no signs.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Boubaker, Samir Institut Pasteur de Tunis Tunis Tunisia	Poster	Ben Jemii, Nadia Tounsi-Kettiti, Haifa Yaiche, Hamza Attafi, Salsabil Jaballah, Amira Mezghani, Najla Habbechi, Assia Ben Fayala, Chayma Abdelhak, Sonia Ben Jemii, Nadia
Abstract No. 016				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Glioma-associated oncogene Homolog 1 expression in colorectal adenocarcinoma: Association with RAS status

ABSTRACT TEXT

Objective: In Tunisia, colorectal cancer is the third leading cause of death in males and the second in females. Its metastatic stage forms (mCRC) remain frequent and can currently benefit from targeted therapies including EGFR antibodies commonly used in wild-RAS gene patients. However, 25% of patients with RAS (KRAS and NRAS) wild type status didn't respond to this therapy. The non response could be explained by other genetic alterations. Hedgehog signalling pathway (Hh) involved in the development, recurrence and transition to metastatic stages was described as a possible target for therapy.
The aim of this study is to investigate the expression of the transcription factor Gli1 (Glioma-Associated Oncogene Homolog 1), marker of the Hh pathway activation, in mCRC and to assess its correlation with clinicopathological features and molecular RAS status.
Methods: This study enrolled 60 formalin fixed and paraffin-embedded specimens of mCRC and 5 samples of normal colon mucosa as controls. We investigated Gli1 (CliniSciences sc-20687) expression by immunohistochemistry and RAS status by Real Time PCR in all colorectal adenocarcinoma specimens. Gli1 expression was based on the intensity and proportion of immunolabelled cells. Statistical analysis was performed using SPSS version 20.
Results: Gli1 expression was weakly expressed in normal colonic mucosa. In mCRC, cytoplasmic expression was detected in all malignant cells. Overexpression was found in 63.9% of RAS wild type and in 33.3% of mutated RAS (P<0.01). However, no association was seen between Gli1 expression and clinicopathological features. Focal to diffuse immunostaining of immune infiltrate and the vessels was shown in the tumor microenvironment.
Conclusion: Overexpression of Gli1 in RAS wild type patients could explain the resistance to targeted therapy in this group and may be considered as target to specific therapy to reduce the number of non responders.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Elshaikh, Abubaker Baylor College of Medicine Dept. of Pathology and Immunology Houston, TX USA	Poster	Chang, Ruby Anderson, Matthew Masand, Ramya
Abstract No. 016				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Coexistent Endometrial and Ovarian Endometrioid Carcinoma: A Clinicopathologic Analysis of 19 Cases with Immunohistochemistry Testing for Mismatch Repair Proteins

ABSTRACT TEXT

Objective: Assess the clinicopathologic characteristics and mismatch repair protein (MMRP) status of 19 coexistent endometrioid carcinomas (ECs) of the uterus and ovary classified as synchronous or metastatic based on published criteria.
Methods: Pathology database was searched for cases of coexistent ECs of the uterine corpus and ovary between 2005-present. Morphologic features were reviewed. Cases were categorized according to published criteria as ovarian metastasis of endometrial primary, endometrial metastasis of ovarian primary, or synchronous independent primaries. MMRP immunohistochemical testing was performed on endometrial and ovarian tumors. Demographic factors, treatment, follow-up data were abstracted from clinical database.
Results: Nineteen women were identified. Mean age: 47.7 (Range: 32-63 years). Patients presented with abnormal uterine bleeding (12/19). 8 cases were classified as endometrial primary with ovarian metastasis, 1 as ovarian primary with endometrial metastasis, and10 as synchronous primary tumors. Primary endometrial tumors were stage III or IV (8/8), the one ovarian primary tumor was stage IIIC, and majority of the synchronous primary tumors were stage I and II (6/10). Ovarian endometriosis was identified in 4/9 synchronous primaries. 5/10 synchronous primaries showed MSH6 loss in ovary (2), MLH1 and PMS2 loss in ovary only (1), and MLH1 and PMS2 loss in both endometrium and ovaries (2).
Conclusion: Current histopathologic criteria fail to adequately differentiate synchronous endometrial and ovarian ECs from metastatic disease originating at either anatomic site. More accurate tools for differentiating these distinct categories of disease are urgently needed as distinguishing synchronous from metastatic lesions is critical, not only for intraoperative decisions, but also for subsequent clinical management and outcome. Long-term, development of these tools will be important for making more effective intraoperative decisions for surgical staging as well as subsequently triaging women to adjuvant postoperative therapy.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Jeong, Jin-Sook Dong-A University College of Medicine Dept. of Pathology Busan Republic of Korea	Poster	Byun, Kyung Do Ju, Mi Ha Park, Rha Im Sohn, Jin Hee Cho, Se Heon
Abstract No. 016				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

T-cell Immunoglobulin mucin 3 expression on tumor infiltrating lymphocytes roles as a prognosticator in triple negative breast cancer

ABSTRACT TEXT

Objective: There have been tremendous interests in breast cancer targeting immune checkpoint molecule, especially in triple-negative subtype where unmet treatment needs remain. This study was designed to analyze expression, intracellular localization and prognostic role of immunosuppressive molecules, including T-cell immunoglobulin and mucin domain-containing molecule 3(TIM3) and programmed cell death protein 1(PD1) on tumor infiltrating lymphocytes(TILs), and PD1 ligand 1(PD-L1) on cancer cells.
Methods: One hundred nine triple negative breast cancers(TNBC) were selected among histologically diagnosed invasive ductal carcinomas. Immunohistochemistry with tissue array blocks was processed with anti-TIM3, PD1, PDL1, ER, PR, CK5/6, KI-67, EGFR and HER2 antibodies. Associations between their expressions and clinicopahological parameters were evaluated.
Results: TIM3 and PD1 were expressed at cytoplasms of tumor TILs, and PD-L1 was expressed at cytoplasms and membranes of cancer cells. TIM3 expression was shown in all 109 TNBCs, consisting of 17 grade1(<5% TILs:15.6%), 31 grade2(5%<, <33% TILs:28.4%), 48 grade3(33%<, <66% TILs:44.0%) and 13 grade4(>66% TILs:11.9%). Increased number of TIM3(+) TILs was meaningfully associated with high grade histologic type, lesser extensive in situ component and absence of microscopic calcification, and significantly related with higher TILs(P=0.0031), higher PD1(+) TILs(P=0.0001), higher PD-L1 expression(P=0.0019), recur(P=0.0001) and death(P=0.0007). Furthermore, Higher TIM3(+) TILs were significantly correlated with high TIL+ high PD-L1 group(P=0.0058) and high PD1+high PD-L1 group(P<0.0001), compared with low TIL+low PD-L1 group and low PD1+low PD-L1 group. High TIM3 expression was significantly correlated with recur(P<0.0001) and death(P=0.0002) via Kaplan-Meier analysis, although not an independent factor as a predictive value for disease progress or overall survival using Cox's proportional hazard model.
Conclusion: We found that TIM3 expression parallels extent of TIL, and expression of PD1 and PD-L1, and closely correlated with disease progress and death. Conclusively, increased TIM3 expression of TILs influences progression of TNBCs, endorsing a possible candidate to serve as a prognostic factor for TNBCs and important implications for the success of therapeutically targeting them. Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25 Abstract No. 016 Date 17.10.2018 & 18.10.2018	Soft tissue pathology	Kilitci, Asuman Ahi Evran University Hospital Dept of Pathology Kirsehir Turkey	Poster	Asan, Ziya

ABSTRACT TITLE:
Histopathological profile of surgically excised scalp and skull lesions

ABSTRACT TEXT

Objective: Although subcutaneous lesions in the scalp are more common lesions than the lesions of the skull, there are few studies in the literature that assess the frequency of scalp and skull diseases. The goal of this study is to establish the frequency and main histopathologic findings of these lesions. Our study is one of the largest series and shows that the incidence of surgically excised scalp masses includes a various array of diseases.
Methods: We reviewed 265 extracranial masses from 173 patients. Mean age of the patients, gender distribution, localization and characteristics of lesions, histopathological type, radiologic features were analyzed.
Results: 100 (57.8%) of the patients were male, and 73 (42.2%) were female. The mean age was found as 42.98 (ages 5-87). 261 were within the scalp, 1 involved the scalp and skull and 3 were within the limits of the inner and outer tables of the skull. 4 lesions exhibited malignant features. There were 101 trichilemmal cysts, 74 epidermoid cysts, 38 intradermal nevus, 8 verruca vulgaris, 5 squamous cell papilloma, 4 seborrehic keratosis, 4 capillary hemangioma,3 compound nevus, 3 proliferating trichilemmal cyst, 2 blue nevus, 2 neurofibroma, 2 basal cell carcinoma, 2 langerhans cell histiocytosis, 2 fibrolipoma, 2 folliculitis decalvans and 1 case each of lipoma, dermoid cyst, pilomatricoma, silindroma, nodular hidroadenoma, apocrin cystadenoma, arteriovenous malformation, fibroepithelial polyp, folliculitis, malignant proliferating trichilemmal tumor, follicular carcinoma metastasis, fibrous displasia, inflamed fistula tract. No recurrence was seen except 1 lesion.
Conclusion: Involvement of skull although rare, scalp masses present a wide spectrum of that arise in all ages. Overall, the majority of these lesions are benign, and the presence of a malignant tumor or metastatic tumor presenting as a scalp and skull mass is rare. Lesions having intracranial/extracranial extensions may be treated with complete resection followed by skull reconstruction, and close follow-up is necessary.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 016 Date 15.10.2018 & 16.10.2018	Cytopathology	Laboissiere, Renato Belo Horizonte Brazil	Poster	Miranda Bello, Cristina Maria Dias Lana Martins, Bárbara Braga de Abreu, Franciane Domingos de Sousa, Igor Rodrigues Pereira, Izabella Branth de Assis Campos, Lizandra

ABSRACT TITLE:
Risk of cervical intraepithelial neoplasia in brazilian women: Association between local microbiota profile and human papillomavirus infection

ABSTRACT TEXT

Objective: To identify the frequency of cervical cytopathologic alterations caused by human papillomavirus (HPV) infection and its correlation with the local microbiota profile.
Methods: Cervical cytopathological reports from 5,907 patients were retrieved from the files at a Brazilian university hospital. Data collected from "Microbiology" and "Atipias In Squamous Cells" were confronted in order to assess statistically significant associations.
Results: The frequency of cytologic abnormalities associated with HPV was 2.5%, including Cervical Intraepithelial Neoplasia (CIN) and atypical cells of undetermined significance. These findings, as well as squamous metaplasia, had a higher prevalence in the youngest age group (11 to 29 year-old women). Regarding the microbiota, the presence of HPV-associated lesions was lower in the group of women colonized with Lactobacillus sp (RR = 0.54), whereas in those colonized by supracytoplasmic bacilli it was higher (RR = 2.13). The use of hormonal contraceptives (RR = 1.42), the presence of clinical signs suggestive of sexually transmitted diseases (RR = 3.04) and squamous metaplasia of the cervix (RR = 5.85) were more frequent among the patients with cytology suggestive of HPV infection.
Conclusion: Our study found a frequency of 2.5% of cervical cytopathological alterations associated with the effect of HPV, with a predominance in younger patients. In addition, we identified the presence of Lactobacillus sp as a protective factor for the development of such lesions, as opposed to infection by supracytoplasmic bacilli, which proved to be a risk factor. Therefore our findings support previous work demonstrating the influence of local microbiota profile in HPV infection and cervical carcinogenesis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 016 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Masood, Mariam Royal Surrey County Hospital Guildford United Kingdom	Poster	Bagwan, Izhar

ABSTRACT TITLE:
Hepatocellular carcinoma: A retrospective comparison of grade with other prognostic factors

ABSTRACT TEXT

Objective: Hepatocellular carcinoma (HCC) is one of the most common malignancies worldwide and its incidence is continuing to rise. Grading is an essential prognostic factor required which has traditionally been stratified according to the Edmondson and Steiner criteria but increased understanding of the biological behaviour of HCC has led to adoption of the three tier World Health Organisation (WHO) guidelines by the Royal College of Pathologists. In this study, our aim is to analyse the epidemiology and to correlate prognostic features with WHO grades: well, moderate-poorly differentiated carcinoma.
Methods: All patients who underwent liver resections from January 2010 till 2018 were identified from a WinPath database. Serology, morphology and grading according to the WHO classification were recorded.
Results: Thirty-six liver resections contained HCC, of which the most common grade was moderate to poorly differentiated (32/36). Seven of these cases (7/32) showed multifocality. Necrosis was present in 34% of the cases and lymphovascular invasion was seen in 38% of the cases. All resection margins were clear except one which was less than 1mm (R1). Four cases had cirrhotic backgrounds of which one was a known history of haemochromatosis. Serology showed a mean CA199 of 20.
All four well differentiated HCC were unifocal . Necrosis was only seen in one resection and there was one case with possible lymphovascular invasion. Background livers were non-cirrhotic and all resection margins were clear (R0). The mean CA199 was 8.
Conclusion: Our study has found moderate-poorly differentiated HCC to be the most common grade and pT1b the most common stage. Adverse features such as lymphovascular invasion, multifocality and necrosis, as well as serological tests such as CA199 are proportional to the grade. Well-differentiated HCC have a lower incidence of cirrhosis.
Whilst a correlation is seen between these factors and the grades, the future of HCC looks to move from a histological perspective to the implementation of a morpho—molecular classification based on molecular characterisation. It is hoped that this will provide more accurate prognostication for the patient.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19 Abstract No. 016 Date 17.10.2018 & 18.10.2018	Hematopathology	Mhiri, Marwa Farhat Hached Hospital Dept. of Pathology Sousse Tunisia	Poster	Mestiri, Sarra Baccouche, Atika Ouédraogo, Aida Sandrine Mokni, Moncef

ABSRACT TITLE:
Plasmablastic lymphoma of the axillary lymph nodes: Report of a case

ABSTRACT TEXT

Objective: Plasmablastic lymphoma (PBL) is a rare variant of diffuse large B-cell lymphoma (DLBCL) and typically presents in the oral cavity in the clinical setting of human immunodeficiency virus (HIV) infection. Here we report a case of extra-oral PBL occuring in the axillary lymph nodes
Methods: A 58-year-old woman presented with a swelling of the left axillary region. On examination, there were multiple left axillary masses firm and mobile on palpation. A biopsy of the masses was performed.
Results: Histopathological examination showed a lymph node tissue infiltrated by large malignant lymphocytes that are arranged in diffuse layers or in cohesive clusters of syncytial appearance with dispersed figures of apoptosis or mitonecrosis. The tumor cells exhibit abundant eosinophilic cytoplasm. Their nuclei are atypical, with rounded or irregular contours and marginal or coarse chromatin. Often a prominent central nucleolus is present giving an immunoblastic aspect to the tumor cells. The mitotic activity is high, exceeding 10 mitoses/ 10 fields at high magnification. Bi-nuclei and polylobed nuclei are also seen. The proliferation is located within a richly vascularized small fibrillar matrix.
The immunohistochemical study showed heterogeneous staining for LCA. CD3, CD79a and CD20 are negative. There is intense and diffuse immunostaining of tumor cells for CD138, EMA and MUM1. The proliferation index Ki67 is high (more than 90% of the tumor cells). The diagnosis of plasmablastic B-cell lymphoma was confirmed.
Conclusion: Plasmablastic lymphoma is a rare, aggressive neoplasm that is not limited to the oral cavity. Although extra-oral PBLs are rare, awareness of this entity is essential in the diagnosis of a suspected lymphoma that lacks expression of CD45 and markers of B-cell or T-cell lineage.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Nader, Farah King Hussein Cancer Center Amman Jordan	Poster	Sughayer, Maher Almuhaisen, Ghadeer
Abstract No. 016				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
An adult male patient presented with malignant ectomesenchymoma of nasal cavity and metastasizing to the cervical lymph node and abdomen

ABSTRACT TEXT

Objective: Malignant ectomesenchymoma (MEM) is a rare and rapidly progressing tumor consisting of neuroectodermal and mesenchymal neoplastic elements.
occurs mostly in children and adolescents, but rarely in adults. with about 50 cases, mostly involving children and infants, having been reported to date. Characterized by merged features of neuroectodermal and mesenchymal components.
Methods: We present a 53 year old male patient presented with malignant ectomesenchymoma of nasal cavity and metastasizing to the cervical lymph node and abdomen.
Results: A 53 year old male pt., had a hx. dated back to 2 months ago when he started to complain of right neck mass.
The patient underwent Nasal polyp and cervical lymph node excision and both shows the same hitological features This tumor contains both rhabdomyosarcomatous and neuroblastic components.
The rhabdomyosarcomatous component is diffusely positive for desmin, and myogenin suggesting that this component is of alveolar subtype. The neuroblastic component displays rosette formation especially in the cervical lymph node biopsy; where the central portions of the rosettes are positive for Synaptophysin. The neuroblastic component is also diffusely positive for CD56, PGP and focally positive for NeuN.
The tumor cells are negative for S100, GFAP, CD99, CK and NSE.
Conclusion: A 53 year old male patient presented with malignant ectomesenchymoma of nasal cavity and metastasizing to the cervical lymph node and abdomen with about 50 cases, mostly involving children and infants, having been reported to date. Characterized by merged features of neuroectodermal and mesenchymal components.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Oluwole, Olabode University of Abuja Dept. of Pathology and Abuja Nigeria	Poster	Abimiku, Bawa Mukthar, Umar
Abstract No. 016				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Kaposi sarcoma in retroviral positive patients: Histopathological analysis

ABSTRACT TEXT

Objective: To demonstrate that Kaposi sarcoma is the most common AIDS-related cancer in our environment
Methods: This is a ten-year retrospective histopathology study of all Kaposi sarcoma cases diagnosed between 2001-2009 in the Department of Histopathology, University of Abuja Teaching Hospital, Gwagwalada, Nigeria. Haematoxylin & Eosin stained histology slides were retrieved, studied and reviewed blindly by three consultants.
Results: A total of 31 patients (16 males and 15 females) retroviral patients' whose ages ranged from10-70 years with a mean age of 40 years. The peak age at diagnosis was in the fourth decade. The youngest patient is a female aged 16 years. The commonest site was in the lower limbs 19(61.2%), this was followed 7 (22.5%) unspecified sites, others sites were upper limbs and head and neck respectively. All the tumours were Kaposi sarcoma. The facility to detect KS-associated herpesvirus and viral antigen latency-associated nuclear antigen in the biopsy is not available in our institution as the time of this study; the diagnosis was made purely on Haematoxylin &Eosin stained slides.
Conclusion: AIDS-associated Kaposi sarcoma is common in our environment, it can be diagnosed in a resource-limited setting using traditional Haematoxylin and Eosin under the hand of a well- trained consultant pathologist.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Hepatopathology and Biliary System	Rehman, Abdul King Edward Medical University Department of Pathology Lahore Pakistan	Poster	Qamar, Samina Shahnawaz, Usman Iram, Samia Niazi, Shahida
Abstract No. 016				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
HDAC2 Overexpression is Associated with Poor Disease-Free Survival in Stage I Lung Adenocarcinoma

ABSTRACT TEXT

Despite tremendous advancements in therapeutic modalities, mortality from lung cancer still remains at the top of all cancers. Overexpression of Histone deacetylase 2 (HDAC2) has been associated with tumorigenesis and cancer progression in various human cancers. The objective of this study was to investigate the expression of HDAC2 in lung adenocarcinoma and to explore its relationship with various clinicopathological variables and prognosis of patients with lung adenocarcinoma.
Methods: We examined HDAC2 protein expression immunohistochemically in tissue microarrays consisting of 170 cases of lung adenocarcinoma and interpreted using a semiquantitative scoring system. Chi-square test, Kaplan-Meier method and Cox Proportional Hazard Model were used for statistical analyses. For statistical analysis, immunoreactive scores of < 6 and ≥ 6 were considered low and high HDAC2 expression respectively.
Results: Almost all included cases of lung adenocarcinoma had positive immunoreactivity for HDAC2, and 101 (59.41%) of 170 cases expressed high HDAC2 expression. Although no significant association was observed in survival analyses of all stage group, however, the subgroup analyses stratified by tumor stage revealed that high HDAC2 expression was significantly associated with poor disease-free survival in stage I subgroup (p = 0.049, log-rank test). No significant correlation between HDAC2 expression and various clinicopathological parameters were found.
Conclusion: Our study suggested that HDAC2 is overexpressed in lung adenocarcinoma and might be closely related to carcinogenesis and prognosis of lung adenocarcinoma and it may serve as a potential prognostic marker for early disease management, especially in stage I lung adenocarcinoma patients.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 016 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Rekik, Wafa Tunis Tunisia	Poster	Krifa, Marwa Zehani, Alia Chelly, Ines Chelly, Beya Azouz, Heifa Ghorbel, Zinet Haouet, Slim Kchir, Nidhameddine

ABSTRACT TITLE:
Urinary bladder paraganglioma

ABSTRACT TEXT

Objective: To focus on a rare entity and define the anatomo-clinical features of urinary bladder paraganglioma
Methods: We are reporting here a quite rare case of paraganglioma of the urinary bladder that presented an adult women
Results: A 45-year-old femal presented with a macroscopic isolated clot haematuria with no other urinary or general signs. A cystoscopy was done, showing a single trigonal tumor with a large implantation base. The histological examination of the chips made in full tumor as well as at the level of the base, showed a vesical mucosa bordered by a regular urothelial coating. The chorion and the muscularis are the site of a tumor proliferation organized into alveolar structures within a richly vascularized stroma. The tumor cells are polygonal, with abundant and finely granular eosinophilic cytoplasm. The nuclei are rounded, polymorphic and nucleated .An immunohistochemical study was performed, showing diffuse and intense expression for chromogranin and synaptophysin. Those aspects are in favor of a bladder paraganglioma.
Conclusion: Paraganglioma of the urinary bladder is a rare tumour of the bladder, tend to be functional and occur mostly in young adult. It's a lesion that may be misdiagnosed as urothelial carcinoma in transurethral resection specimens. It needs to be fully investigated before embarking on any surgical procedure.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21 Abstract No. 016 Date 17.10.2018 & 18.10.2018	Neuropathology	Stanek-Widera, Agata Institute of Oncology Dept. of Tumor Pathology Gliwice Poland	Poster	Biskup-Fruzynska, Magdalena Lange, Dariusz

ABSTRACT TITLE:
A rare case of glial tumor with metastasis

ABSTRACT TEXT

Objective: Extraneural metastases of glial tumors are rare, with approximately 2% incidence.
The authors present a case of a 68-year old woman who was diagnosed with a right temporal lobe tumor measuring 2,5 cm in 2010. The patient did not agree to the suggested treatment, but was operated on after 4 years due to progression (the tumor increased in size to 5,5 cm).
Methods: The diagnosis of anaplastic oligodendroglioma G3 was established on the basis of histological images in H&E stain and immunohistochemical assays.
Three years later the patient presented with right cervical lymphadenopathy, which resulted in lymphadenectomy. After performing a wide panel of immunohistochemical stains and confirming 1p19q loss of heterozygosity in both primary tumor and the nodal metastasis.
Results: The patient was diagnosed with an extraneural (nodal) metastasis of oligodendroglioma.
Conclusion: The patient is alive 6 months after the confirmation of the metastatic disease, with no signs of progression
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07 Abstract No. 017 Date 15.10.2018 & 16.10.2018	Head and neck pathology	Bellil, Khadija Hopital des FSI la Marsa Service La Marsa Tunisia	Poster	Ben Ghachem, Dorra Dhaoui, Amen Bousaffa, Houneida Hemdani, Nesrine Turki, Senda

ABSTRACT TITLE:
Oncocytic Schneiderian papilloma of the sinonasal tract: A case report with review of literature

ABSTRACT TEXT

Objective: We report herein a case of a sinonasal oncocytic Schneiderian papilloma (OSP), a benign tumor, which develops in the schneiderian epithelium of the sinonasal tract. It is the rarest subtype of Schneiderian papillomas, accounting for 3% to 5% of tumors. We aim to describe this tumor and its evolution with a review of literature.
Methods: A 55 years old woman presented with a sleep apnea syndrome. Clinical examination was normal. Nasal endoscopy showed a unilateral polypoid mass which was entirely resected.
Results: Microscopically, this mass presents a both exophytic and endophytic growth. Papillae were covered by tall, columnar multilayered epithelium composed of oncocytes. Intraepithelial microcysts containing mucin and neutrophils were observed.
Conclusion: OSP is a rare tumor arising typically from the lateral nasal wall or in the paranasal sinuses, usually in the maxillary or the ethmoid ones, and may extend into contiguous areas such as the orbit and the skull base. Clinical behavior of OSP is similar to that seen in inverted papilloma with regard to local aggressiveness, high recurrence rate (33% to 40%), and malignant transformation (10 to 17%). Invasive squamous cell carcinoma is the most frequently reported tumor.
Endoscopic surgical extirpation is the treatment of choice. Due to the possible recurrence of OSP and the eventual development into a malignant tumor, a regular follow-up is recurred.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 017 Date 15.10.2018 & 16.10.2018	Gynecological pathology	El-Shennawy, Rawda Alexandria Faculty of Medicine Dept. of Pathology Alexandria Egypt	Poster	Younis, Layla Hassan, Magda Abelzaher, Eman Farouk, Mohamed

ABSRACT TITLE:
The expression of MAGE-A10 in epithelial ovarian neoplasms: An immunohistochemical study

ABSTRACT TEXT

Objective: MAGE-A10 is a member of the cancer/testis (CT) antigen family that shows a restricted pattern of expression in gametogenic tissue and various malignant tumors but silenced in normal tissue. As the most immunogenic member of the family, MAGE-A10 is proposed as a target for cancer immunotherapy. The aim of the study was to investigate the distribution and biological significance of this new CT antigen in epithelial ovarian neoplasms.
Methods: In this study immunohistochemistry was performed on paraffin-embedded tissue obtained from 72 patients with epithelial ovarian neoplasms including 13 benign, 16 borderline and 43 malignant tumors. Histological subtypes of benign and borderline cases included serous, mucinous and Brenner tumors. Malignant cases included type I and type II epithelial ovarian cancers (EOCs). Type I EOCs included low-grade serous, low-grade endometrioid, mucinous and clear cell carcinomas as well as malignant Brenner. Type II EOCs included high-grade serous and high-grade endometrioid carcinomas
Results: MAGE-A10 was expressed in 100% of the studied epithelial ovarian neoplasms with heterogeneity discerned in only 14% of EOCs. Its expression showed a highly significant increase from benign to borderline to malignant type I EOCs (p=<0.001) which was respected when considering serous and mucinous tumors independently. Its expression was not significantly different between type I and type II EOCs. In EOCs, high MAGE-A10 expression was significantly associated with shorter disease/progression-free survival (p=0.012) and partial response to chemotherapy (p=0.016). MAGE-A10 was significantly correlated with patients' age (p=0.039) but not FIGO stage, grade or histological subtype of EOC.
Conclusion: MAGE-A10 is possibly implicated in the early steps of ovarian carcinogenesis particularly in type I EOCs. Its elevated expression in EOCs is a probable poor prognostic factor that adversely affects patient outcome. Lastly, the ubiquitous and non-heterogeneous manner of MAGE-A10 expression highly advocates it as an excellent immunotherapy target in EOCs.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Kabir, Balarabe Zaria Nigeria	Poster	Suleiman, .Dauda E Adoke, Kasim Umar Abubakar, Nasiru Ahmed, Saar Aliyu
Abstract No. 017				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Her 2 expression profile of breast cancers in a University Teaching Hospital in Nigeria

ABSTRACT TEXT

Objective: Some subsets of breast cancers are associated with amplification and overexpression of Her2 gene, which encodes a transmembrane glycoprotein receptor of EGFR family, though it is associated with poorer survival, its presence provided an opportunity for molecular targeted therapy. We attempted to evaluate Her 2 expression pattern of breast cancers in Ahmadu Bello University Teaching Hospital, Zaria.
Methods: A three year retrospective study, all slides of breast cancers diagnosed including immunohistochemistry were retrieved and reviewed and data was analysed using Microsoft excel sheet. Her 2 expression was determined using semi quantitative assessment of staining pattern and intensity with scores of 0, +1, +2, and +3.
Results: A total of 234 cases were seen and immunohistochemistry for hormone receptors and her 2 was done in 140 (59.8%) cases. 65 (46.4%) cases were positive for Her2 overexpression (Score of +3) were as 49 (35%) cases were negative with 42 and 7 cases scoring 0 and +1 respectively. The result is equivocal for 26 (18.6%) of cases with score of +2.
Conclusion: Her 2 overexpression is relatively higher than the reports in many local literatures and abroad. However, the high equivocal cases provide the need for further testing with In situ hybridization which is very limited and expensive in resource poor countries.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Kosemehmetoglu Kemal Turkey	Poster	Rekhi, Bharat Dervisoglu, Sergulen
Abstract No. 017				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Pseudomyogenic (Epithelioid Sarcoma-like) Hemangioendothelioma of Bone

ABSTRACT TEXT

Objective: Pseudomyogenic hemangioendothelioma (PHE) (epithelioid sarcoma-like hemangioendothelioma or fibroma-like variant of an epithelioid sarcoma) is an uncommon tumor characterized by multifocality, spindle and epithelioid cells with rhabdoid morphology, lack of vasoformative areas, immunoexpression of cytokeratin and endothelial markers with exception of CD34, unique SERPINE1-FOSB fusion and an indolent behavior. Here we report 4 cases with bone involvement.
Methods: Four cases were collected from 3 large institutions and their clinicopathological features were reviewed.
Results: All cases were males with a mean age of 30 (3-49 years). Lytic bone lesions were present in the diaphysis of tibia (2), proximal femur and distal radius (1). Lesions were multifocal in 2 cases with soft tissue involvement in one. Epithelioid cells with rhabdoid phenotype and prominent nucleoli were more conspicuous than spindle component in 2 cases. New bone formation was present in a single case. Small areas of necrosis were present in a single. All cases were CD31 positive and CD34 negative. INI1 were retained. panCK (AE1/3) was all positive except in one case, in which CK7 and cam5.2 were positive. One of the cases had an 8 years' history of pain, followed by bone resection and subsequently developed non-specific lung nodules. Other cases were treated with curettage. One case showed no evidence of disease within 5 years of follow-up after curettage.
Conclusion: Distal limbs are common locations for this rare tumor. Differential diagnoses include epithelioid angiosarcoma, rhabdomyosarcoma and epithelioid sarcoma. Epithelioid component may be over-represented. Caution must be taken as panCK (AE1/3) may not be expressed; therefore, the use of other wide spectrum keratins, such as cam5.2 is recommended. Awareness of such an entity is the mainstay of diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Kuczkiewicz-Siemion, Olga MCMCC Dept. of Pathology Warsaw Poland	Poster	Sosnowski, Roman Ligaj, Marcin Demkow, Tomasz Szumera-Cieckiewicz, Anna Prochorec-Sobieszek, Monika
Abstract No. 017				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Negative histopathology result (pT0) in a radical prostatectomy specimen in patients with core biopsy diagnosed prostate cancer

ABSTRACT TEXT

Objective: To analyze pT0 radical prostatectomy (RP) cases in patients treated surgically for biopsy-proven prostate cancer.
Methods: The patients treated with RP for prostate cancer between January 1997 and December 2015 in a single Cancer Center in a single institution (Maria Sklodowska-Curie Memorial Cancer Center and Institute of Oncology) were evaluated retrospectively.
In all pT0 cases core needle biopsy and prostatectomy specimens were histologically reassessed.
Inclusion criteria included: biopsy proven prostate cancer and absence of tumour tissue in radical prostatectomy specimen assessed histologically (pT0).
Results: Among 995 RPs performed, 10 cases were stage pT0 (1%). Five patients were excluded from the study due to: false-positive prostate biopsy (2 cases), unavailability of initial biopsy specimen (2 cases) and initial diagnosis made on transurethral prostate resection (1 case). The remaining five pT0 cases were analyzed.
Patients mean age was 62 years. Median preoperative prostate specific antigen level was 5.8 ng/ml (range 3.5 to 9) and median prostate volume was 50 ml. Median number of biopsy cores was 11 (range 6 to 20) with 2 positive (range 1 to 3). Gleason score on biopsy was 5 or 6. All patients had clinically organ-confined cancer (stage T1c or T2).
Two patients received neoadjuvant hormonal therapy prior to RP. In these cases histological review of surgery specimen revealed androgen deprivation related changes.
In three RP specimens without preceding neoadjuvant treatment no tumour was identified despite systematic histological assessment (0,3% of "true" pT0). In all three pT0 cases PSA level after RP and on follow-up was <0,04 ng/ml.
Conclusion: No tumor tissue was detected in RP specimen of 0,3% of cases, despite previously biopsy proven prostate cancer, which corresponds with literature data. Neoadjuvant treatment can affect the histopathology of RP specimen. Extensive histological examination of prostate core needle biopsy specimen is essential for patient management and treatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Lee, Chang-Hun Pusan National Univ. Hospital Busan Republic of Korea	Poster	Choi, Kyung Un Lee, So -eong Ahn, Jee-Hyun Kim, Ah-Rong Park, Won-Young Park, Do-Youn Huh, Gi-Young
Abstract No. 017				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Rhabdomyosarcomatous dedifferentiation of gastrointestinal stromal tumor (GIST) - a case report -

ABSTRACT TEXT

Objective: An altered phenotype dedifferentiation of gastrointestinal stromal tumor (GIST) secondary to imatinib therapy is rare, with only a few cases have been previously reported in the literature.
Methods: Herein we report a case of progressing metastatic GIST with rhabomyosarcomatous differentiation after imatinib treatment.
Results: A 73-year-old male presented with a 20 cm tumor originating from the gastric wall and multiple liver metastasis. EUS guided fine needle aspiration and biopsy revealed a spindle and epithelioid cell neoplasm which was immunoreactive for c-kit and DOG1. KIT exon 11 mutation was detected. The diagnosis of GIST was rendered. The patient showed a radiogrophic evidence of partial response. Eighteen months after initiation of imatinib CT imaging demonstrated tumor regrowth. A palliative surgical procedure was undertaken and included a wedge resection of the tumor mass. The resection revealed a 15.7x15x10.2 cm tumor arising from the stomach. Pathology revealed a dedifferentiated GIST with rhabdomyosarcomatous features showing diffuse positivity for desmin and myogenin, whereas c-kit and DOG1 were negative.
Conclusion: The pathogenesis for this form of imatinib-resistant clonal evolution is associated with loss of c-kit expression.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 017 Date 15.10.2018 & 16.10.2018	Cytopathology	Lkhagvadorj, Sayamaa MNUMS Dept. of Pathology Ulaanbaatar Mongolia	Poster	Enkhbat, Bayarmaa

ABSTRACT TITLE:
The quality assurance of uterine cervical smear in Ulaanbaatar

ABSTRACT TEXT

Objective: Uterine cervical cancer is the fourth leading cause of cancer deaths in women worldwide. In our country, it is the second most common cancer in women. Uterine cervical smear remains an effective and widely used method for early detection of precancerous and cancerous lesions. However, there was no study to perform the quality assurance of cervical smear until now in Mongolia. Therefore, we studied the quality assurance of uterine cervical cytology by quality control model in cytopathological laboratory.
Methods: Firstly, 400 glass slides from four different cytological laboratories of Ulaanbaatar were randomly selected. The collected each slides were re-screened blindly by two cytologists according to "Bethesda system-2014" classification, independently. Secondly, 20 glass slides of cervical smear, the diagnosis was approved by histopathology were distributed to same four (A, B, C, D) laboratories. Each chosen slides were evaluated by four cytopathologist with hidden clinical information, independently. The results were evaluated by the Category of Diagnostic Concordances.
Results: Of the 400 slides, 325(81.25%) slides were as satisfactory and 75(18.75%) slides were unsatisfactory related with follows; 53(70.7%) were absence of endocervical cells, 19(25.3%) were absence of adequate squamous cells, and 1(1.33%) were artifacts which effects all smear etc. The sensitivity of A, B, C and D hospitals were 87.5%, 93.3%, 93.3%, and 93.3%, respectively. The specificity of A, B, C and D hospitals was 85.7%, 85.7%, 75%, and 66.7%, respectively. The agreement of cytological diagnosis was moderate (k=0.55), moderate (k=0.43), fair (k=0.37), and fair (k=0.33) in A, B, C, and D hospitals, respectively. The diagnostic accuracy results of all the participating laboratory were as follows; Category O and A: 88.75%, Category B: 7.5%, and Category C: 3.75%.
Conclusion: The diagnostic quality assurance in cytopathology is required in Mongolia. Furthermore, the Category of Diagnostic Concordances would be applicable in our country to improve cytopathological diagnostic concordance.
***Note; The abstract is for an IAP Bursary Application.**
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19 Abstract No. 017 Date 17.10.2018 & 18.10.2018	Hematopathology	Oguntunde, Olubanji University of Lagos Dept. of Anatomic and Molecular Lagos Nigeria	Poster	Ikeri, Nzechukwu Igbokwe, Uche Abdulkareem, Fatimah Banjo, Adekunbiola

ABSRACT TITLE:
Histopathologic Spectrum of Lymph node disease in a Lagos Facility

ABSTRACT TEXT

Objective: Haematopathology is often a technical and challenging aspect of pathology, requiring robust ancillary testing and second specialist opinion both of which are not readily available and affordable in the Nigerian population. It is therefore not surprising that most published works lack the necessary confirmatory ancillary tests especially with regards to lymphoma diagnosis leading to a paucity of data on the histologic spectrum of malignant lymphoid neoplasms. The aim of this study therefore was to determine the histological spectrum of lymph node diseases and highlight the diagnostic challenges.
Methods: A review of lymph nodes submitted to our facility over an 8 year period was carried out. A proportion of these had specialist second opinion and ancillary immunohistochemistry testing where necessary.
Results: Two hundred and ten lymph nodes were studied. The male to female ratio was 1:1.1. The cervical (44.7%) and axillary lymph nodes (21.3%) were the most biopsied. Most cases were non-specific reactive changes (31.0%). This was followed by metastases to the lymph nodes (22.9%) and lymphomas (18.6%). Non-Hodgkin lymphoma accounted for 79.5% of lymphomas of which small cell lymphoma (35.5%) and diffuse large B cell lymphoma (29.0%) were the most predominant. Nodular sclerosis was the commonest Hodgkin lymphoma subtype (75%) and was Epstein Barr Virus positive in 33.3% of cases. There was a 62.1% concordance between the preliminary and final diagnosis.
Conclusion: There is a need for specialist training in hematopathology as well as the establishment of well-equipped facilities for accurate and cost effective diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 017 Date 17.10.2018 & 18.10.2018	Dermatopathology	Poletaeva, Svetlana Samara State Med. University General and Clinical Samara Russia	Poster	Fedorina, Tatyana Keremet, Vadim Shuvalova, Tatyana Ivan, Kozhevnikov Sergeeva, Elena Semenaya, Elena

ABSTRACT TITLE:
Carcinomas of cutaneous appendages arising in preexisting benign tumours: 15 cases

ABSTRACT TEXT

Objective: The aim of study is to identify pathological features of pre-existing tumours of cutaneous appendages with malignant transformation.
Methods: A retrospective review of clinical dates, morphological findings, and ICH-stainings of tumours of cutaneous appendages from 15 patients was carried. Pre-existing for long time period (mean 3,2 years, from 2 to 13) benign lesions began to grow rapidly and ulcerate. Mean size of primary tumours - 1 cm, at the time of excision – 1,6 cm. Mean age at diagnosis was 56,8 years (from 29 to 71), one case of porocarcinoma in 85-years woman.
Results: In primary types of tumours were: poroma (3), trichoepithelioma (2), sebaceous adenoma (4), syringoepithelioma (2), apocrine hydradenoma (2), siringoadenoma papilliferum (2). Nodular tumours -7, cystic - 4, mixed type -4. Sites of localization: skin of head and neck (7), back (1), proximal extremities (2), distal extremities (3), gluteal region (1), inguinal region (1). Malignant counterparts were: 5 adenocarcinomas (3 low-grade, 2 high-grade); 4 sebaceous carcinomas; 3 squamous cell carcinomas (2 low-grade, 1 high-grade); 1 myoepithelial carcinoma (high-grade); 2 non-Mercel neuroendocrine carcinomas (low and intermediate malignant potential). The malignant component demonstrates infiltrative growth pattern (8), frequent mitoses over 20 mf\10 hpf (in 7 cases), and angiolymphatic invasion (6 cases). ICH-markers: p40, p63, Cytokeratin 7, 18, 20, 5\6, S100, GFAP, Androgene receptor, Progesterone receptor, Synaptophysin, Chromogranin A, Ki67. Different types of cell differentiation, metaplasia (apocrine, sebaceous) in 9 pre-existing benign tumours were revealed. It is impossible to clearly identify factors triggering the process of malignant transformation: insolation, frequent traumatization with persistent inflammation, immunodeficiency, radiotherapy and chemotherapy for other carcinomas. It is difficult to exclude pre-existing small-sized low-grade carcinomas.
Conclusion: Features of carcinomas of cutaneous appendages arising in preexisting benign tumours varied wildly. Skin of head and neck is more common localization, with prevalence of low-grade carcinomas.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24 Abstract No. 017 Date 17.10.2018 & 18.10.2018	Pulmonary pathology	Saliba, Maelle American University of Beirut Dept. of Pathology and Beirut Lebanon	Poster	Flaifel, Abdallah Bannoura, Sami Khalifeh, Ibrahim

ABSRACT TITLE:
Metastatic primary lung carcinomas to bone in Near East population

ABSTRACT TEXT

Objective: Bone metastasis is a well described eventuality of advanced lung cancer and has been linked with poorer prognosis. Our study aims at describing the characteristics of patients with a lung primary metastatic to bone in our population.
Methods: A retrospective review (1996--2016) of two institutional archives was performed to designate lung tumors with bone metastasis. Variables collected included age, gender, primary location and side, latency period between primary and metastasis diagnosis, number of metastases, radiological pattern (osteolytic versus osteoblastic) along with skeletal site, primary microscopic subtype and status of EGFR, ALK and PDL1. T-tests and analysis of variance (ANOVA) were used for comparison. A p--value less than 0.05 was considered statistically significant.
Results: A total of 60 cases were reviewed. The majority corresponded to adenocarcinomas (55.0%) arising in male patients (76.7%, p<0.05) with a mean age of 62.8 years (SD 11.1). The average latency period from primary diagnosis to metastasis was significantly extended in cases of adenocarcinomas and neuroendocrine carcinomas (38.1 and 41.7 months respectively) versus squamous cell carcinomas (18.6). Peripheral lung tumors notably out-numbered central tumors as a source of bone metastasis (79.91%). The metastasis had preferential localization to axial bones (34.3%) and lower limbs (25.70%). Lesions were more frequently multiple (87.5%, p<0.05) than single and were predominantly osteolytic in nature (87.5%). EGFR mutation was identified in 11.1% of cases and PDL1 mutation in 33.3%. ALK was not mutated in the evaluated patients.
Conclusion: In our cohort, bone metastasis was significantly more common in men with adenocarcinomas and primarily involved skeletal sites with persistent bone marrow. Peripherally located tumors accounted for most cases. Additionally, the length of latency period was correlated with the histologic subtype. Multiple osteolytic metastatic lesions were significantly more prevalent than other patterns.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Voronina, Evgeniya NSMU, RC HMT Novosibirsk Russia	Poster	Yurina, Natalya Ryzhova, Marina Ageeva, Tatyana Selyakova, Marya
Abstract No. 017				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Two cases of family Hippel-Lindau syndrome

ABSTRACT TEXT

Objective: Hippel-Lindau disease (VHL) is a hereditary disease, which is characterized by the development of multiple benign and malignant tumors of the central nervous system (35-70%), the eye's retina (75%), kidneys (25%), pheochromocytomas (7%) and neuroendocrine tumor of the pancreas cyst (24%). The disease was described for the first time in 1895. It happens with a frequency of 1 case per 36,000 people. Autosomal dominant inheritance in 80% of cases occurs due to a mutation in the 3p25 / 26, where the VHL gene is localized. Another 20% of cases of Hippel-Lindau disease occurs due to sporadic mutations, when patients do not have a family anamnesis. We described two cases of the disease, both belong to the first type. In the presented family cases, we observed 1 type of disease with the presence of multiple haemangioblastomas without combination with pheochromocytoma.
Methods: Methods and results
The first case was observed in Novosibirsk. Patient F. was born in 1979. She considered herself to be sick since 1998. When the patient was diagnosed with neurological symptoms, she was operated because of the formation of the posterior cranial fossa, which morphologically turned out to be a haemangioblastoma. After 1 year, the patient developed marked neurological symptoms again. During the examination, multiple formations of the hemispheres of the cerebellum, oblong and spinal cord were verified. In 2004, a lesion of the thoracic spinal cord was detected at the Th5 level. In 2013, MRI revealed a relapse of tumor growth in the posterior cranial fossa. And In 2017 there was a growth of a tumor in the upper thoracic and cervical spinal cord. In all cases, morphologically, tumors are represented by haemangioblastoma. In addition to this, in 2017 the son of patient F, who was born in 1997, turned to the clinic with neurological symptoms and MRI signs of intramedullary solid-cystic formation at the C2 vertebral level, which turned out to be a haemangioblastoma in the study of the operating material. Later, a genetic study of the tumor material of these patients was held and a mutation in the VHL gene was detected, this confirmed the family nature of the disease.
The second case was observed in Moscow. Patient Z. was born in 2003. He was admitted to hospital in 2016 with neurologic symptoms. With the help of MRI, a tumor was found in the posterior cranial fossa, while morphological examination was found haemangioblastoma. A year later, the patient's father, who was born in 1980, addressed the same clinic with the emerged neurological clinic, which had a tumor in the thoracic spinal cord. After the morphological research, the diagnosis of haemangioblastoma was confirmed. In this family, the diagnosis of the Hippel-Lindau syndrome was also confirmed with the help of genetic research.
Results: In all cases presented by us, with help of the standard morphological research was revealed a diagnosis of haemangioblastoma (ICD-O code 9161/1) (Fig.1). After the IHC research, positive reactions were obtained on tumor cells with antibodies to CD34 (Fig.2), D2-40 (Fig. 3), on a part of the cells to S100 (Fig.4). As an example, the patient's material from 1998 was taken into the report.
Conclusion: The modern possibilities of genetic diagnosis of the disease allow to find the presence of a mutation in cases of suspected Hippel-Lindau disease, confirm it, conduct a genetic examination of relatives to find mutations of the VHL gene, and also recommend the method of IVF for patients who are planning children with the detection of a mutation at the earliest stages of embryogenesis to prevent inheritance. Timely examination and elicitation of the pathology associated with VHL-syndrome is the key to successful treatment and increasing the patient's life.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Bellil, Khadija Hopital des FSI la Marsa Service La Marsa Tunisia	Poster	Nfikha, Zeineb Dhaoui, Amen Ben Ghachem, Dorra Bousaffa, Houneida Turki, Senda
Abstract No. 018				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Radiation induced nasopharynx squamous cell carcinoma: A case report

ABSTRACT TEXT

Objective: For its rarety, we report the case of a non keratinizing nasopharynx squamous cell carcinoma(SCC) after radiotherapy for nasopharyngeal carcinoma (NFC) .
Methods: A 62 years woman, treated 27 years ago with radiotherapy for an UCNT, presented a mass in the right choana and the posterior border of the nasal septum. No symptoms, nor cervical lymphadenopathy were found.
Results: The histopathological examination of the biopsy shows the presence of a carcinomatous proliferation in a solid architecture with squamous differentiation and abundant fibrous stroma. The tumor is made of eosinophilic abundant cytoplasmic carcinomatous cells with rarely visible intercellular bridges; with irregular, hyperchromatic, atypical nuclei. Corneal maturation was not observed. Immunohistochemichally, tumor cells positivity for cytokeratin 5 was against the squamous cell differentiation. Expression of Cytokeratin 7 and p63 proved the UCNT hypothesis and no expression of Vimentine eliminated the basaloid squamous cell carcinma diagnosis. The negative immune reaction to EGFR is considered as a poor prognostic factor. Finally p16 positive signaling highlights a previous high-risk HPV infection.The final diagnosis was non keratinizing SCC and regarding the medical history of UCNT treatment irradiation the radio-induced origin has been retained.
Conclusion: Radiation-induced SCC of the nasopharynx is rare after RT for NPC. The prognosis remains poor despite aggressive surgery and adjuvant RT.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	El-Kholy, Shimas National Liver Institute Dept. of Pathology Menofia Egypt	Poster	Sultan, Mervat Fayed, Zeinab
Abstract No. 018				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Hidden metastatic carcinoma in rectum (case study)

ABSTRACT TEXT

Objective: The aim of this study is shed light on uncommon cases of colorectal malignant lesions that may be misdiagnosed clinically and histologically as primary adenocarcinoma.
Methods: This study presents a case of female patient 74 years, single, who has presented to our National Liver Institute, Menofyia University, Egypt, with ascites and abdominal pain since 1st March 2018.
Clinical , laboratory, and radiological examination was done. Upper and lower endoscopes with multiple biopsies from upper and lower gastrointestinal tract were also undergone.
Histopathological evaluation of the received biopsies together with immunohistochemical study with CK7, CK20, CD10 were done.
Results: Investigations revealed that patient is not hepatic and no focal lesions was detected by radiological investigations, only mild increase in endometrial thickness was detected.
The only positive serum marker was CA 125 level in serum as it was 1945.
Upper endoscope revealed hyperemia of gastric and duodenal wall, histological examination revealed chronic H- pyloric gastritis with non- specific duodenitis.
Lower endoscope revealed diffuse hyperemic and edematous rectal mucosa, histological examination f rectal biopsy revealed apparently normal rectal mucosa with only sub-mucosal focal infiltration of with malignant epithelial cells arranged in sloid sheets with areas of glandular differentiation. The malignant cells showed pleomorphism, hyperchromasia and increase nucleo-cytoplasmic ratio.
. CK20 was negative in malignant infiltrate and strongly positive in normal mucosa, excluding primary colonic adenocarcinoma.
CD10 was also negative in malignant cells
CK7 was positive in malignant cells
These findings referred our mind to hidden metastatic carcinoma from female genital system mostly of ovarian origin.þ5
Conclusion: Despite the most common epithelial malignancy of large bowel is primary adenocarcinoma, the possibility of being a 7 of metastatsis should be put in mind .

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Pulmonary pathology	Gudi, Mihir KK Hospital DPLM Singapore	Poster	Yeo, Yen Ching d/o Karunanithi, Jayanthi
Abstract No. 018				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Placental Mesenchymal Dysplasia (PMD): Case series in a local tertiary institution

ABSTRACT TEXT

Objective: We present two cases of PMD and discuss the histological, and immunohistochemical features as well as the ancillary molecular techniques utilized to achieve the diagnosis. This entity is often mistaken for a molar pregnancy by clinical examination and ultrasound evaluation.
Methods: Products of conception from 2 patients who had evacuation the uterus at 12+6 weeks and 16+3 weeks of gestation were examined histologically. The bHCG was elevated only in 1 case suspicious for gestational trophoblastic disease. P57 immunohistochemistry was performed and finally molecular genotyping was performed on formalin fixed paraffin embedded (FFPE) tissue.
Results: Histology in both cases showed diffusely enlarged villi of which some showed dilated cisterns surrounded by loose myxomatous stroma and others showed mesenchymal cell hypercellularity. No trophoblastic proliferation, stromal trophoblastic inclusions or scalloping of the villous surfaces were evident. In both of our cases, circumferential staining of the villous cytotrophoblasts was seen on staining for p57. Karyotyping in both our cases androgenic biparental chimeric conception was noted, which in combination with the histological features, support the diagnosis of PMD.
Conclusion: PMD is a rare entity that needs to be clinically distinguished from PHM and CHM to avoid fetal morbidity and mortality. The pregnancy needs to be closely monitored due to associations with intra-uterine growth restrictions, intra-uterine death and chromosomal abnormalities. It is also important to be able to recognise the microscopic, immunohistochemical and karyotype features of PMD in relation to its close differentials as it allows patients to be counseled about future pregnancies and pregnancy outcomes.
Policy of full disclosure / :

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 018 Date 15.10.2018 & 16.10.2018	Breast pathology	Kakou, Julien Roche Cote d´Ivoire SARL Medical Dept . Abidjan Ivory Coast	Poster	Aman, Nguiessan A . Erb, Gilles

ABSTRACT TITLE:
Challenges of Breast Cancer Diagnosis in Africa-Ivory Coast Case

ABSTRACT TEXT

Objective: Despite advances in management, breast cancer remains the leading cause of cancer death among women worldwide. Over 70% of all cancers deaths occur in low and middle income countries where and management of breast cancer patients in the developing world has limitations due to lack of availability of quality ER and HER2 immunohistochemistry (IHC) diagnostic assays to justify therapeutics.
The initiative described in this communication was initiated in 2015 and aim to bridge the GAPs identified in Breast Cancer management in Ivory Coast and by extension to countries from the western part of Sub Saharian region.
Methods: The design of this plan was established to address immediate, medium and long-term problems.
• Immediate plan: In partnership with Roche, histotechnicians where trained to improve sample management and reference lab were equipped with IHC and ISH automation to achieve high quality breast cancer immunohistopathology testing. In parallel, breast cancer histoseminar was organized to train local pathologist on interpretation for Breast Cancer.
• Medium plan: To ensure quality will maintain all participants were registered to the breast module of the AFAQAP EQA for ER/PR as well as HER2 IHC and ISH. Pathologists initially trained were also involved in local training
• Long term: To ensure an optimal management of all patients from the local and reference center through autonomy and local knowledge.
Results: Impressive results were obtained in a real short time with a dramatic reduce in time to results from 24 weeks to 3 weeks. Participation to the AFAQAP demonstrates the ability of the labs to perform high quality IHC. SOP were set in all references labs to improve and maintain an optimal sample management, not only within the pathology lab but from the surgical theatre to the slide interpretation under the microscope.
Following introduction of best practices as well as all training activities the current Breast Cancer molecular subtyping show the following numbers: Triple Negative: 37,19%, Hormonal positive: 43,31%, HER2 positive: 19,5%.
Conclusion: As a final result access to targeted therapy did increase in a high extend with now up to 15% of the patient who accede to HER2 targeted therapy whereas before it was less than 1%.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25 Abstract No. 018 Date 17.10.2018 & 18.10.2018	Soft tissue pathology	Koulia, Kalliroi Tzaneio General Hospital Piraeus Greece	Poster	Tsavari, Aikaterini Ieronimaki, Ioanna Vasilakaki, Thivi Manoloudaki, Kassiani

ABSRACT TITLE:
Myositis ossificans of the foot: Report of a rare case

ABSTRACT TEXT

Objective: Myositis ossificans(MO) is a non-neoplastic tumor-like lesion, characterized of heterotopic ossification of soft tissue.This lesion may be mistaken clinically and histologically for a malignant osseus or soft tissue tumour.Typically it affects elbow and thigh and rarely has been reported in the foot.
Methods: We report a rare case of an 18 year old female with a firm painful plantar soft tissue mass between the third-fourth metatarsal bones.MRI images showed the lesion with a hypointense rim with a central hyperintensity and edema in the surrounding soft tissues.CT showed peripheral ossification.A surgical excision was permormed and we received a well-ciscumscribed brownish mass, 1,5cm in diameter.
Results: The microscopic histological findings revealed the "zone phenomenon" with high cellularity and high vascularity. The central zone was composed of mesenchymal cells and fibroblasts with some pleomorphism and rare mitoses. They were also surrounded by an intermediated zone of osteoid with osteoblasts and multinucleated giant cells osteoclast type and extravasation of red blood cells. At the periphery of the lesion we observed bone formation. Based on all the above findings and having taken into account the rest of the clinical and radiological history of the patient, we favored the diagnosis of myositis ossificans.
Conclusion: Myositis ossificans is a benign tumor-like lesion and the location on foot is uncommon.The main diferential diagnosis is extrasceletal osteosarcoma which in fact has "mirror" characteristics both on imaging and pathology.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 018 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Lawan, Aliyu Gombe State University Dept. of Histopathology Gombe Nigeria	Poster	Abdullahi, Yusuf Kura, Mohammed

ABSTRACT TITLE:
Splenogonadal fusion: Is There A third type? A case report of a different type

ABSTRACT TEXT

Objective: Splenogonadal fusion is a rare congenital anomaly whereby there is an abnormal connection between splenic tissue and the gonads (or derivatives of the mesonephros)
There are fewer that 200 reported cases in the literature. Most of these are in male and mostly occurred on the left. The two types described are the continuous and discontinuous types relating to the presence or absence of a band connecting the splenic tissue and the gonad as described by Putschar and Manion in 1956.
Methods: We report an usual splenogondal fusion in a 30-year-old male presenting as a painful left scrotal mass in a rural clinic with a clinical diagnosis of torsion of a testicular neoplasm.
Results: Histopathologic findings showed a well capsulated splenic tissue with absent testis. The splenic tissue extended and completely replacing the spermatic cord to the proximal margin of resection.
Conclusion: Though extremely rare, splenogondal fusion could present with a third type morphology completely replacing the testis and spermatic cord. This could mimic a testicular neoplasm with direct extension to the cord; thus, the need for a high index of suspicion.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 018 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Murshed, Khaled Hamad Medical Corporation Doha Qatar	Poster	Al-Bozom, Issam

ABSRACT TITLE:
Globular hepatic amyloidosis: A peculiar pathologic finding

ABSTRACT TEXT

Objective: The aim of this study is to identify the possible clinical associations with globular hepatic amyloid and to shed some light on its clinical significance
Methods: A retrospective review and follow up of 12 cases diagnosed to have globular hepatic amyloidosis by liver biopsy. The clinical and laboratory findings were obtained and extensive review for the histopathologic features was performed
Results: 11 out of 12 cases (92%) were males. The median age at time of diagnosis is 46 years (range from 37 to 57 years). The vast majority were of Egyptian nationality (83%). All the cases (100%) were diagnosed to have chronic hepatitis C confirmed by serology and PCR. 10 out of 12 cases (83%) had hepatitis C virus genotype 4. Clinical follow-up showed no signs of progression or any evidence of systemic amyloidosis
Conclusion: Globular hepatic amyloidosis represents an unusual and characteristic pathologic pattern. All of our cases were associated with chronic hepatitis C virus. Interestingly, genotype 4 of the virus was present in the vast majority of cases. There is no clinical evidence of progression of the disease or systemic involvement; therefore, this entity may represent a distinct presentation of hepatic amyloidosis
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Njagi, Esther University of Eastern Africa Eldoret Kenya	Poster	Muchiri, Lucy
Abstract No. 018				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Cytomorphology of Anal Smears in HIV Positive Men who have Sex with Men (MSM) (This is for an IAP Bursary Application)

ABSTRACT TEXT

Objective: To describe the anal cytology findings in HIV positive MSM attending comprehensive care clinics in Nairobi
Methods: A cross sectional-descriptive study was done. A total of ninety four HIV positive MSM who met the inclusion criteria were recruited using respondent-driven sampling. Conventional smears were prepared for anal cytology and stained with Pap stain.
Results: Ninety four eligible participants who gave consent were included in the study. Forty, (44%) showed normal anal cytology, 51 (56%) had abnormal anal cytology as follows: ASC-US, 16(17.6%), LSIL, 29 (31.8%) and HSIL 6 (6.6%), while 3 (3.2%) had unsatisfactory smears.
Conclusion: High incidence of abnormal anal cytology was reported in this study, similar to that reported in western countries. Exfoliative sampling of the anal-rectal transformation zone can detect squamous intraepithelial lesions.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-21	Neuropathology	Pan Catherine USA	Poster	
Abstract No. 018				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Parkinson's disease diagnosis and progression monitoring by mass spectrometry-based assay

ABSTRACT TEXT

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Poletaeva, Svetlana Samara State Med. University General and Clinical Samara Russia	Poster	Fedorina, Tatyana Plohova, Valentina Keremet, Vadim Yunusova, Yulia Rozumniy, Denis Ivanova, Olga Kozlov, Georgiy
Abstract No. 018				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Clinical and morphological characteristics of pediatric lymphomas on the basis of a single center in the Samara region

ABSTRACT TEXT

Objective: The aim of study is determine the clinical and morphological characteristics of pediatric lymphomas in the Samara region in 5 years from 2013 to 2017.
Methods: A retrospective review (2013-2017) of clinical, cytologic, pathohistological, ICH, FISH dates of lymphomas from 62 patients was carried.
Results: Children and teens up to age 19 are included. There are 62 cases of lymphomas and 9 cases of Langerhans cell histiocytosis were diagnosed from 2013 to 2017. The ratio of boys and girls was 2.5: 1. The numbers of Hodgkin lymphomas-29 and non-Hodgkin lymphomas (NHL) -33 are about equal, and among non-Hodgkin lymphomas there are mature B-cell NHL: 3 Burkitt lymphoma, 16 cases of diffuse large cell B-cell lymphoma; lymphoblastic lymphoma: 5 precusor T -lymphoblasic lymphomas and 2 precusor B -lymphoblasic lymphomas; 2 anaplastic large cell lymphomas, 5 mature (peripheral) T-cell lymphomas. Primary lesions localized in head and neck region , intra-abdominal, bone marrow, CNS. According St. Jude Staging System 33 NHL were: Stage I (7), Stage II (11), Stage III (8), Stage IV (7). T -lymphoblasic lymphomas were 5 times more common in girls in age over 12 years. Hodgkin Lymphoma was diagnosed with an equal frequency in boys and girls. Distribution by type: Nodular lymphocyte predominant Hodgkin lymphoma (NLPHL) -3, Nodular sclerosis classic Hodgkin lymphoma – 19 (NS I - 11, NS II - 8); Lymphocyte rich classic Hodgkin lymphoma -1, Mixed cellularity classic Hodgkin lymphoma – 4, Lymphocyte depleted classic Hodgkin lymphoma – 2. Primary lesions localized in peripheral lymph nodes (17), mediastinal lymph nodes (6), lungs (2) bones (2), liver (1), Waldeyer's ring (1).
Conclusion: Hodgkin's lymphoma and diffuse large cell B-cell lymphoma were prevailed and more common in boys.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Ruminaite, Agne Kaunas Lithuania	Poster	Makstiene, Jurgita
Abstract No. 018				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Clinical case: Alopecia - non-typical tumour clinical expression

ABSTRACT TEXT

Objective: To introduce unusual clinical case of alopecia as a non-typical tumour clinical expression of the precursor B lymphoblastic lymphoma (B-LBL)/leukaemia (B-ALL) in a 40 year old female. This type of lymphoma is especially rare in skin as a primary tumour and primarily affects children under six years of age (more than 75 % of cases).
Methods: In 2014, a 40 year old female was appointed to dermatologist after 6 months of multiple alopecia patches on her scalp in frontal and parietal areas.
Results: Pathology diagnosis from the first skin biopsy was B-LBL/B-ALL. On PET-CT scan metabolicaly active lymphoproliferative disease was found on the top of the head, on both sides of the shoulders and soft tissues of thoracic wall, as well as in a right ureter. Abdominal ultrasound shows extension of the right kidney's collector system and ureter. Patient received chemotherapy with a high dose-CHOP schema (cyclophosphamide, doxorubicin, vincristine, prednisone). Control PET-CT scan after 6 months demonstrates partial response to treatment. Reconsultation of dermatologist revealed new multiple skin nodules. Pathology diagnosis remains the same as a first one. Later on patient dissapeared.
Conclusion: Alopecia is autoimmune disorder characterized by patches of non-scarring alopecia usually affecting scalp and body hair. Approximately 2% of people worldwide have this disorder. According to literature, first onset is most common in 40-50 years of life. Rarely one of alopecia cause could be malignant tumour. Precursor B lymphoblastic lymphoma (B-LBL)/leukaemia (B-ALL) constitutes approximately 10% of cases of lymphoblactic lymphoma and less than 10% of all skin lymphomas. Around 80-85% lymphoma cases are of precursor B-cell phenotype. The B-LBL frequently present in the skin, lymph nodes and bone. Patients survival rate depends on cytogenetic abnormalities. B-ALL has a good prognosis in children, but it is less favourable in adults (the overall complete remission rate is 60-85%).
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24 Abstract No. 018 Date 17.10.2018 & 18.10.2018	Pulmonary pathology	Sanchez Ares, Maria Clinical Universitary Hospital Dept. of Pathology Santiago de Compostela Spain	Poster	Cameselle Teijeiro, Jose Manuel Antunez Lopez, Jose Ramon Couso Folgueiras, Elena Rico Rodriguez, Trinidad Yolanda Vazquez Boquete, Angel Perez-Becerra Ferreiro, Raquel Abdulkader Nallib, Ihab

ABSTRACT TITLE:
Next generation sequencing in non-small cell lung cancer

ABSTRACT TEXT

Objective: New generation sequencing (NGS) can be an important tool for identification of multiple alterations in a single quick, relatively low cost test. We compare our experience with NGS in non-small cell lung cancer (NSCLC) with traditional techniques.
Methods: 44 paraffin samples from 39 NSCLC patients were analyzed by NGS: 26 adenocarcinomas, 8 squamous, 2 large cell neuroendocrine and 3 cases of non-specific (NOS) carcinomas, all previously studied for EGFR (Cobas 4800, Roche), ALK, ROS1 and RET (Vysis, Abbot Molecular). Controls were included for KRAS, NRAS and BRAF gene mutations. A customized panel was designed to detect structural variants (AKT1, ALK, BRAF, CKIT, CTNNB1, DDR2, EGFR, FGFR1, HER2, HRAS, KRAS, LKB1, NTKR1, NTKR2, NTKR3, MAP2K1, MAP2K2, MET, MYC, MTOR, NRAS, PI3KCA, PDGFR, PTEN, ROS1, RET, SOX2, TP53), and rearrangements (ALK, NTRK1, NTRK2, NTRK3, RET, ROS1), using SureDesign tool (Agilent). A library was created (SureSelectXT HS Target Enrichment System protocol, Agilent) and sequencing (Illumina technology, MiSeq). SureCall and Cartagenia software (Agilent) were used for result analysis.
Results: NGS confirmed 6 translocations and 2 mutations in EGFR (L858R and T790M), already evidenced with traditional techniques, additionally detecting 18 structural mutations. We detected: adenocarcinomas, 2 translocations (RET and ALK-EML4 v3) and 14 structural mutations (3 EGFR [deletion exon 19, T790M, L858R], 7 KRAS [2 G12D, 4 G12C, 1 G12V], 2 LKB1 [D194Y], 1 BRAF [G464V] and 1 MET [R988C]); squamous carcinomas, 1 translocation ROS1-EZR and 3 structural variants (2 KRAS [G12D, G12A] and 1 LKB1 [K83*]); neuroendocrine carcinomas, 2 translocations (ALK-EML4 v2) and 1 structural mutation in ALK (F1174C); 3 NOS cases, 1 ROS translocation (variant SD2, R34 in ROS1-SDC4) and 2 mutations in KRAS (G12D, G12V).
Conclusion: The NGS is postulated as a feasible alternative for molecular diagnosis in clinical practice due to its sensitivity and specificity.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 019 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Galvao Neto, Antonio New York Univesity- NYU New York USA	Poster	Eduarda Galvao, Maria

ABSRACT TITLE:
Plasmablastic lymphoma: A devious diagnosis in the gastrointestinal tract

ABSTRACT TEXT

Objective: Plasmablastic Lymphoma is an extremely rare, EBV associated, large B cell lymphoma, with a reputation of masquerading as carcinoma and other hematologic malignancies. This entity is typically associated with HIV and other immunocompromised states and is distinguished by the presence of both immunophenotypical and morphological characteristics of plasmablasts.
Methods: We present 2 cases of plasmablastic lymphoma in the GI tracts of HIV positive patients treated at NYU Langone Medical Center.
Results: The first case presented as a large upper abdominal mass with a satellite liver lesion in a 44 year old man with HIV. The second case presented as multiple serosal nodularities with corresponding mucosal exphocytic fungating masses in the small intestines of a 55 year old man with HIV and Hepatitis C. Microscopic examination of both lesions revealed a population of intermediate to large, monotonous, lymphoplasmacytoid cells, with abundant cytoplasm, vesicular chromatin and prominent nucleoli. The tumor cells in both cases were negative for lymphoid markers, but positive for plasma cell markers Mum1 and CD138 by immunohistochemistry, and positive for EBER by ISH. Flow cytometry revealed positivity for plasma cell markers. FISH analysis also revealed a t(8;14) MYC-IGH translocation.
Conclusion: Plasmablastic lymphoma of the gastrointestinal tract is a rare entity with a distinct immunomorphologic pattern that is important to differentiate from carcinoma and other hematologic neoplasms due to its aggressive course and specific treatment regimen.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 019 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Hayajneh, Wasan Jordan university hospital Department of pathology Amman Jordan	Poster	Hajeer, Manar

ABSTRACT TITLE:
Primary ovarian leiomyosarcoma: A case report

ABSTRACT TEXT

Objective: Primary ovarian leiomyosarcoma is an extremely rare gynecological tumor, that is usually seen in postmenopausal women. It comprises around 1% of all primary ovarian tumors, with an aggressive course and poor prognosis. Only 74 cases are reported in literature so far.
Methods: Herein; we describe a case of 79 year old woman who presented with a two months history of weight loss and decreased appetite in addition to bilateral flank pain. The patient was found to have multiple lung lesions with high suspicion of metastasis. Thereafter, she underwent detailed radiologic assessment looking for a primary source of malignancy.
Results: Abdomen and pelvis CT scans showed a heterogeneous lobulated ovarian mass with peripheral enhancement and central necrosis measuring 11.8 cm in maximum dimension. The patient then underwent debulking surgery including total abdominal hysterectomy and bilateral salpingo-oophorectomy in addition to peritoneal lavage. Histopathological findings revealed a spindle cell neoplasm with widespread areas of coagulative necrosis, marked nuclear pleomorphism and brisk mitotic activity. The tumor cells are immunoreactive for smooth muscle actin (SMA), desmin and H-caldesmon. The diagnosis of ovarian leiomyosarcoma was established. The patient had a smooth post-operative course and was scheduled for chemotherapy.
Conclusion: Although primary ovarian leiomyosarcomas are rare, it should be realized that they occur and should be considered when dealing with malignant spindle cell tumors at this location. A brief literature review is presented.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 019 Date 15.10.2018 & 16.10.2018	Breast pathology	Kankava, Ketevani Tbilisi State Medical University Dept. of Pathology Tbilisi Georgia	Poster	Kvaratskhelia, Eka Kvaratskhelia, Tamar Burkadze, George Abzianidze, Elene

ABSRACT TITLE:
Methylation of repetitive elements in genome in association with breast cancer

ABSTRACT TEXT

Objective: Methylation is an epigenetic alteration proved to be involved in many disease processes including cancer. This change affects mainly gene promoters and repetitive sequences in genome. Long Interspersed Nuclear Element-1 (LINE-1) and Alu are the best-studied repetitive sequences, that modify gene activity and can themselves be targeted by epigenetic mechanisms. The aim of our study was to compare LINE-1 and Alu methylation pattern in DNA extracted from blood and tumor tissue of the patients with malignant breast lesions and healthy controls.
Methods: Patients with biopsy-proved ductal invasive carcinoma of breast and no preoperative chemo/radiotherapy were chosen for the first study group. Women with no abnormal findings on breast cancer screening represented controls. Blood samples from both group members were collected preoperatively. Tumor tissue sections were also used for methylation study. LINE-1 and Alu methylation levels were assessed by combined bisulfite restriction analysis (COBRA-LINE1). In addition LINE-1 methylation level was double-checked using ELISA-based assay. The data was analyzed in combination with histologic and phenotypic tumor parameters and compared between different tissues and different study groups.
Results: LINE-1 was found to be significantly hypomethylated in breast cancer tissue compared to blood. Blood samples of patients with malignant tumors showed slightly lower methylation level, than samples obtained from control group members. Lymphovascular invasion was the only aggressiveness-determining factor that was found to be at least weakly correlated with LINE-1 hypomethylation in blood. Alu methylation was found to be relatively uniform in different tissues and different study groups.
Conclusion: We can conclude, that LINE-1 hypomethylation level is significant in tumor tissue. Alu hypomethylation is less pronounced. Therefore LINE-1 methylation can really be used as a surrogate marker for global methylation level. Neither LINE-1 nor Alu methylation levels are valid for estimation of tumor behavior, as these parameters do not correlate with classical determinants of aggressiveness.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 019 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Mihai, Ioana UMFT Dept. of Morphopath-ology Timisoara Romania	Poster	Olteanu, Gheorghe - Emilian Gheju, Adelina - Roxana Herman, Istvan Dema, Alis

ABSTRACT TITLE:
Lymphedematous Fibroepithelial Polyp of the Prepuce

ABSTRACT TEXT

Objective:
To present a rare case of lymphedematous fibroepithelial polyp of the prepuce, and the first published case of this type of pathological entity described in our country.
Methods: Grossing of the tissue with histological slides preparation using hematoxylin and eosin and special IHC stains.
Results: A 64-year-old male patient with a history of long standing urinary incontinence and long-term condom catheter use presenting with a polypoid mass on the prepuce. The surgical specimen was represented by a skin excision with a papilloma appearance, flesh colored, measuring 5,5x3x2,5 cm. Histological sections revealed a fibro-epithelial polypoid structure with marked acanthosis and hyperkeratosis, with few intraepithelial lymphocytes. The stromal component showed marked oedema, increased number of stellate fibroblastic cells, occasional multinucleated mesenchymal cells, lymphoplasmacytic inflammatory infiltrate and scant mastocytes. Immunohistochemistry showed intense staining for muscle-specific actin, and focal staining for desmin.
Conclusion: After careful consideration of the histological appearance and IHC staining results corroborated with the clinical history of the patient, a diagnosis of lymphedematous fibroepithelial polyp of the prepuce was made. With only 21 cases to date reported in the literature, this case represents a rare finding, and should be considered in the differential diagnoses of papillomatous lesions of the penis when clinical relevance applies.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 019 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Ngwenya, Sharol University of Witwatersr and Anatomical Dept. of Anatomical Pathology Johannesburg South Africa	Poster	Hale, Martin

ABSTRACT TITLE:
Granulomata in post-transplant liver biopsies: A retrospective study

ABSTRACT TEXT

Objective: Our department not infrequently sees granulomatous inflammation in post-transplant liver biopsies. This study was undertaken to determine their incidence and possible aetiology, recognising that South Africa has a high prevalence of tuberculosis.
Methods: A retrospective study was performed on all post-transplant biopsies undertaken in the Liver Transplant Unit in Johannesburg between January 2013 and February 2018, extracting those showing granulomatous inflammation and comparing these with their previous liver histology including explanted livers and donor biopsies.
Results: The study comprised 324 post-transplant liver biopsies, 20 (6%) showing granulomata, 13 being male (65%) and 7 female (35%). The mean age was 37.1 years (range 1 – 70). Reasons for transplantation were wide ranging including, medical, infective, surgical and congenital causes. Four patients had pre-existing granulomatous disease in their explants including 2 patients with tuberculosis, 1 patient with sarcoidosis and 1 with an unknown aetiology. Of the remaining 16 patients, 15 showed no evidence of pre-existing disease in their explants. The explant for 1 patient was not available for review. Ten patients had pre-existing immune dysregulation syndromes.
In the post-transplant biopsies, granulomata were present in the parenchyma only (80%), and the portal tracts and parenchyma (20%). Confirmed aetiologies included cytomegalovirus (2), Mycobacterium tuberculosis (2) and sarcoid (1). An aetiology was not identified in the remaining 15 patients.
Conclusion: Granulomatous inflammation is found in 6% of biopsies in our setting. A minority (20%) are related to pre-existing disease, whilst (50%) are associated with immune dysregulation syndromes. De novo tuberculosis is infrequent in a high prevalence area. Drug-induced granulomata may be the cause in those with no identified cause.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07 Abstract No. 019 Date 15.10.2018 & 16.10.2018	Head and neck pathology	Njima, Manel Fattouma Bourguiba Hospital Dept. of Pathology Sousse Tunisia	Poster	Ben Abdeljelil, Nouha Ben khlifa, Sarra Hadhri, Rim Moussa, Adnene Zakhama, Abdelfattah

ABSTRACT TITLE:
Neuroglial heterotopia of the sphenoid sinus in a 57 year-old women: An exceptional diagnosis

ABSTRACT TEXT

Objective: Heterotopic central nervous system tissue (HCNST) is a congenital displacement of neuroglial tissue without connection to the cranial cavity. Generally, it presents as a nodule in the subcutaneous tissues of the nose within the first few years of life. We report a case with uncommon clinical presentation and rare location. Our aim is to describe clinical and pathologic findings of HCNST and discuss differential diagnoses
Methods: We present a case of HCNST diagnosed in our pathology department
Results: A 57 years-old woman complaining of headache for three months. Magnetic resonance imaging identified a wall thickening of the sphenoid sinus without bony defect. By endoscopic exploration, the lesion was totally resected and no communication with the cranial cavity was identified.We received 5 fragments measuring between 5 and 10 mm. Microscopic examination identified an ectopic neuroglial tissue composed of mature astrocytes, gemistocytic astrocytes, glial fibers and sparse neurons admixed with a fibrovascular connective tissue. Some lymphocytes, melanocytes and hemosiderin pigment were noted. We concluded to a neuroglial heterotopia in the sphenoid sinus
Conclusion: HCNST should be distinguished from encephalocele. Before any biopsy or resection is attempted, communication with the central nervous system should be excluded
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 019 Date 15.10.2018 & 16.10.2018	Cytopathology	Nthambi, Loise Nairobi Kenya	Poster	.Mungania, M Walong, Edwin Rioki, Josephine

ABSTRACT TITLE:
Cytological evaluation of cervical smear and cervical cancer awareness among women attending CC clinic in Makueni Referral County Hospital, Kenyar

ABSTRACT TEXT

Objective: The main objective of this study was to determine the patterns of cervical lesion in women attending HIV clinic in Makueni referral Hospital and their knowledge on cervical cancer.
Methods: This was a descriptive cross sectional study carried out in Makueni Referral Hospital. A sample size of 100 above 18 years old HIV seropositive women.
Results: A total of 100 HIV seropositive women on ART were enrolled in this study. Their mean age was 43 years old with aging 17 years to 68 years. Of the total, 40% of them were married. On the 100 pap smears, 25% had abnormal cervical lesions (Atypical Squamous Cells of Undetermined Significance to Squamous Cells Carcinoma) with 16% having high grade lesions (Atypical Squamous Cell cannot exclude Hsil to Squamous Cell Carcinoma). The Knowledge level on cervical cancer among these women surveyed, 98% of them had ever heard about cervical cancer and only 7% knew that Human Pappiloma Virus causes cervical cancer, 38% could mention one or more risk factors associated with cervical cancer and 84% knew early screening and treatment could prevent cervical cancer. Using chi-square to measure association, there was no significant association between Pap smear results and knowledge level on cervical cancer (p>0.05).
Conclusion: The HIV seropositive women who had abnormal pap smear is 25% with 16% having high grade lesions that required clinical intervention.
This women living with HIV show adequate knowledge on cervical cancer risk factors and prevention, but this has not affected the proportion of abnormal cervical lesions among them, which should be inversely proportional.
There was no association between correct knowledge on cervical cancer and abnormal Pap smear findings.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Provatas, Ioannis Evangelismos General Hospital Athens Greece	Poster	Masaoutis, Christos Karagianni, Evangelia Spiliadi, Charikleia Rontogianni, Dimitra
Abstract No. 019				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
A case of germinotropic lymphoproliferative disorder

ABSTRACT TEXT

Objective: The germinotropic lymphoproliferative disorder (GLPD) is a very rare, generally indolent entity involving atypical B-cells coinfected with Kaposi's sarcoma-associated herpesvirus (KSHV) and Epstein–Barr virus (EBV). We present the hitherto 15th reported case, a 59-year-old immunocompetent man with localized mediastinal lymphadenopathy.
Methods: Immunohistochemistry for CD20, CD79a, PAX5, CD3, CD138, CD38, CD30, CD15, BCL6, CD10, CD68, CD56, MUM1, BCL2, EMA, IgM, Igκ, Igλ, AE1/AE3, Melan-A and HHV8 antigens, as well as in situ hybridization for EBV-encoded small RNAs (EBERs) were performed.
Results: The lymph node architecture was preserved with variable replacement of the germinal centres by clusters of large pleomorphic cells positive for MUM1, BCL2, EMA, surface IgM, HHV8 antigen and EBERs without light chain restriction. No expression of B-, T-, germinal centre or specific plasma cell antigens was noted. There were also some polyclonal interfollicular plasma cells.
Conclusion: The above findings are typical for GLPD. Interestingly, the GLPD's cells are polyclonal or oligoclonal in immunoglobulin gene rearrangement studies despite monotypic immunoglobulin expression in most cases. Distinction from two immunophenotypically similar lymphomas, large B-cell lymphoma associated with multicentric Castleman's disease and extracavitary primary effusion lymphoma (PEL), is crucial; the former lacks EBV infection and the latter lacks GLPD's striking germinal localization, while both are clonal and immunodeficiency-related. Of note, the spectrum of KSHV+ EBV+ lymphoproliferative disorders might be expanded in the future in order to include recently described isolated cases not meeting the criteria for either PEL or GLPD.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Provatas, Ioannis Evangelismos General Hospital Athens Greece	Poster	Poulianitis, Nikolaos Pavlou, Kalliopi Kouvidou, Charikleia
Abstract No. 019				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Cardiac cavernous hemangioma: A case report of a rare cardiac tumor

ABSTRACT TEXT

Objective: According to WHO's definition, cardiac hemangiomas are rare benign vascular tumors or malformations composed of mature blood vessels, with sizes ranging from 1 to 8 cm. They are usually asymptomatic and they may occur in patients of all ages, without sex predilection. We describe a case of cavernous hemangioma localized in the left cardiac ventricle.
Methods: We received a well-defined, polypoid lesion 1,2x1x0,8 cm in sizes, indicated by the surgeons as "myxoma of the left ventricle".
Multiple sectioning showed multiple dark-red sites and a relatively elastic consistence.
Results: The histological examination of the lesion revealed large, dilated vascular spaces within cardiac muscle fibers. The majority of the vessels were thin-walled, while some of them had thick walls. Mitoses were not observed.
The immunohistochemical control revealed CD31, CD 34 and FVIII positive endothelial cells, while Actin was positive only in the pericytes and calretinin was negative.
Conclusion: Cardiac hemangiomas are benign lesions. Capillary, cavernous, arteriovenous and epithelioid subtypes have been described, showing the same histological findings as the hemangiomas found in other parts of human body. They are usually excised successfully, without recurrences.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24	Pulmonary pathology	Shawash, Sarah King Hussein Cancer Center Dept. of Pathology Amman Jordan	Poster	Abdeljalil, Riad Haddad, Hussam
Abstract No. 019				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Pulmonary mucinous cystic neoplasm with ovarian-like stroma: Once in a blue moon-case report

ABSTRACT TEXT

Objective: Mucinous cystic neoplasm of the lung is a rare well known entity in the WHO classification of lung tumors. It is defined as "a localized cystic mass filled with mucin and surrounded by a fibrous wall lined by well-differentiated columnar mucinous epithelium." The presence of ovarian-like stroma is not mentioned in this definition. Reviewing the literature, we have found only one reported case mentioning this finding, described by Geramizadeh et al. in 2014. Here we present a similar case of a patient who was initially thought to have lung metastases. Hence, our case is the second one to be reported in the literature.
Methods: After gross dissection of the received specimens, microscopic examination was performed. The H&E slides revealed that the lesions are composed of non-infiltrarive biphasic proliferation of benign mucious epithelial cells forming cysts and gland-like structures with intervening cellular ovarian-like stroma. Differantial diagnosis included hamartoma and sclerosing pneumocytoma. Additionally, ancillary studies were performed including cytokeratin AE1/AE3, EMA , TTF-1, MUC5AC, ER, CD10, SMA, CD34, S100, Inhibin, PAS, PAS/D and Mucicarmine.
Results: Immunohistochemistry showed Cytokeratin AE1/AE3, EMA and TTF-1 are positive in the epithelial cells and negative in the stromal cells. MUC5AC is weakly positive at the surface of the epithelial cells. The cells of the ovarian-like stroma are positive for ER and CD10 and focally positive for SMA. PAS, PAS/D and Mucicarmine highlighted mucin in the cystic spaces and the surface of epithelial cells. CD34, S100 and Inhibin are negative.
Conclusion: Mucinous cystic neoplasm with ovarian-like stroma is a well-known entity in the pancreas and liver. Its occurrence in the lung has been reported in a single case in the English-written literature. We think that it should be thought of in the differential diagnosis of benign biphasic pulmonary lesions. To our knowledge, our case is the second one to be ever reported.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Sherpa, Palzum Patan Hospital Dept. of Pathology Lalitpur Nepal	Poster	
Abstract No. 019				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Histopathological evaluation of skin neoplasms

ABSTRACT TEXT

Objective: To study the histopathological patterns of skin neoplasms.
Methods: This is a retrospective cross sectional study performed at Department of Pathology, Patan hospital, Nepal from April 2011 to March 2016.
Results: During the study period, we received 410 skin biopsies, out of which 214 (52.2%) were skin neoplasms. 175 (81.8%) were benign and 39 (18.2%) were malignant neoplasms. Incidence of keratinocytic tumors was highest followed by soft tissue tumors and melanocytic tumors. Intradermal nevus was the most common benign tumor followed by squamous papilloma. Among the malignant tumors, squamous cell carcinoma was most prevalent (46.1%) followed by basal cell carcinoma (15.3%). Skin neoplasms were present in all age groups. However, maximum number of benign tumors were found in 21-30 years and malignant in years 51-60 age groups. Mean age was 38 years and 58 years for benign and malignant neoplasms respectively.
Conclusion: Benign skin neoplasms are more common than malignant ones. Malignant neoplasms occur in older age group as compared to benign neoplasms. Intradermal nevus was the most common benign tumor. Squamous cell carcinoma was most frequently encountered malignant neoplasm.
Policy of full disclosure: This abstract is for an IAP bursary application.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Hassan, Ahmed National Health Laboratory Dept. Histopathology and Cytology Khartoum Sudan	Poster	Mekki, Salwa
Abstract No. 020				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Adequacy of colorectal cancer histopathology reports in Khartoum State, 2012-2014

ABSTRACT TEXT

Objective: To evaluate the adequacy of histopathology reports of colorectal carcinoma in Khartoum State, Sudan
Methods: This is a descriptive, retrospective, cross-sectional standard-based study, done at three separate labs in Khartoum State from Jan 2012 to Dec 2014. The data was reviewed using the minimal data set designed by the Royal College of Pathologist in 2014.
Results: One hundred and fifty six cases of complete surgical resection of colorectal cancer retrieved from the archives, 121 were colonic and 35 were rectal carcinomas. The core macroscopic item mentioned in the reports were the site of specimens (100 %)and maximum tumor dimension (97.4%), The most common core microscopic items mentioned were histological tumor type (99.4%), longitudinal resection margins status (98.1%), maximum extend of tumor and extra mural spread (96.7%), total number of lymph nodes (92.3 %) and how many of them involved by tumor (91.6 %). The least items mentioned in the reported cases were tumor perforation (3.8%), relation of the tumor to the peritoneum reflection (2.9%), circumferential margin status (7.7 %) and the highest lymph node status (1.9%). None of the reports mentioned ancillary techniques.
Conclusion: The checklist reporting should be adopted to assure accuracy and completeness of histopathology reporting
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Househ, Zaid St. George Hospital Dept. of Anatomical Pathology Kogarah, NSW Australia	Poster	Saab, Jawad Marjoniemi, Veli
Abstract No. 020				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

An unusual location or an unusual cyst? Cystic lymphangioma of female adnexa: Two case reports

ABSTRACT TEXT

Objective: Cystic lesions of the female adnexa are commonly epithelial or mesothelial in origin. Cystic vascular lesions however, including benign cystic lymphangiomas, are extremely rare. Only 21 cases of primary lymphangioma of the ovary(1, 2) and three cases of broad ligament lymphangioma (3-5) have been reported in the literature. We report two separate cases of cystic lymphangiomas; a primary cystic lymphangioma of the ovary measuring 3.5 cm in a 72-year-old woman and a cystic lymphangioma of the broad ligament measuring 10 cm in a 61-year old woman.
Methods: .
Results: Microscopically, both cases showed similar morphology of variably sized thin-walled vascular spaces with angulated and irregular outlines. These were lined by a single layer of endothelial cells. The lumen contained homogenous eosinophilic proteinaceous material with occasional lymphocytes and red blood cells. Focally, there was compressed attenuated fibrous stroma between cystic spaces. The lining endothelial cells expressed the typical lymphovascular immunohistochemical profile with positivity for CD31, CD34, and D2-40. The diagnosis was confirmed by negative staining to epithelial and mesothelial markers including CAM5.2, CK5/6, Calretinin, and WT1.
Conclusion: Due to their rarity, cystic lymphangiomas of the ovary and broad ligament are understudied. Nevertheless, they should be included as a differential diagnosis of cysts of this location as they can mimic ovarian complex epithelial cysts and mesothelial cysts clinically, radiographically and microscopically.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Khaled, Randa Said Taha University of Cairo Pathology department Faculty of Medicine Cairo Egypt	Poster	Gabal, Samia
Abstract No. 020				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Expression of COX-2 in triple-negative breast cancer and its correlation with clinicopathological characteristics of these tumors (Histopathological And Immunohistochemicalstudy)

ABSTRACT TEXT

Objective: • Histopathological studying of triple-negative breast carcinomas.
• Evaluate immunohistochemically, the expression of COX-2 in triple-negative female breast cancer.
• Correlation of COX-2 expression in triple negative breast cancer to available clinicopathological data.

Methods: The material of this study included 40 formalin fixed, paraffin embedded tissue blocks of cases of invasive breast carcinoma with triple negative immunophenotype (ER, PR and Her-2/Neu negative).
For COX-2, the results of immunohistochemistry were interpreted as positive when >10% of the tumor cells demonstrated brownish granular positivity in the cytoplasm of the tumor cells.
Tumor tissue sections were examined and scored under the microscope at high power magnification (x200) for:
-An estimate of the percentage of immunoreactive tumour cells (quantity score)
-The presence of membrane immunostaining that may be associated with cytoplasmic staining (staining intensity score).
• Data was analyzed using SPSSwin statistical package version 21 (SPSSwin Inc., Chicago, IL.) Numerical data were expressed as mean and standard deviation as appropriate.
• Qualtitative data were expressed as frequency and percentage.
• Chi-square test or Fischer's exact test was used to examine the relation between qualitative variables. A p-value <0.05 was considered significant.
Results: 87.5% of the total cases (35 cases) showed variable positive reactivity for COX-2. A positive correlation was established between COX-2 and marked lymphoplasmacytic reaction
(p = 0.03) and nodal status (p=0.05).
Conclusion: The level of COX-2 expression was relatively high with different staining percentages and intensities as most studies. The positive correlation established between COX-2 and marked lymphoplasmacytic reaction and nodal status proves the inflammatory role as well as the migratory action COX-2 plays in triple negative breast cancer.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Mihai, Ioana UMFT Dept. of Morphopathology Timisoara Romania	Poster	Olteanu, Gheorghe - Emilian Herman, Diana Dema, Alis
Abstract No. 020				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Type I papillary RCC with intrapyelocalyceal growth mimicking urothelial cell carcinoma

ABSTRACT TEXT

Objective: To present a case of Type I papillary renal cell carcinoma with intrapyelocalyceal growth pattern imagistically and macroscopically mimicking urothelial cell carcinoma of the renal pelvis system, and to our knowledge the first published case of this kind.
Methods: Grossing of the surgical specimen with histological slides preparation using hematoxylin and eosin and special IHC stains.
Results: A 59 year old male patient with history of Type II diabetes mellitus, renal-ureteral lithiasis, and benign hypertrophy of the prostate, was admitted to the emergency room with macroscopic hematuria. Following urologic CT scan the patient was diagnosed with a right renal mass measuring 3.6 cm in diameter, with a possible diagnosis of urothelial carcinoma. Following a surgical intervention for a right total nephrectomy, grossing of the kidney revealed a small nodular lesion located medially, near the corticomedullary boundary, extending in a cordon-like manner from the minor calyces to the ureteropelvic junction and ureter. Microscopically the tumour was composed of small cuboidal cells with inconspicuous nucleoli, arranged on single layer of tubulo-papillary cores, and scant foamy macrophages. The tumour had a non-infiltrative, expansive pyelocalyceal growth. Immunohistochemically, the tumour cells were CK7 intense and diffusely positive, and stained granular for AMACR.
Conclusion: Histologically, and IHC the tumour was confirmed as a Type I papillary renal cell carcinoma exhibiting a unique intrapyelocalyceal growth pattern in spite of the imagistic and macroscopic findings which suggested an urothelial carcinoma diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Bilary System	Njima, Manel Fattouma Bourguiba Hospital Dept. of Pathology Sousse Tunisia	Poster	Chouchane, Sarra Ben Abdeljelil, Nouha Chiba, Dorra Hadhri, Rim Zakhama, Abdelfattah Njim, Leila
Abstract No. 020				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Solid pseudopapillary tumor of the pancreas: Interest of the couple E-cadherin/Beta-catenin in the immunohistochemical study

ABSTRACT TEXT

Objective: Solid pseudopapillary tumor of the pancreas (SPPTP) is a rare tumor of the pancreas accounting for less than 2% of all pancreatic tumors. It affects essentially young females. Disorganization of E-cadherin and β-catenin mutations, two key components of the Wnt signal transduction pathway have been implicated in the development of SPPTP. Our work aims to show that E-cadherin and β-catenin are the most useful immunostaining markers for the diagnosis of SPPTP

Methods: This is a retrospective study involving 4 cases of SPPTP diagnosed at the department of Pathology of Fattouma Bourguiba University Hospital in Monastir, during a 13-year period

Results: In our study, all patients were females. Three of them were under 20-year old of age. The tumor was located in the head of the pancreas in two cases, in the tail in one case and in the ucinate process of the pancreas in the last case. All patients underwent surgical treatment. In all cases, the tumor cells showed positive expression for SPPTP markers (vimentin, CD56 and CD10). CD99 was negative in all cases. All cases showed loss of expression of E-cadherin and both nuclear and cytoplasmic expression of β-catenin

Conclusion: SPPTP almost consistently harbors β-catenin gene (CTNNB1) mutations in exon 3. Abnormal accumulation of β-catenin in the nucleus, caused by prolonged degradation of mutated β-catenin protein correlated with loss of E-cadherin, is observed in almost all SPPTP. Therefore, we propose that the immunohistochemical analysis should be extended to SPPTP specific markers such as the couple E-cadherin/β-catenin, especially if the tumor appears to have a neuroendocrine-like morphology

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Ochieng, Washington University of Nairobi Dept. of Human Pathology Nairobi Kenya	Poster	Walong, Edwin
Abstract No. 020				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Utility of lung imprint cytology in infectious disease surveillance in forensic autopsies at Kenyatta National Hospital

ABSTRACT TEXT

Objective: To establish the diagnostic utility of lung imprint cytopathology for infectious disease diagnosis on hospital associated forensic autopsies.

Methods: Deceased scheduled for forensic autopsies were recruited and a description of the circumstances of death documented. During the forensic autopsies, lung imprint smears for cytology were performed and tissue specimens for histology collected. Imprints were then fixed in 95% alcohol for staining with Papanicolou, Periodic Acid Schiff, Leishman and Gram stains. Histology specimens were fixed in 10% neutral buffered formalin then taken to the laboratory for tissue processing, sections were stained with hematoxylin and eosin.

Results: In this study, a total of 42 cytopathological and histological specimens were analyzed. Majority of cases were males (73.8%) while females accounted for 26.2% with an age range of 1-85 years (mean age of 36.6%). Of these, 35.7% of cytopathological diagnosis was acute (neutrophil rich) inflammation representing 35.7% while 31% had bronchopneumonia on histology. Hyaline membranes suggestive of diffuse alveolar damage were identified on touch preparation in 12.5% of cases. The sensitivity, specificity, positive predictive value, negative predictive value and the overall accuracy for diagnosing infectious lung disease were 52.6%, 95.6%, 71%, 90.0% and 71.4% respectively with a diagnostic agreement (kappa value) between cytology (lung imprints) and histology of 0.501 and a p-value of <0.001.

Conclusion: Lung imprint cytology can complement autopsy histology for morphological detection of bacterial infection and presence of acute inflammatory cells in cytology is a strong indication of infectious lung disease.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Rahawarin, Halidah Hasanuddin University Dept. of Pathology Makassar Indonesia	Poster	Giovani, Syifa Frieda Miskad, Upik Andriani Achmad, Djumadi Sungowati, Ni Ketut
Abstract No. 020				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Chondroblastic osteosarcoma

ABSTRACT TEXT

Objective: Osteosarcoma of bone is a primary malignancy of any part of the skeleton in which the neoplastic cells manufacture and deposit the organic constituents of bone matrix. It accounts for approximately 20% of all primary malignant bone tumors. Its incidence in the United States is 4 to 5 per 1 million individuals.

Methods: A 21 years old man came to hospital with chief complaint pain at right knee, since 6 months ago and was worsened during night time. There was also a mass growing on his right knee region and enlarged up to size of a ball in 5 months. There was no significant history of previous trauma/injury. It was diagnosed as osteosarcoma by radiologist. FNA result was a sarcoma lesion. By HE staining at histopatological evaluation, it showed lobules of malignant cartilage, with spindling cell at the periphery and osteoid formation, diagnosed as chondroblastic osteosarcoma.

Results: This case is being presented because its classic features. About 25% of osteosarcomas show predominantly cartilaginous differentiation. The cartilage is in the form of lobules and the cells within lacunae show marked anaplasia. Toward the periphery of the lobules, tumor becomes hypercellular, and there is spindling at the periphery of the lobules. Osteoid matrix may be seen between the spindle cells or in the centre of chondroid lobules.

Conclusion: The case was diagnosed as chondroblastic osteosarcoma based on radiologic, cytology and histopathology evaluations.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Rugwizangoga, Belson University of Gothenburg Sahlgrenska Cancer Center Gothenburg Sweden	Poster	Aurelius, Johan Ntaganda, Fabien Kayitare, Egide Rydström, Anna Hellstrand, Kristoffer Martner, Anna
Abstract No. 020				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Early onset and poor prognosis of acute leukemia in Rwanda

ABSTRACT TEXT

Objective: Acute myeloid leukemia (AML) and acute lymphoblastic leukemia (ALL) are potentially lethal forms of hematopoietic cancer. While age-standardized incidence rate (ASR) is similar in most Western countries, information about ASR of acute leukemia in Sub-Saharan Africa is incomplete. For the present study, we compared the demographics and survival outcomes of acute leukemia in Rwanda and Sweden.

Methods: We performed a retro- and prospective cohort study aiming to capture all cases of acute leukemia diagnosed during 2012-2017 at Rwandan centers with diagnostic and hematologic/oncologic services. For comparison, Swedish cases diagnosed in 2012-2016 were retrieved from the Swedish ALL and AML registries. Demographic data were obtained from national statistics centers in both countries. ASR was calculated by adjusting population demographics to the world population.

Results: During the study period 498 cases of acute leukemia were diagnosed in Rwanda (319 ALL, 147 AML and 32 non-classified) and 2,115 cases in Sweden (591 ALL and 1,524 AML). ASR (cases/100,000/year) in Rwanda and Sweden was 0.41 and 1.63 for ALL and 0.25 and 1.58 for AML, respectively. Male predominance was observed in both cohorts. Age distribution between both countries differed in that 67% of ALL patients in Rwanda are below 15 years versus 50% in Sweden, and 58% of AML patients in Rwanda are below 30 years versus 5.8% in Sweden. Forty-one % of Rwandan ALL patients and 10% of AML patients were alive at 2 years after diagnosis implying poor prognosis for survival compared with outcomes in Western countries.

Conclusion: Acute leukemia affects younger patients in Rwandan than in Sweden. The lower incidence rates of acute leukemia observed in Rwanda may be amplified by a lower detection rate due to limited diagnostic resources and unsatisfactory healthcare-seeking behavior. The poor survival of acute leukemia patients, particularly AML, in Rwanda merits the implementation of treatment with curative intent.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 020 Date 17.10.2018 & 18.10.2018	Dermatopathology	**Stinga, Patricia Irina** Colentina Clinical Hospital Dept. of Pathology Bucharest Romania	Poster	Cioroianu, Alexandra Popp, Cristiana Dutulescu, Sorin Nichita, Luciana Cioplea, Mirela Caruntu, Costin Boda, Daniel Staniceanu, Florica Zurac, Sabina

ABSTRACT TITLE:
Investigation of cancer associated fibroblasts in malignant melanoma and in cutaneous carcinomas

ABSTRACT TEXT

Objective: Cancer associated fibroblasts(CAFs) represent an activated sub-population of stromal fibroblasts; they constitute an important element in cancer microenviroment and seem to influence tumour biological behavior, in terms of local aggressiveness, recurrence, metastatic potential. CAFs contribute to immune suppression and drug resistance. Little is known about CAFs phenotype and pattern of distribution in cutaneous cancer, like malignant melanoma(MM), basal cell carcinoma(BCC), squamous cell carcinoma(SCC) and malignant adnexal toumour(MAT).
Methods: On 120 cases of MM, 10 of BCC, 6 of MAT(1 porocarcinoma, 1 trichilemmal carcinoma, 1 hidradenocarcinoma and 3 sebaceous carcinoma), we investigated the CAFs phenotype based on their histology and immunohistochemical expression of their known markers like alpha-smooth muscle actin(a-SMA), FAP(fibroblast activating protein), FSP1(fibroblast specific protein 1), D2-40(podoplanin), PDGFR-alpha(platelet derived growth factor receptor alpha), PDGFR-beta, CD10, vimentin, desmin.
Results: The imunohistochemical expression profile of the stromal spindle/fusiform cells in this tumors were examined for all 9 markers. The intensity of the immunostaining for stromal fibroblasts was categorized in 4 classes – negative, weak, moderate and strong. The quantity of stromal spindle cells was assessed as follows: none, sparse, moderate, numerous. We characterised each histological type of tumor in terms of the immunostaining results. The MM subgroup was defined by a strong expression of FAP,FSP1 and PDGFR-beta; whilst the BCC subgroup had a strong expression for FAP,PDGFR-alpha and alpha-SMA; the SCC subgroup showed a strong expression for alpha-SMA and FSP1 and the MAT subgroup showed strong expression for FAP. Finally, we correlated a histopathological prognostic factor - the maximum tumor thickness- with the immunohistochemical expression of CAFs in the examined lesions.
Conclusion: Our work suggests that the expression pattern of CAFs has a crucial role in biological behavior in malignant cutaneous tumors.
***This work was supported by a grant of Romanian Ministery of Research and Innovation, CCCDI-UEFISCDI, project number 61PCCDI/2018 PN-III-P1-1.2-PCCDI-2017-0341, within PNCDI-III.**
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-24 Abstract No. 020 Date 17.10.2018 & 18.10.2018	Pulmonary pathology	**Udovicic-Gagula, Dalma** University of Sarajevoo Department of pathology Clinical Center Sarajevo Bosnia and Herzegovina	Poster	Bilalovic, Nurija

ABSRACT TITLE:
Malignant mesothelioma incidence, demographic and pathological characteristics in Bosnia and Herzegovina

ABSTRACT TEXT

Objective: This abstract this is for an IAP Bursary Application. There are very scarce epidemiological, pathological, and clinical data for malignant mesothelioma in Bosnia and Herzegovina. We present 10 years epidemiological and pathological data about malignant mesothelioma from a tertiary level institution in Bosnia and Herzegovina.
Methods: Medical records from the Department of Pathology, for 10 years period (2007-2017) were searched for malignant mesothelioma cases. We recorded demographic, pathological and epidemiological characteristics for malignat mesothelioma, based on the population number covered by our institution (approximately population number covered by our institution 1 200 000).
Results: We recorded 32 new cases in 10 years period. There were between 1 and 5 new cases per year, average 3,2 new cases per year, per 1 200 000 population covered (crude incidence rate 2,7/1 000 000 persons/per year). The patient's average age was 65.4 years (range, 52- 79). The most affected group were older men, age ≥65 (59,4%). The male-to-female ratio is 3,5:1. But women are affected in much younger age then men (women average age was 57,4 years; range, 52-67). The most frequent type was epithelioid mesothelioma (90,6%), followed by biphasic (6,3%) and sarcomatoid mesothelioma (3,1%).
Conclusion: Malignant mesothelioma incidence in Bosnia and Herzegovina is lower than incidences reported in most European countries, and mainly affect older adult men. In Bosnia and Herzegovina mesothelioma in women appears at a much younger age than in men, and is not related to occupational exposure but most probably environmental factors. Perhaps, recent war destruction in our country has contributed to an increased exposure to asbestos, which has led to the occurrence of mesothelioma in the earlier age for women. If so, could we expect increasing incidence in the future?
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 021 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	**Hedhli, Raoueh** Faculty of Medicine of Tunis Tunisia	Poster	Zehani, Alia Chelly, Ines Haouet, Slim Kchir, Nidhameddine

ABSTRACT TITLE:
Histological discovery of Takayasu disease

ABSTRACT TEXT

Objective: the most common inflammatory arterial disease of the young subject with an atypical discovery in our case
Methods: A 60-year-old patient with no significant pathological history. She was followed in the department of general surgery for suspicion of a gastric stromal tumor on the radiological and endoscopic data. An anterectomy associated with colonic resection was performed
Results: The macroscopic examination showed a nodular neoformation of brownish and heterogeneous aspect, measuring 4 * 3.5 cm. It was located on the meso-colic level and was distant from the gastric wall.
The histological examination of the samples taken at the level of neoformation showed a cicatricial fibrosing reaction rich in inflammatory cells. It was associated with granulomatous inflammatory changes in the wall of large vessels with granulomatous vasculitis strongly suggestive of Takayasu's disease
Conclusion:
Takayasu's disease or disease of women without pulse is a ubiquitous disease. Its diagnosis is based on a set of criteria. Histological confirmation is not essential for diagnosis
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 021 Date 15.10.2018 & 16.10.2018	Gynecological pathology	**Jezan, Husn** University of Aden Dept. of Pathology Aden Yemen	Poster	

ABSRACT TITLE:
Endometrial carcinoma in Aden

ABSTRACT TEXT

Objective: to determine the frequency of endometrial carcinoma in relation to the histological subtypes during 5 years.
Methods: Descriptive retrospective study all patients who had biopsies taken from the endometrium diagnosed histological to be carcinoma from Jan 2010 to December 2014. Data was collected from archive of Ibin Sina Laboratory in Maalla in Aden.
Results: Cases of endometrial carcinoma were 20. The age ranged from 40 to 70 years with the mean age 57.The most frequent type of endometrial carcinoma was endometriod representing 50% followed by serous papillary 27%, mixed type 9%, clear cell 9% and undifferentiated was among the least 4.5% .
The majority of the cases were in stage 1B in elderly women while stage 111 and 1V was seen in women at the age of 40

Conclusion: The rate of endometrial carcinoma is increasing. The most frequent type of endometrial cancer is Endometroid carcinoma. The majority of the cases are diagnosed stage 1B
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Koufopoulo, Nektarios Saint Savvas Cancer Hospital Athens Greece	Poster	Psichogiou, Eleni Provatas, Ioannis Antoniadou, Foteini Theodorakopoulou, Maria Vamvakaris, Ioannis Khaldi, Lubna
Abstract No. 021				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Mammary myofibroblastoma: A case report

ABSTRACT TEXT

Objective: Mammary myofibroblastoma is a rare benign mesenchymal tumor. Few cases of this type of tumor have been described in the English literature. We present a case of mammary myofibroblastoma.
Methods: A 37 year old patient was admitted due to a painless, solitary, slowly growing, palpable mass of her right breast. On clinical examination the tumor was firm in consistency, nontender and freely movable. FNAC was negative for malignancy. The tumor was excised with wide margins. On gross examination the tumor was well circumscribed, solid, grey-white in color and had a maximum diameter of 3.2cm.
Results: On microscopic examination the tumor consisted of fascicles of uniform bland short spindle cells with moderate amount of pale to eosinophilic cytoplasm. Nuclei were oval. Mitotic figures were few (0-2/10 hpf). Numerous bands of keloidal-like eosinophilic collagen separating tumor cells were present. There were few entrapped mammary glands at the tumor periphery.
The differential diagnosis included metaplastic breast carcinoma, fibromatosis, leiomyoma and phylloides tumor.
Immunohistochemical study was positive for Vimentin, CD-34 (focally), and negative for AE-1/AE-3, CK-8/18, S-100, P-63, SMA και Desmin. Ki-67 stained 5% of tumor nuclei. Our findings were consistent with mammary myofibroblastoma.
Conclusion: Mammary myofibroblastoma occurs most commonly in women and men of older age. There are several histological variants including collagenized, cellular, myxoid, lipomatous, infiltrative, epithelioid, and deciduoid-like. The diagnosis may prove challenging especially in needle core biopsy material. Recurrence is unlikely following excision with clear resection margins. Malignant transformation has not been documented. Pathologists should be aware of the wide morphologic spectrum exhibited by mammary myofibroblastoma to avoid a misdiagnosis of malignancy.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Musana Muhire, Francois Regis University of Rwanda Dept. of Pathology Huye Rwanda	Poster	Rugwizangoga, Belson
Abstract No. 021				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
The review of the completeness of the prostate cancer histopathology reporting in Rwanda

ABSTRACT TEXT

Objective: Prostate cancer is the second most common malignancy and the second cause of cancer death in men worldwide. Population-based data in Rwanda are quite limited. Proper examination and accurate reporting of prostate specimens is essential in patient treatment and predicting outcome. In this study we evaluated the clinicopathological characteristics of prostate diseases in Rwanda and the implementation of international guidelines for prostate biopsy reporting, in the perspective of improving the recording of information pertaining to the management and of prognostic and predictive value.
Methods: The study was conducted at the three main teaching hospital of Rwanda, on histologically diagnosed prostate lesions since 1st January 2015 to 31 December 2016. Archival materialswere retrieved and reviewed; demographic data from patient's medical files and histopathology reports served as the source of data to be analyzed
Results: In total, 197 cases of prostate biopsies were registered among which benign and malignant lesions were 110 (56.3%) and 87 (43.7%), respectively.Mean age was 68.6 (range 48-96) years in general for all patients, and 68.2 (range 52-84) years for prostate cancer patients. Rates for recording useful information in prostate cancer reports as per standard guidelines were 100% for histology type, 100% for Gleason score, 11.5% for tumour extent in tissue sections, 100% for resection margins, 100% for extraprostatic extension, 100% for lymph node status, 82.4% for lymphovascular invasion (LVI) , 82.4% for perineural invasion (PNI), 0% for presence or absence of prostatic intraepithelial neoplasia (PIN) and 100% for pathological staging.
Conclusion: Prostate gland diseases affect elderly men in Rwanda as elsewhere. However, there is high proportion of malignant to benign lesions in Rwanda. Information provided by Pathologists to Urologists encompasses most of the important standard parameters, but improvement is necessarythrough providing information on presence or absence of LVI, PNI, PIN and tumor extent in tissue sections.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Oluwole, Olabode University of Abuja Dept. of Pathology Abuja Nigeria	Poster	
Abstract No. 021				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Histopathologic pattern of orbital tumours in a tertiary hospital

ABSTRACT TEXT

Objective: To determine the histopathologic pattern of orbital tumours in Birnin-Kebbi, North-West, Nigeria.
Methods: This is a 4-year retrospective histopathological analysis of orbital tumours diagnosed between 2009-2012 in the Department of Histopathology, Federal Medical Centre, Birnin-Kebbi, Kebbi State, North-West, Nigeria. All the Haematoxylin &Eosin stained slides and paraffin embedded blocks were retrieved and studied. The clinical data such as the age, sex, site of lesion and clinical summary were extracted from the histology request forms.
Results: A total of 18 patients were studied, 10 males and 8 females. The age range is 2-70 years, with the mean age of 36.5 years. There is a bimodal peak age at the first and seventh decade. The most common malignancy is squamous cell carcinoma 55.5%, followed by small round blue cell tumours of childhood 33.3%, while there is case each of mucoepidermoid carcinoma (5.5%) and Kaposi sarcoma (5.5%).
Conclusion: The most common orbital tumour in this study is squamous cell carcinoma followed by small round blue cells of childhood with two rare cases of mucoepidermoid carcinoma and Kaposi sarcoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Provatas, Ioannis Evangelismos Athens Greece	Poster	Kosmas, Konstantinos Mitropoulou, Georgia Kosmas, Andreas
Abstract No. 021				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Results of Endobronchial Ultrasound-Guided Transbronchial Needle Aspiration (EBUS-TBNA) in Cytological Specimens. A 1-year retrospective study

ABSTRACT TEXT

Objective: EBUS-TBNA is a technique that combines the characteristics of ultrasound and endoscopy. It gives informations about the bronchial wall and its surrounding areas and allows tissue samples to be taken under direct guidance, thus improving diagnostic effort and eventually therapeutic intervention, thereby preventing invasive techniques. It can replace more invasive methods in the staging of lung cancer and in the diagnosis of lymphadenopathy of the mesothorax. The accuracy in the diagnosis of central tumor invasion is 94%, the sensitivity 89% and the specificity 100%. Our aim was the evaluation of 213 cytological results of EBUS-TBNA samples in order to highlight the incidence of lung cancer types.
Methods: Retrospective study of the year 2017, the cytological results of EBUS-TBNA specimens from 213 patients. The average age was 59.8 years (45-71 years). The smears were processed by the conventional method and stained with Papanicolaou stain. The type of tumors was classified according to their morphological and immunocytochemical criteria.
Results: Out of 213 cases, 114 were negative for malignancy. In 78 (68.1% men) cases the diagnosis was malignancy and more specifically: adenocarcinoma in 37 (47.4%), squamous carcinoma in 18 (23%), small cell carcinoma in 2 (2.6%), non-small cell carcinoma in 15 (19.3%), while 6 (7.7%) cases were metastatic carcinomas. In 21 cases, the diagnosis concerned cells atypical or suspected of malignancy.
Conclusion: From our results, it seems that adenocarcinoma is the most common type of lung cancer followed by squamous and small cell carcinoma. Additionally, we would like to add that EBUS-TBNA remains an important technique in the diagnosis and staging of lung cancer and that the expertise of a cytopathologist is obligatory for reaching high levels of accuracy, sensitivity and specificity.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Ramadwar, Mukta Tata Memorial Hospital Dept. of Pathology Mumbai India	Poster	Sisodiya, Sneha Rekhi, Bharat Desai, Sangeeta Shetty, Om Shree Chinnaswamy , Girish Qureshi, Sajid Khanna, Nehal Vora, Tushar
Abstract No. 021				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Time to refine the definition of alveolar rhabdomyosarcoma? Is molecular the last word?

ABSTRACT TEXT

Objective: Alveolar rhabdomyosarcoma (A-RMS) is the most aggressive of all categories of RMS. Histology diagnosis of ARMS is based on presence of alveolar pattern. Almost 70 to 80% of ARMS are characterized by PAX3-FKHR or PAX7-FKHR translocation. We attempted to study predictive value of histologic classification in determining the molecular characteristics of rhabdomyosarcoma.

Methods: Histopathology and molecular characteristics of 132 patients diagnosed with rhabdomyosarcoma were analysed from year 2013 to 2017. Two observers reviewed histology without knowledge of molecular test results. Sub-categorisation of all cases of RMS was attempted. Diagnosis of ARMS was based on alveolar pattern and nuclear changes.

Results: 79% of patients were less than 15 years of age. Age range was 1 to 50 years. 30% of patients diagnosed with RMS showed translocation positivity. 56% of histologically diagnosed ARMS showed positive translocation while 12.5% of histologically diagnosed ERMS showed positive translocation. 92% of histologically diagnosed ARMS showed alvelolar pattern. However, only 50% of RMS with any amount of alveolar pattern (n=33/66) showed translocation positivity while 50% with this pattern were negative for either of the translocations.

Conclusion: Thus predictive value of histologic parameters in determining translocation status was not significant as 12.7% histologically diagnosed ERMS showed translocation for PAX3/7-FKHR while 44% histologically diagnosed ARMS did not show any evidence of translocation. Thus we recommend that molecular testing should be performed on all patients with RMS. It is a contentious issue whether to continue classifying translocation negative histologically diagnosed ARMS in ARMS category for therapeutic and prognostic purposes.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Sassi, Asma Salah Azaiez Institute Tunis Tunisia	Poster	Boujelbene, Nadia Sahraoui, Ghada Doghri, Raoudha Abbes, Imen Chafri, Lamia Mrad, Karima Driss, Maha
Abstract No. 021				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Blastoid variant of mantle cell lymphoma: A challenging diagnosis in pathology practice

ABSTRACT TEXT

Objective: Blastoid variant of mantle cell lymphoma (MCL) is a rare aggressive clinico-biological entity. However, its poor outcome may be improved with an intensive induction therapy and autologous stem cell transplantation. An accurate diagnosis is thus essential but pathological diagnosis is challenging and often confused with other B-cell lymphomas.

Methods: We retrospectively reviewed 11 blastoid MCL diagnosed at the Pathology Department of Salah Azaiez Institute over a sixteen-year period (November 2002-December 2017).

Results: Our case series included 8 male and 3 female patients with a median age of 69 years old (35-82). Lymphoid tissue biopsy demonstrated nodular infiltrate in 60% and diffuse architecture in 40% of the cases. Cells were mostly medium-sized (72.7%) and the lymphoblastic subtype was prominent (71.4%). The mean mitotic count was 21.3 mitoses/10 high-power field. An initial diagnosis of B-cell non-hodgkin lymphoma and lymphoblastic lymphoma was made in two cases. Immunophenotypic features included CD5 positivity (90.9%), cyclin-D1 positivity (85.7%) and SOX-11 positivity in one case. Aberrant expression of CD10 was displayed in one case and BCL-6 in one case. The mean ki-67 index was 62.5%.

Conclusion: Unlike the classic MCL, pathological diagnosis of blastoid variant is challenging, not only because of its morphology as cells are medium-sized and can be confused with lymphoblastic lymphoma, but also because of its immunophenotypc pitfalls. The blastoid variant has been reported to be negative for CD5 and positive for CD10 and CD23. These phenotypic shifts occur mostly during transformation to blastoid MCL and can be useful as a marker of follow-up in some patients.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15	Dermatopathology	Yacoub, Sarah Farhat Hached Hospital Dept. of Pathology Sousse Tunisia	Poster	Sarra, Mistiri Atika, Baccouche Ayda, BOURIGA Marwa, Mhiri Aya, Ben Hadj Khelifa Sihem, Hmissa
Abstract No. 021				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Trichoblastic carcinoma: An unusual diagnosis

ABSTRACT TEXT

Objective: Our aim is to report the histological features of a rare case of a trichoblastic carcinoma

Methods: We report a case of a 50-year-old woman with an ulcerated fronto-temporal lesion evolving for 5 years. The clinical examination found an ulcerated indurate lesion measuring 8cm long.

Surgical excision was performed

Results: The microscopic examination showed a well circumscribed epthelial proliferation with no connection to the epidermis. It was composed of anastomotic trabecular structures, massifs without peripheral palissading, sparsed in an inflammatory stroma.

Massifs were centered with necrosis or keratinisation. Tumor cells were poorly limited with clear or basophilic abundant cytoplasm. Neoplastic cells demonstrated nuclear pleomorphism and increased mitotic figures. Neural invasion was encountered.

The resection margins were tumor free.

Local recurrence was observed after one year, and a bowen's disease associated to a retro auricular metastasis two years after

Conclusion: Trichoblastic carcinoma is a rare adnexal cutaneous tumour, with potentially distant malignant metastasis.

Lack of knowledge of its clinicopathological entity may lead to miss-diagnosis and then inadequate treatment.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Hijazi, Eman Islamic Hospital Dept. of Pathology Amman Jordan	Poster	Al-Hussaini, Maysa Sultan, Hala Mahasneh, Tamadur Al -Quda, Hassan
Abstract No. 022				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:

Undifferentiated colonic carcinoma with rhabdoid features in a child, a case report

ABSTRACT TEXT

Objective: Colorectal carcinoma is rare in childhood and when it occurs, an underlying hereditary predisposition should be ruled out.

Methods: We report a case of a 14 year old female patient who presented with acute intestinal obstruction. Family history was positive for malignancy in many family members.

Results: Examination of the colectomy specimen showed a large colonic mass that measured 10 cm in maximum dimension. The mass was circumferential and invaded the whole thickness of the bowel and into adjacent pericolic fat. Microscopic examination revealed two distinct growth patterns; a moderately differentiated adenocarcinoma and an adjacent undifferentiated component in which the tumor cells were discohesive with abundant eosinophilic cytoplasm. Immunostains for INI-1 and BRG-1 were retained. MLH-1, PMS-2, MSH2 and MSH6 mismatch repair protein immunostains showed loss of nuclear stain for PMS-2 in the tumor and the normal tissue consistent with germ line mutation. The diagnosis of a constitutional mismatch deficiency syndrome was established.

Conclusion: Colorectal carcinoma diagnosed in children should be investigated for potential hereditary predisposition. This will allow proper screening and counselling of the index case and the rest of the family members.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Kilitci, Asuman Ahi Evran University Hospital Dept of Pathology Kirsehir Turkey	Poster	
Abstract No. 022				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Primary benign phyllodes tumor of the vulva

ABSTRACT TEXT

Objective: Breast lesions can be found in extramammary areas such as the axilla, anus, prostate, seminal vesicle, and vulva. It is still uncertain that proliferative mammary gland lesions including phyllodes tumor in the anogenital region originate from ectopic breast tissue or from local adnexal structures. In this report, a case of primary benign phyllodes tumor of the vulva is presented.
Methods: A 41-year-old female patient (G:3,P:3) was admitted to our polyclinic due to a painless, slow-growing mass under the skin of the vulva which she first noticed 6 months ago. The mass was located between the labium majus and minus and was 3x4 cm in size. In the patient's history, there were no breastfeeding, breast disease, menstrual irregularity, malignancy, hormonal contraception, and pregnancy. Laboratory tests (hormone panel, gynecological and breast cancer markers) were within normal limits. The lesion was excised and sent to the pathology laboratory for histopathological examination with a preliminary diagnosis of fibroma.
Results: Histologic examination revealed biphasic tumoral formation with typically extensive leaf-like papillary structures growing toward slit-like spaces under the skin. The slit-like spaces consisted of a double layer of epithelial and myoepithelial cells. Immunohistochemically epithelial cells showed a positive reaction with ER, PR, and panCK; myoepithelial cells showed a positive reaction with SMA, CD10, and WT-1.
Conclusion: Benign phyllodes tumor of the vulva is rarely seen in this localization and has homologous features with the breast histopathologically and immunohistochemically. However, its histogenesis has not yet been fully understood. We think that the lesion can originate from anogenital mammary-like glands because it was located between the labium majus and minus and that a possible hormonal etiology may also play a role. Recurrence is rare with total resection of the tumor.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Lawan, Aliyu Gombe State University Dept. of Histopathology Gombe Nigeria	Poster	Abdullahi, Yusuf Ali-Gombe, Musa Aliyu, Sani Guduf, Mohammed
Abstract No. 022				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Hormone Receptor and Human Epidermal Growth Factor Receptor -2 Status Of Breast Cancer: A Snap Shot From North East, Nigeria.

ABSTRACT TEXT

Objective: There is a significant disparity in the tumour biology of breast cancer in Sub-Saharan Africa when compared with Caucasians. Molecular characterization of this cancer remains a critical and indispensable tool in patient treatment and prognostication. This study aims to study the pattern of hormonal receptor and human epidermal growth factor receptor-2 status in patients with breast cancer.
Methods: This is a cross sectional study which was conducted at the Department of Histopathology, Federal Teaching Hospital, Gombe. Seventy-eight cases of breast cancers of the 91 that had immunohistochemistry met the criteria for this study. The archival histological slides were reviewed. The clinical details were retrieved from the patients' case notes and request cards. Immunohistochemistry results and slides of ER, PR and HER-2 where retrieved and reviewed.
Results: Females were the most affected accounting for 76 cases (97.4%). Only two cases were male. The mean age at diagnosis is 50.5 years (SD-14.8 years). Invasive carcinoma (NST) was the most common histological subtype and most were grade 3 cancers. This is followed by invasive lobular carcinoma. Sixty two percent (48 cases) are triple negative breast cancers (TNBC). HER-2 only staining was observed in 14.1% (11 cases) while luminal type breast cancer accounted for 23% of cases. Majority were advanced disease.
Conclusion: Hormonal receptor and HER-2 receptor status is of optimum importance in breast cancer management. This should be a routine for all breast cancers worldwide. There is need for partnership and collaboration in developing countries to meet this goal.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Nikolaidou, Anastasia Anticancer Hopital Thessaloniki Greece	Poster	Dolkiras, Filippos Galidis, Eleftherios Moustakas, Georgios Klampatsas, Athanasios Mavropoulou, Stavroula Dimasis, Nikolaos
Abstract No. 022				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Variant histology of urinary bladder cancer: A retrospective study of 200 patients in Theageneio hospital

ABSTRACT TEXT

Objective: Tumors of the bladder consist mainly of urothelial carcinomas (90%) and to a lesser extent of other malignant neoplasms. Variant histology applies both to urothelial variants and non-urothelial variants. It is important to identify them, as it has been recognized that variant histology can potentially affect patient treatment and patient outcome. Furthermore, the identification of variant histology can pose a challenge for the pathologist, as it can often lead to misinterpretation. Our aim is to evaluate the incidence and type of variant histology in bladder cancer.
Methods: We analyzed 200 patients under a period of 5 years (2013-2018) from patients who underwent tumor resection or cystectomy in Theageneio Cancer hospital. The sample consisted of 165 males and 35 females, diagnosed by pathologist Nikolaidou. The age range was 45-93 years old. We did not include cases, concerning metastasis from bladder cancer to other sites.
Results: From the 200 specimens examined variant histology was diagnosed in 32 cases (16%). Variant histology of urothelial carcinomas was diagnosed in 27 cases (13,5%). The main subtypes were: urothelial carcinomas with squamous (11 cases-5,5%) and with glandular (8 cases- 4%), differentiation, followed to a lesser extent by micropapillary , sarcomatoid and clear cell (each of 2 cases) and plasmacytoid and nested variant (1 case respectively). Non-urothelial variants consisted 2,5%, namely 2 cases of pure squamous carcinoma (1%), 2 cases of small cell neuroendocrine carcinoma (1%) and 1 case of enteric type adenocarcinoma (0,5%).
Conclusion: Even if each individual subtype is rare, the total percentage of variant histology in bladder cancer is significant. After the publication of the WHO 2016 we found out an increase in the diagnoses made in our series. We expect the percentage of variant histology diagnoses to be increased in the following years, as awareness rises and molecular markers assisting in the differentiation of the various subtypes are emerging.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Ouédraogo, Aïda Sandrine Farhat Hached Hospital Dept. of Pathology Sousse Tunisia	Poster	Mokni, Moncef Mestiri, Sarra Bouriga, Ayda Bel Hadj Khlifa, Aya Yacoub, Sarra Baccouch, Atika Mhiri, Marwa Badreddine, Sriha
Abstract No. 022				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Hepatic epithelioid hemangioendothelioma: A rare vascular tumor

ABSTRACT TEXT

Objective: Epithelioid hemangioendothelioma (E.H) is a rare low to intermediate grade malignant vascular tumor derived from endothelial cells. It is commoner in females and the average of patients is about 50 years. It is a slow growing tumor with an unpredictable outcom and the symptoms are not specific.
We report a case of E.H in a 32 year old woman diagnosed after histological examination of a liver nodule biopsy.

Methods: A 32 year old woman who had a past medical history of wegener's disease with pulmonary and renal involvement, treated with immunosuppressive drugs for 2 years. The routine blood cell count and biochemical investigations (serum bilirubin, trans-aminases, alkaline phosphatase, and proteins) were disturbed. Hepatic Ultrasound of the abdomen showed multiple hypoechoic lesions in the right lobe.
Results: An ultrasound-guided biopsy was done, which showed spindle to epithelioid tumor cells embedded in myxoid background. Focally, vascular differentiation was seen, with cytoplasmic lumina features. Immunohistochemistry showed a diffuse positivity for CD 34 and factor VIII antigen and focal positivity for cytokeratin, suggestive of hepatic epithelioid hemangioendothelioma.
Conclusion: Hepatic epithelioid hemangioendothelioma represent a very rare vascular tumor of the liver. The behavior of this malignant tumor is uncertain and usually falls between that of benign haemangioma and that of malignant angiosarcoma. Differential diagnosis is made with other primary or secondary liver tumors. The definitive diagnosis is usually determinated by histopathological examination.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	**Provatas, Ioannis** Evangelismos Athens Greece	Poster	Mitropoulou, Georgia Kosmas, Konstantinos Kosmas, Andreas
Abstract No. 022				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Evaluation of cytological results in TBNA specimens. A 1-year retrospective study

ABSTRACT TEXT

Objective: TBNA technique helps in diagnosis of benign and malignant neoplasms. Although it's diagnostic value is high, in Greece remains an underused technique and only 21% of the pulmonologists reporting its use. Its diagnostic value depends on tumor type, size and location of the involved lymph node (the studies place the sensitivity to 32-84% and the specificity to 98-100%). Our aim was the evaluation of 211 cytological results of TBNA samples in order to highlight the incidence of lung cancer types.
Methods: Retrospective study of the year 2017, the cytological results of TBNA specimens from 211 patients. The average age was 63.5 years (47-73 years). The smears were processed by the conventional method and stained with Papanicolaou stain. The type of tumors was classified according to their morphological and immunocytochemical criteria.
Results: Out of 211 cases, 108 were negative for malignancy. In 81 (71.6% men) cases the diagnosis was malignancy and more specifically: adenocarcinoma in 39 (48%), squamous carcinoma in 21 (26%), small cell carcinoma in 2 (2.5%), non-small cell carcinoma in 14 (17.3%), while 5 (6.2%) cases were metastatic carcinomas. In 22 cases, the diagnosis concerned cells atypical or suspected of malignancy.
Conclusion: From our results, it seems that adenocarcinoma is the most common type of lung cancer followed by squamous and small cell carcinoma. Additionally, we would like to add that TBNA remains an important technique in the diagnosis and staging of lung cancer and that the expertise of a cytopathologist is obligatory for reaching high levels of sensitivity and specificity.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	**Ribeiro-Silva, Alfredo** Ribeirão Preto Medical School Ribeirão Preto Brazil	Poster	Silva, Suziene Duarte, Andressa Almeida, Luciana León, Jorge
Abstract No. 022				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Does MMP9 have different prognostic significance in head and neck carcinomas depending on the anatomical site of origin?

ABSTRACT TEXT

Objective: Squamous cell carcinoma (SCC) is the most common malignancy in the head and neck region. There is growing evidence that the prognosis varies depending on the primary site of the tumor, especially considering oral SCC (OSCC) and oropharyngeal SCC (OPSCC); however, their mechanisms are still uncertain. The metalloproteinase 9 (MMP9) has an essential role in the SCC pathogenesis, regulating growth, apoptosis, angiogenesis, tumor invasion and metastasis processes. This study aimed to investigate the immunoexpression of MMP9 in patients with OSCC and OPSCC, and to correlate its expression with clinical and pathological parameters of prognostic importance.
Methods: The immunohistochemical analysis of MMP9 was performed on tissue microarrays containing 161 SCC samples: 108 samples of OSCC and 53 samples of OPSCC. The clinical and pathological parameters evaluated were: age, gender, anatomical site, histological grade, lymph node metastasis, distant metastasis, alcoholism, smoking, staging, disease-free survival and overall survival. Statistical analysis was performed with SPSS v.22 software.
Results: There was no significant difference in MMP9 expression between OSCC and OPSCC groups. Moreover, the MMP9 expression did not correlate with any of the clinicopathological parameters evaluated, except for gender. Females with OPSCC but not with OSCC presented more often lack of MMP9 expression.
Conclusion: Our results do not favor MMP9 as a prognostic marker when comparatively assessing OSCC and OPSCC.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	**Sahraoui, Ghada** Salah Azaiez Institute Tunis Tunisia	Poster	Charfi, Lamia Sellami, Rym Boujelbene, Nadia Doghri, Raoudha Abbes, Imene Mrad, Karima Driss, Maha
Abstract No. 022				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Malignant peripheral nerve sheath tumors: About 18 cases

ABSTRACT TEXT

Objective: Malignant peripheral nerve sheath tumors (MPNST) are rare and have poor prognosis. They usually arise from peripheral nerves and show variable differentiation toward one of the cellular components of the nerve sheath (Schwann cells, fibroblasts, and perineural cells). Because of their morphologic heterogeneity and the lack of specific immunohistochemical or molecular markers, histologic diagnosis is challenging. Our aim was to highlight morphological and immunohistochemical profile of these tumours.
Methods: A retrospective study included 18 cases of MPNST diagnosed in our department from January 2000 to December 2016. Immunohistochemical study was performed for all the cases. The panel included variably: desmin, actin, myogenin, vimentin, CD34, EMA, cytokératin, HMB45, MelanA, Ckit and Dog1 antibodies.
Results: The median age was 41 years (13-74 years). Male-to-female ratio was equal to 0,7. Most cases (16 cases) were sporadic. Two 24-year-old patients presented with neurofibromatosis (NF1). Lower extremities were involved in 7 cases, buttocks in 3 cases, trunk in 3 cases, pelvis in 3 cases and forearm in the 2 remaining cases.
The average tumor size was 190 mm (40-420 mm).
In 13 cases, typical morphology as well as immunohistochemical features have easily led to diagnosis. For the remaining 5 cases, microscopic analysis revealed undifferentiated sarcoma features. Diagnosis was made only on the basis of immunohistochemical findings showing focal positivity for S100 protein and negativity for all the other markers. Preexisting neurofibroma was found in two cases.
Conclusion: Since MPNST are morphologically heterogeneous tumors that do not show a diagnostic immunoprofile, it is important first to exclude other tumors with similar histological features.
Careful examination is required to exclude benign tumors.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	**Tsavari, Aikaterini** Tzaneio General Hospital Dept. of Pathology Piraeus Greece	Poster	Koulia, Kalliroi Galanopoulos, Georgios Vasilakaki, Thivi Ieronimaki, Ioanna Manoloudaki, Kassiani
Abstract No. 022				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Burkitt lymphoma presenting as acute abdomen mimicking ectopic pregnancy

ABSTRACT TEXT

Objective: Burkitt lymphoma is a high grade malignant B-cell neoplasm. The sporadic type often occurs in the ileocecal region. We are presenting a case of a 21 year-old female with acute abdomen symptoms, accompanied by breast enlargement, as well as vaginal bleeding.
Methods: U/S check showed ascites and ovarian swelling, and an exploratory laparotomy was performed. Intra-operative findings revealed excessive inflammation in the appendix and both ovaries. An appendectomy was performed. Since the patient was still of reproductive age, ovarian sampling was chosen instead of bilateral oophorectomy.
Results: The appendix and both ovarian samples were diffusely infiltrated by a malignant lympogenic neoplasm, characterized by monomorphic, medium-size cells with abundant basophilic cytoplasm, and mild nuclear atypia. Tingible body macrophages were also identified, giving a "starry sky" pattern. Immunohistochemically, the neoplasmatic cells were LCA, CD10, CD20, CD79a, Bcl6, IgM, Ki67 (almost 100%) positive and CD3, CD5, Bcl2, CD43, Tdt, Cd23 negative. The histological and immunohistochemichal results gave the diagnosis of Burkitt lymphoma.
Conclusion: Sporadic Burkitt lymphoma accounts for 1%-2% oflymphomainadults. While the ileocecal area is the most common site of involvement,the ovaries, kidneys, omentum and breasts may also be involved. Differential diagnosis may be challenging since the symptoms could mimic those of appendicitis, pyelonephritis or even ectopic pregnancy. Both histological and immunohistochemical evaluation is required for safe diagnosis. Chemotherapy is the dominant treatment while surgery or radiotherapy has no place.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-15 Abstract No. 022 Date 17.10.2018 & 18.10.2018	Dermatopathology	Zidlik, Vladimir CGB laboratory Ostrava Czech Republic	Poster	Ziak, Dusan Brychtova, Svetlana Uvirova, Magdalena Hurnik, Pavel Dvorackova, Jana

ABSTRACT TITLE:

Expression of FOXP3 and PD-L1 in cells of immune system, melanomas and pigmented nevi. Immunohistochemical study

ABSTRACT TEXT

Objective: The tumor growth depends on interactions between tumor cells and surrounding microstromal environment. Important role play cells of immune system, especially regulatory T cells (Tregs) influenced by transcription factor FOXP3. Tregs create host tolerance against tumor antigens by dampening the T-cell-mediated immune response.
Among the most promising approaches to activating therapeutic antitumor immunity is the blockade of immune checkpoints. Control receptor PD1 (programme death cell protein) is expressed by activated T lymphocytes during inflamation and tumors. PD1 binds with ligands (PD-L1, PD-L2) expressed by stromal cells, tumors and Tregs, which decrease immune reactions in tumor microstromal environment. It facilitates growth of tumor cells.
Therapeutic blockade of PD-1 or PD-L1 with monoclonal antibodies leads to durable tumor regressions in patients with several cancer types.
Methods: We observed 95 malignant melanoma and 25 benign pigmented nevi. Melanomas were devided in four groups differed from deep of invasion (Breslow): pT1 (n=35), pT2 (n=21), pT3 (n=21), pT4 (n=18). Density of positive cells was evaluated in area 1mm2 in „hot spot“ regions in center and periphery of lesions.
Results: We found out significant differences in expression of observed proteins FOXP3 and PD-L1 mainly between earlier stages (pT1, pT2) and advanced stages (pT3, pT4) of malignant melanomas.
Conclusion: In our study we exhibited the increase in density of FOXP3+Treg lymphocytes in the stromal microenvironment of melanoma in association with the vertical growth, which confirms their important role in the progression of this disease. We suppose that there is also important their redistribution towards the tumour periphery, which may facilitate melanoma propagation.
Analysis also demostrates increasing of PD-L1 expression especially in melanocytes and stromal lymphocytes especially in advanced stages of malignant melanomas. We expect PD-L1 positive lymphocytes cooperate with melanocytes during growing phase of melanomas.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 023 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Janevska, Vesna Institute of Pathology Dept. of Surgical Pathology Skopje Macedonia	Poster	Spasevska, Liljana Perushevska, Gordana Kostadinova Kunovska, Slavica Chalovska Ivanova, Viktorija Genadieva Dimitrova, Magdalena Nikolova, Dafina

ABSRACT TITLE:

Immunohistochemical expression of epidermal growth factor receptor in hepatocellular carcinoma?

ABSTRACT TEXT

Objective: Epidermal growth factor receptor (EGFR) signaling plays an important role in various cancers, including hepatocellular carcinoma (HCC). We aimed to evaluate immunoexpression of EGFR in HCC and surrounding non-tumor liver tissue and to correlate it to multiple clinicopathologic data.
Methods: We analyzed 60 patients with HCC for serum level of alpha-fetoprotein (AFP), T status of the TNM classification, enlarged lymph nodes, vascular invasion, histological pattern, tumor grade and survival.
Presence of the membrane immunosignal and the percentage of positive tumor cells at the whole tumor tissue sample were semi-quantitatively determined. The immunoreactivity of the adjacent non-tumor tissue was analyzed in the same manner.
Results: Nineteen patients (31,67%) were female and 41 (68,33%) were male ranging in age from 31 to 85 years, median 61.88±10,51.
Mean survival time for female patients was 8,86±1,76 months, for male 13,03±1,50 and overall survival was 11,6051±1,19 months, censored at 2 years follow up period.
AFP levels were in range from 2,1 to 10 000, mean 758,95.
The most patients had: T2 status (41,67%), no enlarged lymph nodes (90%), vascular invasion (63,33%), the trabecular type (85%) of HCC and well differentiated (43,33%) tumors.
EGFR immunoexpression was determined in range from 0% to 100% in both tumor and non-tumor tissue with mean value of 39,58 in tumor and 86,86 in non tumor tissue (p<0,00).
Higher percent of tumor EGFR positive cells were found in cases with higher T status, higher levels of AFP and poorly differentiated carcinoma, but not significantly. Higher EGFR expression significantly influenced survival of the patients (p<0,05). Multiple linear regression showed that with each increase in patient's survival by 1 month the EGFR expression decreases by 1,63%.
Conclusion: The study showed that expression of EGFR in lower percentage of tumor cells was associated to favorable prognosis, making it a potential prognostic marker and therapeutic target.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 023 Date 15.10.2018 & 16.10.2018	Cytopathology	Khader, Samer Montefiore Medical Center Bronx USA	Poster	Segura, Sheila Ramos Rivera, Gloria

ABSTRACT TITLE:

Follow-up of thyroid nodules categorized as atypia of undetermined significance or follicular lesion of undetermined significance (AUS/FLUS): An institutional experience

ABSTRACT TEXT

Objective: The Bethesda System for Reporting Thyroid Cytopathology is the standard for interpreting fine needle thyroid aspiration (FNA) specimens. The "atypia of undetermined significance/follicular lesion of undetermined significance"(AUS/FUS) category, known as Bethesda Category III, is a controversial and heterogeneous category of cases that are not clearly benign or malignant. It was initially associated with an increased risk of malignancy of 5-15%, but different results have emerged throughout the years.
Methods: We used the Clinical Looking Glass software to create a cohort and extract thyroid FNAs reports along with subsequent surgical management, to assess the histological correlation. These patients are fed to the Clinical Looking Glass software from the electronic medical records of Montefiore Medical Center. We included reports from January 2013 to December 2016. The data extracted is de-identified and exported in an excel file for analysis. We correlated the cytology diagnosis with the surgical pathology diagnosis to evaluate the rate of malignancy along with appropriate management in this category.
Results: From 288 patients diagnosed with AUS, 39 patients (14%) had subsequent surgical treatment. From those, 29/39 patients (54%) had a benign surgical outcome, while 18/39 (46%) surgical diagnoses were malignant; 14/18 (77%) of these cases did not have an FNA diagnosis higher than AUS (see table 1) and had surgical resection. The risk of malignancy outcome for our study population is 4.9%. Only one patient had more than one lesion: papillary thyroid carcinoma (PTC), micro PTC, and a minimally invasive follicular carcinoma.
Conclusion: Our study showed that our institution's risk of malignancy outcome for the Bethesda Category III is on the lower end of the classification, which is 5-15%. The majority of these cases had a PTC variant, comprising 93% of all cases. Our institutional experience compares to prior studies on risk of malignancy outcome.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 023 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Kilitci, Asuman Ahi Evran University Hospital Dept of Pathology Kirsehir Turkey	Poster	

ABSRACT TITLE:

Primary ovarian leiomyoma in a pregnant woman

ABSTRACT TEXT

Objective: Leiomyoma is a benign mesenchymal tumor that frequently occurs in uterus in middle-aged and postmenopausal women but rarely detected in ovary. Leiomyoma arising primarily in the ovary is a rare, unilateral, usually small and incidentally seen neoplasm, clinically indistinguishable from subserous leiomyomas and ovarian fibromas, until histopathological confirmation. Smooth muscle cells of ovarian hilar blood vessels, ovarian stromal smooth muscle cells, smooth muscle metaplasia of ovarian stromal cells and hormonal stimulation were suggested as a possible origin.
Methods: We present the case of a 41-year old woman at 37 weeks of pregnancy with a large ovarian mass discovered incidentally during at C/S delivery.
Results: The ovarian mass measured 7 cm at its greatest dimension. Histological evaluation of the ovarian mass revealed a spindle cell tumor without atypia or mitosis. Immunohistochemical staining with antibodies against smooth muscle actin and desmin confirmed the leiomyomatous nature of the tumor.
Conclusion: Primary ovarian leiomyoma is a very rare benign tumor. To our knowledge only 70 cases of this rare tumor have been reported and few cases have been reported in pregnant women, till date. Occurrence during pregnancy or delivery is more challenging for clinico-pathological diagnosis and operative management.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 023 Date 15.10.2018 & 16.10.2018	Breast pathology	Nel, Carolina Elizabeth University of Witwatersr and Anatomical Pathology Joahnnesburg South Africa	Poster	Mannell, Alwyn Nietz, Sarah Smilg, Jaqueline Haberfeld, Jenny Hale, Martin

ABSTRACT TITLE:

A prospective study of the discordance between biomarker profiles of primary breast carcinoma and the ipsilateral axillary lymph node metastases performed simultaneously in 50 treatment naïve South African patients

ABSTRACT TEXT

Objective: To determine the discordance rate for oestrogen receptor, progesterone receptor, HER2/neu and Ki-67 proliferation index between the primary tumour and the nodal metastases in treatment naïve patients.
To investigate the difference in receptor profiles in HIV positive and HIV negative patients presenting with breast carcinoma and nodal metastases.
Methods: This on-going prospective study includes a total of 64 patients who have presented to the Charlotte Maxeke Johannesburg Academic Hospital Complex starting from 1 July 2017, with primary breast tumours and suspected ipsilateral axillary lymph node involvement. The cases have been assessed by a single pathologist. The hormone receptor status, HER2/neu status and Ki-67 proliferation index have been evaluated using immunohistochemistry and applying standardised guidelines for interpretation. FISH for HER2/neu equivocal cases has been employed.
Results: 49 patients are female with a mean age of 52.26 years. 88% (44/50) of the patients are African and 12% (6/50) white or mixed race. 68% of the patients (34/50) are HIV negative, 18% (9/50) are HIV positive and 14% (7/50)of patients' HIV status is unknown. The discordance rate in the molecular subtype of the tumour and the paired lymph node metastasis is 8% (4/50). Of the discordant cases, 3 changed from luminal A to triple negative in the nodes, one to luminal HER2/neu and one to luminal B. The remaining discordant case changed from luminal A in the breast to luminal B in the nodes.
Conclusion: Biomarker discordance has been observed in 8% of our patients. Expression of ER and HER2/neu displayed significant discordance with adequate frequency to consider biomarker profiling on lymph node metastases at presentation to alter treatment protocols and ultimately prevent distant metastases.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 023 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Nikolaidou, Anastasia Anticancer Hopital Thessaloniki Greece	Poster	Botsfari, Elli Sidiropoulou, Barbara Klampatsas, Athanasios Moustakas, Georgios Triantafillidou, Efthymia Zoupoudi, Georgia Patakiouta, Freideriki

ABSRACT TITLE:

Urothelial carcinoma: Identification of basal/squamous-like subtype using immunohistochemical marker

ABSTRACT TEXT

Objective: Infiltrating urothelial carcinoma is the most common malignant neoplasm of the urinary tract. Recent gene sequencing studies have identified three subtypes: basal/squamous-like, luminal and p53-like carcinomas. Basal subtype is associated with shorter overall survival and has been recognized to influence response to chemotherapy.
Methods: A series of 50 patients with invasive urothelial carcinoma, at least high grade, diagnosed in 2015-2018, hospitalized at Theagenion Cancer Hospital was analyzed. Tissue samples were stained with H & E to determine the histopathological type of patients' tumors. Basal cell features were determined in tissue samples by immunohistochemistry using the CK5/6 marker.
Results: Tumors were infiltrating urothelial carcinomas, at least high grade, with squamous differentiation (16%), glandular differentiation (13%), and features of micropapillary (6,6%) and sarcomatoid (3,3%) urothelial carcinoma. In our study, positive CK5/6 (only strong membranous staining) immunostaining was found in 26 tumors (52 %) versus 24 negative tumors (48 %).
Conclusion: The infiltrating urothelial carcinomas with basal cell features have been associated with reduced responsiveness to radiation and chemotherapy and immunohistochemistry is a simple and cost-effective method to identify this subtype in daily practice.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 023 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Park, Yujun Republic of Korea	Poster	Park, Hyunjin Lee, Yangkyu Lee, Hyejung Kim, Haeryoung

ABSTRACT TITLE:

M2 tumor-associated macrophages in pancreatic neuroendocrine tumors and solid pseudopapillary neoplasms

ABSTRACT TEXT

Objective: Tumor-associated macrophages have been shown to play a protumorigenic role in pancreatic adenocarcinomas; however, the significance of M2 macrophage infiltration in pancreatic neuroendocrine tumors (PanNETs) and solid pseudopapillary neoplasms (SPN) is not clear. We performed a quantitative analysis of two M2 macrophage-related markers, CD163 and CD206, in PanNETs and SPNs, and correlated the results with microvascular density, proliferative activity and other clinicopathological factors.
Methods: Immunohistochemistry for CD163 and CD206 was performed on surgically resected whole tissue sections from PanNETs (n=27) and SPNs (n=29). CD163 and CD206-positive macrophages were manually counted at ten high-power fields (HPF) under the microscope in the tumor, the peritumoral parenchyme and remote non-neoplastic parenchyma. CD34-positive microvascular density was counted in ten HPFs and tumoral Ki-67 indices were calculated in 200-300 cells using an automated algorithm with Aperio Imagescope.
Results: Intratumoral and peritumoral CD163+ macrophage counts were positively correlated with each other, for both PanNETs (p=0.012) and SPNs (p=0.001). CD206+ macrophages were more abundant in peritumoral stroma than remote parenchyma (p=0.004) in PanNET while intratumoral CD163+ macrophages were more abundant than remote parenchyma (p=0.003) in SPN. Peritumoral CD163+ macrophage counts in PanNETs showed significant positive correlations with tumor size (p=0.003), mitotic activity (p=0.005), Ki-67-labeling index (p<0.001) and higher pathologic tumor stage (p=0.047). Similarly, in SPNs, higher intratumoral- and peritumoral CD163+ macrophage counts were both associated with higher Ki-67 labeling index (intratumoral: p=0.029, peritumoral: p=0.004). No significant associations were found between CD206+ macrophage counts and any clinicopathological factors for PanNETs and SPNs, and no associations were seen between M2 macrophage count and microvascular density.
Conclusion: M2 tumor-associated macrophages are frequently seen in PanNETs and SPNs and high CD163+ macrophage counts are associated with increased proliferative activity, tumor size and stage, suggesting that CD163+ macrophages may play important roles in promoting the aggressive behavior of these tumors.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07 Abstract No. 023 Date 15.10.2018 & 16.10.2018	Head and neck pathology	Ribeiro-Silva, Alfredo Ribeirão Preto Medical School Ribeirão Preto Brazil	Poster	Silva, Suziene Duarte, Andressa Almeida, Luciana León, Jorge

ABSRACT TITLE:

Checkpoint kinase 2 as a prognostic factor in oral squamous cell carcinoma

ABSTRACT TEXT

Objective: More than 90% of cancers of the head and neck are squamous cell carcinomas. The checkpoint kinase 2 (Chk2) is considered a tumor suppressor gene because it has the ability to stop the cell cycle and to induce apoptosis in response to DNA damage. The role of Chk2 in oral squamous cell carcinoma (OSCC), particularly with regard to prognosis, still merits further investigation. This study aims to evaluate the immunoexpression of Chk2 in OSCC, and to correlate its expression with clinical and pathological parameters of prognostic importance.
Methods: The immunohistochemical analysis of Chk2 was performed on tissue microarrays containing 106 OSCC formalin-fixed paraffin-embedded samples (antibody NCL-chk2, clone DCS 270.1, against Prokaryotic GST-Chk2 fusion protein). The following clinical and pathological features were evaluated: age, gender, topographical site, histological grade, lymph node metastasis, distant metastasis, alcoholism, smoking, staging, disease free survival and overall survival. Statistical analysis was performed with SPSS v.22 software.
Results: Our results showed an inverse correlation between Chk2 expression and metastasis (p = 0.018). Curiously, however, the Chk2 expression correlated with lower overall survival (p = 0.040) and lack of Chk2 expression correlated with a higher metastasis-free survival (p=0.028).
Conclusion: The inverse correlation between Chk2 expression and metastasis may favor Chk2 as a tumor suppressor gene. However, the correlation between Chk2 expression and survival, as similarly shown in other studies, needs to be clarified. Further studies involving analysis of phosphorylated chk2 and p53 mutation status are recommended.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25 Abstract No. 023 Date 17.10.2018 & 18.10.2018	Soft tissue pathology	Sahraoui, Ghada Salah Azaiez Institute Tunis Tunisia	Poster	Doghri, Raoudha Charfi, Lamia Boujelbene, Nadia Sellami, Rym Abbes, Imene Mrad, Karima Driss, Maha

ABSRACT TITLE:

Myxoid sarcomas of soft tissues: About 88 cases

ABSTRACT TEXT

Objective: Myxoid tumours of soft tissue encompass a heterogeneous group of neoplasm characterized by a marked abundance of extracellular myxoid matrix. There appears to be a considerable degree of overlap clinically and morphologically between the various tumour types in this group, generating potential diagnostic problems for the clinician and pathologist. While diligent microscopy remains the basis of diagnostic pathology, the continuous developments and refinements within the fields of immunohistochemistry and molecular cytogenetic are providing substantial new information, allowing the development of new diagnostic criteria and hence facilitating an accurate diagnosis. Our aim was to highlight morphological and immunohistochemical profile of myxoïd sarcomas and to discuss differential diagnosis.

Methods: We studied 88 myxoïd sarcomas of the soft tissues (1997-2016). Immunohistochemical studies were performed using actin, desmin, S100 protein, CD34, MUC4, EMA and cytokeratin.

Results: Our series included 60 cases (68,2%) of myxoïd liposarcoma (MLPS), 14 cases (16%) of myxofibrosarcoma (MFS), 10 cases (11.3%) of myxoïd leiomyosarcoma (MLMS) and 4 (4,5%) cases of low grade fibromyxoïd sarcoma (LGFMS) .

The mean age was 56 years (20-89 years). Sex ratio was equal to = 1,25.

Some characteristic features were helpful to distinguish each entity: plexiform vasculature and lipoblasts in MLPS, cigar-shaped nuclei in MLMS, alternation fibrous and myxoid areas with whorled and swirling formations in LGFMS and finally alternation paucicellular and hypercellular areas with nuclear atypia in MFS.

Immunohistochemical studies confirmed the diagnosis of MLMS and LGFMS. Actin, Desmin and Caldesmon were positive in LMS and MUC 4 in LGFMS.

Cytogenetic tools were used in cases of LGFMS showing FUS/CREB3L2 fusion gene.

Conclusion: Our results are consistent with literature data. Diagnosis may be challenging since these tumors have various morphological patterns and pathologists are often required to examine biopsies with insufficient specimen. Morphology remains the corner stone to establish the diagnosis, immunohistochemistry may be a powerful tool in challenging circumstances.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19 Abstract No. 023 Date 17.10.2018 & 18.10.2018	Hematopathology	Upadhyaya Kafle, Santosh Birat Medical College Biratnagar Nepal	Poster	

ABSTRACT TITLE:

Blood Component Separation Service: A New Experience at B. P. Koirala Institute of Health Sciences (BPKIHS), Dharan, Nepal

ABSTRACT TEXT

Objective: Blood component separation facility began dispatching its blood component units from 21st April 2013 at the new blood component separation service complex at BPKIHS. With the supply of blood components being finite and with the added recognition of a high rate of inappropriate use of blood component services around the world, there is a need to monitor and regulate these services.

Our study was conducted to identify blood component utilisation pattern in institute and to know about different blood components demand for future preparedness.

Methods: This retrospective study was conducted at BPKIHS, Dharan, Nepal for blood component dispatched from 21st April, 2013 -12th February, 2014. Blood components requisitions from all clinical department were reviewed regarding the specific component requested, blood group and socio-demographic profile.

Results: Among 3054 transfusion units dispatched, 1552 were males, 1498 females and 4 unspecified. Likewise, 1722 were Pack Cell Volume (PCV), 808 Platelet Rich Plasma (PRP), 523 Fresh Frozen Plasma (FRP) and 1 Cryoprecipitate (CP) dispatched respectively with majority of A positive blood group demanded from Neonatal and Paediatric ICU ward for PCV (201) and FFP (300) respectively followed by Emergency ward for PRP. 197 (6.45%) requistion forms lacked the details of requesting department, while some even reveal multiple demands.

Conclusion: PCV of A positive blood group being the predominant blood component requested from NICU/PICU ward at the institute making most requests. Finally, these results could be useful for estimating the requirements for our newly established blood bank to meet the demand in future.

Key words: blood component, packed cell volume, transfusion units

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 024 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Jevtic, Jovan Medical Faculty of Belgrade Dept. of Pathology Belgrade Serbia	Poster	Milovanovic, Ivan Ristic, Nina Mitrovic, Nemanja Jankovic, Radmila

ABSTRACT TITLE:

Intestinal leiomyositis: A rare cause of intestinal pseudo-obstruction

ABSTRACT TEXT

Objective: Intestinal pseudoobstruction (IP) is a clinical syndrome caracterized by signs and symptoms of intestinal obstruction, without any mechanical obstacle. It may be caused by abnormalities of enteric nerve system or intestinal smooth muscles.

Methods: We report a case of 11 months old boy presented with constipation, vomiting and food refusal at the age of nine months. Ultrasound and radiography showed meteorism and bowel distension. After two months of obstructive symptoms he underwent laparatomy, and ileostoma was created. Laparatomy confirmed the absence of mechanical obstruction. During laparatomy full thickness biopsy of small and large bowel was obtained. Pathological analysis of full thickness biopsies showed diffuse lymphocytic infiltration and degeneration of muscle layer both of small and large bowel. Immunohistochemical analysis showed that aforementioned inflammatory infiltrate was composed mainly of CD3 and CD4 positive T-lymphocytes. There were also CD56 and CD8 positive T-lymphocytes and CD20 positive B-lymphocytes.

Results: Considering histological and immunohistochemical features intestinal leiomyositis was diagnosed. After diagnosis was set, patient was treated with immunosuppressive drugs. Nine-month follow up showed a considerable improvement in patients condition.

Conclusion: Although very rare, intestinal leiomyositis should be considered whenever patients have obstructive signs and symptoms associated with lymphocytic infiltration of bowel muscle layer.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 024 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Kim, Hyesun Cheil General Hospital Seoul Republic of Korea	Poster	Chung, Jin Hoon Chun, Yi Kyeong

ABSTRACT TITLE:

Placental mesenchymal dysplasia associated with hepatic mesenchymal hamartoma: A case report

ABSTRACT TEXT

Objective: Placental mesenchymal dysplasia (PMD) is a rare condition with characteristics including placentomegaly, cirsoid vessels of the chorionic plate and stem villi, and grape-like villous vesicles. It can be associated with viable fetus with normal karyotype, however, there have been few reports about fetal abnormalities associated with PMD. So, we report a case of PMD associated with hepatic mesenchymal hamartoma (HMH) of fetus.
Methods: A 35-year-old woman was presented at 12 weeks gestation with abnormal sonographic findings suggesting hydatidiform mole and coexisting fetus. Follow-up was done with sonography, and further work-up was done including karyotyping of both placenta and fetus, and quantitative analysis of maternal and paternal chromosomal marker in dysplastic villi. Pathologic examination of placenta and liver of stillborn fetus were performed after delivery.
Results: Sonograhic findings on 27 weeks gestation showed heterogeneous thickening of placenta suggesting molar change and septated cystic masses in fetal abdominal cavity suggesting bilateral ovarian cysts. Both chorionic villous sampling and amniocentesis revealed a normal female karyotype (46,XX). There was allelic imbalance in the dysplastic villi, with a 2-3 times excess paternally imprinted alleles, which is consistent with androgenetic/biparental mosaicism. The placenta was enlarged (1180g) and showed ectatic, tortous vessels on chorionic plate and patchy distribution of hydropic villi in a background of normal-appearing villous tissue. Microscopic examination demonstrated edematous villi with stromal overgrowth, numerous vessels in stem villi, and no trophoblastic proliferation. The cystic mass in fetal abdomen was a cystic mass of liver showing cystic wall composed of loose, myxoid stroma with scattered bile ductules blending into atrophic liver tissue.
Conclusion: This is a rare case of PMD associated with HMH confirmed by characteristic pathologic findings and molecular study of the dysplastic villous tissue showing disomy with androgenetic/biparental mosaicism.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 024 Date 15.10.2018 & 16.10.2018	Breast pathology	Niu, Yun Cancer Hospital, Medical Uni . Tianjin China	Poster	Liu, Xiaozhen Liu, Jing

ABSRACT TITLE:

Clinical pathological features of 99 cases with solid papillary carcinoma of breast

ABSTRACT TEXT

Objective: To explore the clinical pathological features of solid papillary carcinoma（SP）of breast, to better understand the distinctive type of breast cancer.
Methods: Ninety-nine cases with SPC of breast, which were diagnosed during January 1, 2016 and December 31, 2017, were collected from Tianjin Medical University Cancer Hospital. The myopepithelial markers, neuroendocrine, cytokeratin, and hormone-receptors were detected by immunohistochemistry. All cases could be divided into SPC in situ, SPC with expansile invasion, invasive SPC, SPC in situ with microinvasion, and SPC with slight invasive carcinoma-no special type(IC-NOS).
Results: All patients were female and the median-age was 63 years-old (range 29-82 years). 20.2% patients were <50 years-old, 41.41% ranged 50-65 years-old, 38.38% were >65 years-old. There were 18 (18.18%), 32 (32.32%), 25 (25.25%), and 5 (5.05%) tumors of ≤1cm, ≤2cm, 2cm~≤5cm, and >5cm, respectively. All tumors of >5cm were SPC with slight IC-NOS. Nearly 50% of cases (papillary fronds) still retain a few of myopepithelial cells, but CK56(-), ER(+) strong and diffuse. 82.69% (43/52) of tumors had neuroendocrine features, that was at least 1/3 markers (syn, CgA, CD56) were positive. Only 8 tumors were luminal-B subtype, and the other 91 were luminal-A subtype. Twenty-one, 18, 16, 13 and 31 cases were classified as SPC in situ, SPC with expansile invasion, invasive SPC, SPC in situ with microinvasion, and SPC with slight IC-NOS, respectively. The 11 cases of lymph-node metastasis were SPC with slight IC-NOS.
Conclusion: SPC of breast is common occurred in the elderly, but it is also alert to young-old people or young and middle-aged. The absence of myoepithelial layer is not necessary for the pathological diagnosis, but tumors with neuroendocrine features can help to diagnose. For pure SPC, conservative surgery and endocrine therapy are suggested; for SPC with slight IC-NOS, more active treatments should be carried-out.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 024 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Phillips, Adekoyejo Abiodun Clinix Healthcare Histopathology Lagos Nigeria	Poster	Louw, Melanie

ABSTRACT TITLE:

Prognostic significance of PHH3, KI-67 and BCL-2 in prostate cancer

ABSTRACT TEXT

Objective: One of the strongest predictor of prognosis in prostate cancer is the Gleason score. One major challenge of the Gleason score is reproducibility especially among young pathologists. The use of biomarkers, as an adjuvant prognostic tool, could help ameliorate this challenge. The aim of this research is to determine the prognostic significance of Ki-67, PHH3 and Bcl-2 in prostate cancer.
Methods: This is a retrospective study that was done on prostatic cancer specimens diagnosed in 2014. The tumours were assigned to International Society of Urological Pathology grade groups and the proliferative index of the tumours was assessed with Ki-67 and PHH3, and the apoptotic index was assessed with Bcl-2. The association between ISUP grade groups and the proliferative index and apoptotic index was determined with using Pearson's chi square. Also the association between the proliferative index and apoptotic index was determined with Spearman's correlation
Results: Thirty-three cases were used in this study, the 60 – 69 age group was the most affected age group and mean age at presentation was 64.7 years (Figure 1). Most of the tumours were ISUP grade group 1tumours. The proliferative markers, Ki-67 and PHH3, showed statistically significant correlation with the ISUP grade group with a p-value of 0.012 and 0,0003 respectively (Table 1). Similarly, Bcl-2 showed statistically significant correlation with ISUP grade group with a p-value of 0.027. The Spearrman's rho between Ki-67 and Bcl-2 was 0.6859, and the Spearman's rho between PHH-3 and Ki-67 was 0.7096 (Figure 2).
Conclusion: Ki-67, PHH3 and Bcl-2 biomarkers are of prognostic significance in prostate cancer. However, there is a need for a consensus meeting on the cut-off values for these biomarkers before they can be introduced into clinical practice.
PLEASE NOTE THAT THIS ABSTRACT IS FOR AN IAP BURSARY APPLICATION
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 024 Date 15.10.2018 & 16.10.2018	Cytopathology	Salillas, Annette .L GCGMH Tagbilaran City Philippines	Poster	Chatto, Joseph Antoine F.

ABSTRACT TITLE:

A case-based approach to aggressive variants of papillary thyroid carcinoma

ABSTRACT TEXT

Objective: To recognize pre-operatively by Fine Needle Aspiration Biopsy (FNAB) the variants of Papillary Thyroid Carcinoma (PTC) with greater potential for aggression and poor clinical outcome.
Methods: GCGMH Pathology Department sought to present three cases of aggressive variants of PTC. FNAB and histopathologic slides, as well as patient records were retrieved and reviewed.
Results: First case,44-year-old female with subclinical hypothyroidism diagnosed by FNAB before surgery as PTC,tall-cell variant(TCVPTC) and confirmed histologically.
Second case,54-year-old female, euthyroid, asymptomatic with columnar-cell variant(CCVPTC) diagnosed on tissue biopsy revealed papillae lined by pseudostratified columnar cells. FNAB showed colloid goiter with hyperplastic change, papillary carcinoma not ruled out. The smears were reviewed exhibiting pseudostratified elongated cells with pleomorphic nuclei and few nuclear features of PTC.
Third case,57-year-old euthyroid female with Hobnail Variant(HVPTC). Histosections revealed greater than 30% of malignant cells with hobnail features forming micropapillary structures without fibrovascular cores. FNA findings of follicular neoplasm in a background of colloid goiter was previously rendered. Review of smears showed medium sized thyroid follicular cells in micropapillary and microfollicular structures. Dispersed single cells with distinct "tear drop" cytoplasm and apically placed nuclei producing a surface bulge leading to a "comet cell" appearance were noted.
Partial lobectomy was done in the first and second cases. Tumor recurrence within one year after surgery was noted in the first patient while no recurrence one year post-op was reported in the second case. Third patient underwent total thyroidectomy but was lost to follow-up.
Conclusion: PTC variants such as tall cell, columnar cell and hobnail are important to identify because they frequently pursue aggressive clinical course than classical PTC. Recognizing these variants pre-operatively by FNAB is an important tool for planning a more aggressive management and close follow-up for recurrence. Various literatures recommend total thyroidectomy with central neck dissection followed by RAI ablation of residual tissue.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Samaka, Rehab Menoufia University, Menoufia Dept. of Pathology Shebin Elkom Egypt	Poster	Sabry, Lamia Eldib, Karim
Abstract No. 024				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Malakoplakia of gall bladder: A case report and review of literature

ABSTRACT TEXT

Objective: Malakoplakia (MP) is a rare granulomatous disorder that results from phagolysosomal defect, mostly involving urinary tract. Malakoplakia in gall bladder (GB) is extremely rare; comprehensive search revealed only 8 case reports. Malakoplakia clinically mimics other lesions like xanthogranulomatous cholecystitis and GB carcinoma.
Therefore, recognition of MP in GB is important for surgeons and histopathologists, in order to set a proper plan for management and avoid unnecessary extensive surgery.
Methods: Case presentation:
A 65 year-old non-diabetic female patient, presented with upper abdominal discomfort. Abdominal examination showed palpable non-tender mass in the right hypochondrium. Laboratory investigations were normal. Abdominal ultrasonography revealed GB stones and contracted GB with extensive wall thickening.
Clinically, GB carcinoma was suspected. Open cholecystectomy was performed and GB specimen was referred to histopathological examination.
The patient's postoperative period was non-eventful.
Review:
This study presents a review about MP in GB regarding etiopathogenesis, presentation, histopathological detection and management plan.
Results: Grossly, GB specimen was measured 10x6x4 cm with firm greyish thickened wall. Dissection showed greenish velvety mucosa with ulceration. No masses were detected. Three blackish stones were also received.
Hematoxylin and eosin (H&E) sections revealed thickened wall with subtotally denuded mucosal lining. The pathognomonic features of MP, Michaelis-Gutmann bodies; sheets of foamy macrophages with rounded, concentrically layered intracytoplasmic inclusions were detected.
Rokitansky-Aschoff sinus was also noted. There was no evidence of granuloma, polyps, dysplasia or malignancy.
The characteristic Michaelis-Gutmann bodies were stained positively for periodic acid-Schiff (PAS) stain. Immunostaining showed high expression of CD68 in histiocytes.
Conclusion: Diagnosis of MP presenting as GB wall thickness is a diagnostic dilemma faced by surgeons, radiologists and pathologists.
The conclusion of this case report is to stress upon keeping MP in mind as a potential differential diagnosis for GB carcinoma and granulomatous cholecystitis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25	Soft tissue pathology	Sassi, Asma Salah Azaiez Institute Tunis Tunisia	Poster	Boujelbene, Nadia Benna, Mehdi Chafri, Lamia Abbes, Imen Doghri, Raoudha Mrad, Karima Driss, Maha
Abstract No. 024				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Myxoinflammatory fibroblastic sarcoma: Diagnostic difficulties in biopsy specimens

ABSTRACT TEXT

Objective: Pathological diagnosis of sarcomas is a multistep process, beginning with morphology by a pattern-based approach, immunohistochemistry and molecular analysis. In biopsies, an accurate diagnosis can be difficult to make and misdiagnosed as infectious, inflammatory conditions and other neoplastic entities. We report an example illustrating diagnostic difficulties of sarcomas in biopsy specimens.
Methods: A 68-year-old male patient presented with a slowly growing lesion of the right leg. The patient reported a preceding trauma. This lesion measured 7.5 cm in maximum dimension and was infiltrative with ill-defined borders. MRI displayed contact with cortical bone of the tibia. A first cutaneous biopsy was performed and histologically consistent with an eosinophilic granuloma. The patient had specific treatment without improvement. The patient was then scheduled for a large excision of the lesion after a second diagnosis of a low-grade fibromyxoid sarcoma was made.
Results: Histologically, the tumor was lobulated with intermixed myxoid and inflammatory/fibroblastic areas. Myxoid areas contained pseudolipoblasts. Fibroblastic areas displayed spindle cells with mild to severe cytonuclear atypia and abnormal mitoses. Some cells were reed-sternberg-like. These areas were rich in eosinophils. Molecular analysis identified a t(1;10) consistent with a myxoinflammatory fibroblastic sarcoma (MIFS). The patient undertook a chemotherapy protocol based on doxorubicin with a favorable clinical outcome.
Conclusion: Our case highlights diagnostic difficulties of MIFS on biopsy. If myxoid areas are dominant, it can be misdiagnosed as myxofibrosarcoma or low-grade fibromyxoid sarcoma. When dominated by inflammatory cells, it can mimic inflammatory conditions or Langerhans Cell Histiocytosis. Pathological findings must be correlated with clinical and imaging features.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Stárek, Ivo Palacky University Czech Republic	Poster	Salzman, Richard Louw, Melanie
Abstract No. 024				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Comparison of lymphatic vessel density and expression of VEGF-C and VEGF-D lymphangiogenic factors in Warthin´s tumours and oncocytic adenomas

ABSTRACT TEXT

Objective: To compare density of lymphatic vessels and expression of VEGF-C and VEGF-D in Warthin´s tumours (WTs) and oncocytic adenomas (OCAs).
Methods: Twenty three WTs and 13 OCAs of the parotid gland were analyzed. Lymphatic vessels were detected using D2-40 antibody. For evaluation of both the intratumoral and peritumoral lymphatic vessel density (iLVD and pLVD, respectively) area of highest vascularization (hot spots) was chosen, using a ×40 field, and the number of vessels per square millimeter was counted in a ×200 field. The staining intensity for VEGF-C and VEGF-D immunoreaction in the tumour cells was graded from 0 to 3.
Results: The mean iLVD and pLVD values in WTs made 4,7 (range 1 - 8) and 6,9 (range 3-10), those in OCAs 1,0 (range 0-3) and 5,8 (range 2-8), respectively. The differences in the iLVD, but not pLVD between these two tumours groups bore very strong statistical relevance. In both entities, the pLVD markedly outnumbered the iLVD. The intratumoral vessels in the WTs were present exclusively in the lymphoid stroma.
In the group of 23 WTs, 13 (56,6%), 17 (73,9%) and 10 (43,4%) samples revealed positive VEGF-C, VEGF-D and both immunoreactions, respectively.10 of 13 (77%) cases revealed VEGF-D immunoreaction and in none of them VEGF-C reaction was present.
Conclusion: Both tested tumours reveal comparable high density of peritumoral lymphatic network. However, WTs markedly differ from OCAs in the number of the intratumoral vessels. These are abundant solely in the stroma of WT, while practically lacking and relatively rare in the neoplastic epithelium of the WT and OCA, respectively. We suggest that homeostasis in both entities is mediated mainly by peritumoral lymphatics. The lymphatic drainage in WTs is also fostered exclusively by stromal lymphatics, whereas in strongly stroma poor OCAs by the vessels present in their neoplastic epithelium. We also believe that WTs stimulate proliferation of pre-existing lymphatic capillaries by means of the paracrine secretion of VEGF-C and VEGF-D in the neoplastic as well as reactive stromal cells, while in the OCAs only the latter factor takes part in their lymphangiogenesis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Wadee, Reubina University of Witwatersrand Dept. of Anatomical Pathology Johannesburg South Africa	Poster	
Abstract No. 024				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Diffuse large b-cell lymphoma of the endometrium: An unusual site for primary presentation

ABSTRACT TEXT

Objective: Diffuse large B-cell lymphomas are fairly common adult haematolymphoid malignancies. Approximately 40% of such tumours may present in an extranodal site. These lymphomas are however, infrequently identified in the female genital tract and even more rarely; are identified in the endometrium. The histopathological features and molecular findings of endometrial diffuse large B-cell lymphoma are discussed herein.
Methods: A 36 year old female presented with per vaginal bleeding. She underwent an endometrial curettage, which was submitted for histopathological evaluation.
Results: The endometrial curettage demonstrated morphological and immunophenotypical features of a diffuse large B-cell lymphoma. Amplification of the immunoglobulin heavy chain (IgH) gene by Polymerase Chain Reaction (PCR) confirmed B-cell clonality. Unfortunately, the patient did not return for her follow-up examination and was lost to follow-up.
Conclusion: Whilst diffuse large B-cell lymphoma is not a commonly identified tumour within the uterine cavity, it should be included in the differential diagnosis of endometrial neoplastic infiltrates so as not to misdiagnose this malignancy. This facilitates rapid commencement of further management for the patient.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 025 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Koulia, Kalliroi Tzaneio General Hospital Piraeus Greece	Poster	Tsavari, Aikaterini Arkoumani, Elissavet Niforou, Martha Zizi-Sermpetzoglou, Adamantia

ABSTRACT TITLE:

Large cell neuroendocrine carcinoma of the rectum

ABSTRACT TEXT

Objective: Colonic large-cell neuroendocrine carcinoma(LCNET) is a rare type of cancer that, has an aggressive behaviour and a dismal prognosis. LCNET has recently been introducedand has been described in different locations,. The first study that introduced the term "large-cell neuroendocrine carcinoma" was by Bernick and colleagues. In his series, 0.6% of patients with colorectal cancer were affected by neuroendocrine carcinomas and 0.2% were large-cell neuroendocrine carcinomas.
Methods: A 59-year-old gentleman presented with a history of pelvic discomfort and bleeding per rectum. Per-rectal examination confirmed a large obstructing tumor in the lower rectum. Imaging (CT chest/abdomen/pelvis) confirmed a large rectal mass with multiple enlarged perirectal and mesorectal lymph nodes.Followed left colectomy which revealed a ulcerated and partially obstructing rectal mass located 6 cm from the anal verge.
Results: The rectal biopsy demonstrated a poorly differentiated malignant tumor with surface ulceration. Immunohistochemistry revealed that tumor cells were negative for cytokeratin, LCA and S100 but positive for CD56 and chromogranin, consistent with a diagnosis of large cell neuroendocrine carcinoma.A total of 24 local regional lymph nodes were resected of which 17 were found to be involved.Staging CT scan and bone scan excluded any metastatic spread beyond the pelvis. The patient was treated with a combination of chemotherapy and radiotherapy.
Conclusion: Colonic large-cell neuroendocrine carcinomas are rare and aggressive tumors. Most are located in the cecum or the rectum, are metastatic at presentation, and have a poor prognosis with median overall survival reported to be 10.4 months While surgical resection is the primary treatment modality, the benefit of chemo- or radiation therapy, as used for conventional colorectal adenocarcinomas, has not been established for colonic LCNET Thus further studies are needed to determine the molecular genetics of these rare tumors and define the optimal systemic and local therapies.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 025 Date 15.10.2018 & 16.10.2018	Breast pathology	Njima, Manel Fattouma Bourguiba Hospital Dept. of Pathology Sousse Tunisia	Poster	Chouchane, Sarah Ben Abdeljelil, Nouha Hadhri, Rim Hamdani, Moez Zakhama, Abdelfattah

ABSRACT TITLE:

Mucinous carcinoma in a male breast: A report of a case

ABSTRACT TEXT

Objective: Male breast cancer is an uncommon neoplasm. Mucinous carcinoma is an extremely rare histological subtype representing less than 1% of male breast cancers. In the present study, we report a case of mucinous carcinoma of the male breast and discuss the clinicopathological features of this type of tumor
Methods: Here in we report a case of mucinous carcinoma of the male breast diagnosed in our Pathology department of the University Hospital of Monastir
Results: A 70-year-old male presented with a gradually enlarged hard retroareolar nodule in the right breast. Ultrasonography of the breast showed an ill-defined hypoechoic lesion with ill-defined margins in the right retroareolar region measuring 1 cm with fine microcalcifications. The resected breast specimen revealed pure mucinous carcinoma and immunohistochemical analyses demonstrated that tumor cells were positive for progesterone receptor (PR), but negative for estrogen receptor (ER). In addition, HER2 expression was not amplified
Conclusion: Pure mucinous carcinoma of the male breast is an extremely rare entity. It should be recognized and managed timely, as delays in diagnosis play a role in the generally more advanced presentation of male breast cancer. The pathogenesis of male breast carcinoma, including mucinous carcinoma, remains unclear and additional clinicopathological studies are required
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 025 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Petrushevska, Gordana Faculty of Medicine Dept. of of Pathology Skopje Macedonia	Poster	Kostadinova Kunovska, Slavica Aluloski, Igor Jovanovic, Rubens Janevska, Vesna Tanturovski, Mile Veljanoska, Slavica

ABSTRACT TITLE:

Immunohistochemical analysis of beta-catenin in high grade ovarian serous carcinoma

ABSTRACT TEXT

Objective: The aberrant activation of Wnt/β-catenin pathway has important role in carcinogenesis and cancer progression. We aimed to evaluate the expression of β-catenin in high grade ovarian serous carcinomas (HGOSC) of advanced stage.
Methods: We analysed immunohistochemical expression of β-catenin and compared it to multiple clinicopathological data and overall survival in 76 cases of HGOSC in advanced stage (FIGO III-IV). Presence and distribution of signal (membranous, cytoplasmic or nuclear), percentage of positive tumor cells and intensity of staining (mild, moderate and strong) were evaluated.
Results: The mean age of the patients was 58,74 years (24-78), with the majority (56,6%) in stage IIIC, 28,9% in stage IIIB, 10,5% in stage IIIA and 3,9% in stage IV. The mean post-operative survival period was 35,36 months (1-90 months). Immunohistochemical analyses showed expression of β-catenin in all analysed cases, mostly with membranous (55,3%) or cytoplasmic localisation (40,8%), while nuclear positivity was observed only in 3 cases (3,9%). In the majority of cases (61,8%), more than 50% of the tumor cells were positive, in 32,9% positive signal was seen in 5-50% of the tumor cells, and only in 4 cases (3,9%) less than 5% of the cells were positive. We observed heterogeneous intensity of the signal, with dominant strong signal in most of the cases (69,7%), moderate in 28,9% cases and mild signal intensity in only 1 case (1,3%). The statistical analysis showed that both strong intensity of signal and higher percentage of positive tumor cells were associated with better overall survival in patients ($p<0.001$). The localisation of the signal in cellular structures did not prove to be of statistical significance.
Conclusion: The study shows that expression of β-catenin in higher percentage of tumor cells, and stronger intensity of signal in HGOSC are associated to favourable prognosis, making it a potential prognostic marker.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-25 Abstract No. 025 Date 17.10.2018 & 18.10.2018	Soft tissue pathology	Provatas, Ioannis Evangelismos Athens Greece	Poster	Ignatiadou, Eleftheria Trihia, Helen

ABSRACT TITLE:

Silicone lymphadenopathy. An unexpected cause of contralateral axillary lymph node enlargement in a woman with silent silicone breast implant rupture

ABSTRACT TEXT

Objective: Silicone lymphadenopathy is a recognized complication of breast augmentation. It occurs when silicone droplets migrate from breast implants to lymph nodes. We report a rare case of silicone lymphadenopathy affecting the contralateral axillary lymph nodes in a woman with a history of left breast mastectomy and axillary lymph node dissection, 30 years earlier.
Methods: A 60-year old woman with a history of breast cancer of her left breast, was diagnosed with lymph node enlargement of her right axilla. An excision biopsy of the two larger lymph nodes was performed, to rule out malignancy.
Results: The specimen consisted of two fibro-fatty fragments, which included two lymph nodes of 1,3cm and 3,5cm larger dimension. Both of them demonstrated diffuse follicular hyperplasia with interspersed foamy histiocytes with clear, vacuolated cytoplasm and foreign type giant cells. From the woman's history, the carcinoma was an invasive moderately differentiated ductal carcinoma, with 26 disease free ipsilateral axillary lymph nodes.
Conclusion: Axillary lymphadenopathy in any patient with a history of breast cancer should raise concern for recurrence and prompt evaluation to avoid delays in diagnosis. Migration of silicone is not always limited to the corresponding axillary lymph nodes. It can also affect the contralateral axillary lymph nodes. Our case report adds to a growing awareness of this phenomenon and emphasizes the need for continued vigilance for signs and symptoms of migration despite a silent implant rupture.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Rahawarin, Halidah Hasanuddin University Dept. of Pathology Makassar Indonesia	Poster	Cangara, Muhammad Husni Miskad, Upik Andriani
Abstract No. 025				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Usefulness of triple antibody cocktail immunostaining (cytokeratin 5/14, p63 and alpha-methylacyl-coA racemase) in diagnosis of benign prostate hyperplasia, high grade prostatic intraepithelial neoplasia and prostate adenocarcinoma

ABSTRACT TEXT

Objective: Diagnosis of prostatic lesion using routine HE staining can be challenging. Immunohistochemistry is needed to confirm the diagnosis. This study aimed to evaluate the usefulness of triple cocktail immunostaining (cytokeratin 5/14, p63 and α-methylacyl-coA racemase) in differentiating benign prostate hyperplasia (BPH), prostatic intraepithelial neoplasia (HGPIN) and prostate adenocarcinoma.
Methods: A total sample of 97 prostate specimens were grouped as BPH (34), HGPIN (32) and prostate adenocarcinoma (31). Dual-color triple antibody cocktail against basal cell markers (cytokeratin 5/14, p63) and α-methylacyl-coA racemase (AMACR) were performed. Basal cell markers expression were scored semi-quantitatively as linear, nonlinear and negative expression. AMACR expression was scored as negative and positive expression.
Results: Linear expression of basal cell marker (CK5/14 and p63) without AMACR expression were found in all BPH and 9.4% (3/32) of HGPIN. Nonlinear expression of basal cell marker without AMACR expression were found in 3% (1/32) of HGPIN. Nonlinear expression of basal cell marker with AMACR expression were found in 87.5% (28/32) of HGPIN. All prostate adenocarcinoma showed AMACR expression without basal cell markers expression. Change of diagnosis were seen in 4 of 97 cases (4.1%) from HGPIN to BPH after immunostaining.
Conclusion: Triple antibody cocktail immunostaining is useful to confirm HE staining and differentiate BPH, HGPIN and prostate adenocarcinoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Saliba, Maelle American University of Beirut Dept. of Pathology Beirut Lebanon	Poster	Shabb, Nina S.
Abstract No. 025				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Cytologic approach to the diagnosis of solid pseudopapillary neoplasm of the pancreas: An institution's experience

ABSTRACT TEXT

Objective: Solid pseudopapillary neoplasm (SPN) is a rare pancreatic tumor with a predilection to young female patients. The objective of the current study is to relay our institution's experience with the preoperative diagnosis of SPN by endoscopic ultrasound-guided fine needle aspiration (EUS-FNA) and to assess its value in distinguishing between SPN and other pancreatic tumors.
Methods: A retrospective review of our archives (1996--2018) was performed to designate patients with confirmed SPN that underwent EUS-FNA. Collected variables included age, gender, clinical history, location, and imaging characteristics of the mass. Cytology smears were reviewed and cytomorphologic features were examined. When applicable, immunohistochemical staining of the corresponding cell blocks was assessed.
Results: A total of twelve cases were reviewed. Patient age ranged from 11 to 59 years and averaged 30.5 years (SD 15.6 years). Female patients constituted 88.9% of all cases. SPN was a primary clinical and/or radiologic consideration in 55.6% of cases, with the differential diagnosis encompassing neuroendocrine tumors, intraductal papillary mucinous neoplasms, serous and mucinous cystadenomas. The mass was most commonly located in the head of the pancreas (58.3%). Preoperative cytologic diagnosis at endoscopy was highly sensitive, as illustrated by a 66.7% sensitivity, all cases included, and 88.9% sensitivity after removal of non-diagnostic cases. Only one case (8.3%) was misinterpreted as a low-grade adenocarcinoma. Redundant cytologic features were those of cellular smears showing delicate papillary arrangements, hyaline globules, bland nuclear features, and occasional nuclear grooves. Immunohistochemical studies showed positivity for beta-catenin (nuclear and cytoplasmic), CD10 and vimentin in all evaluated cases.
Conclusion: Our experience shows that cytomorphologic features are reliable in the diagnosis of SPN. Immunohistochemical staining for beta-catenin, CD10 and vimentin, when available, has additional confirmatory value. Thus, EUS-FNA is a reliable preoperative means of diagnosing SPN, especially in the context of a young female patient for whom conservative management is preferred.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03	Cytopathology	Shafique, Khurram University Hospital of Pennsylvania Dept. of Cytopathology Philadelphia USA	Poster	Baloch, Zubair
Abstract No. 025				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

The impact of noninvasive follicular thyroid neoplasm with papillary-like features (NIFTP) on the diagnostic rate of atypia of undetermined significance / follicular lesion of undetermined significance: An institutional experience

ABSTRACT TEXT

Objective: Atypia of undetermined significance (AUS) and Follicular lesion of undetermined significance (FLUS) are the indeterminate diagnostic categories of "The Bethesda System for Reporting Thyroid Cytopathology (TBSRTC)" and have been reported to range from 3% to 27% of all thyroid fine needle aspirations(FNAs). In April 2016, a name change of non-invasive encapsulated follicular variant of papillary thyroid carcinoma (EFVPTC) to noninvasive follicular thyroid neoplasm with papillary-like nuclear features (NIFTP) occurred, to avoid overtreatment of this low-risk malignant thyroid neoplasm. In this study we evaluated if this change in terminology has caused an appreciable impact on our rates of AUS / FLUS and other indeterminate diagnostic categories of TBSRTC.
Methods: The study cohort consisted of all primary thyroid FNA cases assessed at the Hospital of University of Pennsylvania (HUP) between January 2015 and Dec 2017. The cases were divided into two groups: "pre and post-NIFTP", comprising of cases that were assessed between 01/01/ 2015 and 04/30/2015 and those between 05/01/ 2016 and 12/31/ 2017 respectively. Patient demographics, cytologic diagnoses with follow-up were recorded for all cases.
Results: The results are illustrated in the table 1.
Conclusion: At our institution, introduction of NIFTP diagnosis has not caused a statistically significant change in the diagnostic rates of AUS/FLUS and other indeterminate diagnostic categories of TBSRTC.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Sherpa, Palzum Patan Hospital Dept. of Pathology Lalitpur Nepal	Poster	
Abstract No. 025				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Co-existence of diffuse large b cell lymphoma and tuberculosis in cervical lymph node

ABSTRACT TEXT

Methods: This study was performed in Department of Pathology, Patan hospital.
Results: A 50 year female presented with multiple right cervical lymphadenopathy, on and off fever and weight loss since 2 months. FNAC done from right cervical lymph node showed reactive lymphadenitis. Due to persistence of lymphadenopathy, FNAC was repeated. Smears showed epithelioid granulomas and necrosis with mixed population of lymphoid cells. Acid fast bacilli was not identified on Ziehl Neelsen stain. FNAC was reported as tubercular lymphadenitis. She received anti-tubercular therapy for 6 months and had good compliance with the drug regimen. However, there was no improvement and 5 months after she was on therapy, she developed enlarged right axillary lymph node. Excisional biopsy of cervical lymph node was done which showed complete effacement of architecture with multiple epithelioid granulomas and Langhan's type multinucleated giant cells. Necrosis was not seen and acid fast bacilli was negative. At some foci, sheets of intermediate to large sized atypical lymphoid cells with 1-2 nucleoli and perinodal infiltration was seen. Based on these findings a diagnosis of Non Hodgkin lymphoma with granulomatous lymphadenitis was made. Immunohistochemistry report showed high grade B cell Non Hodgkin lymphoma favouring Diffuse large B cell lymphoma. Patient has completed 2nd cycle of chemotherapy and lymph nodes have markedly reduced in size.
Conclusion: The possibility of co-existence of lymphoma in patients with tuberculosis should be remembered in cases where there is no improvement following proper treatment. Biopsy of lymph node is recommended to rule out dual pathology and achieve early diagnosis and treatment of both the pathologies.
Policy of full disclosure: This abstract is for an IAP bursary application.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Wang, Jun	Poster	Wang, Tiannan Liu, Yan Greas, Michael Zuppan, Craig Rowsell, Edward
Abstract No. 025		Loma Linda University Dep. ot Pathology Loma Linda USA		
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Blastic plasmacytoid dendritic cell neoplasm presenting as general lymphadenopathy in a 23-year-old male

ABSTRACT TEXT

Objective: Previously known as "Blastic NK-cell leukemia/lymphoma" or "Agranular CD4+/CD56+ hematodermic neoplasm/tumor", blastic plasmacytoid dendritic cell neoplasm (BPDCN) is a rare, indolent but clinically aggressive hematologic malignancy derived from the precursors of plasmacytoid dendritic cells. It is currently included with the myeloid neoplasms in the 2017 WHO classification. BPDCN typically presents in the skin of elderly patients with a mean/median age of 61-67 years at diagnosis, with or without marrow involvement and systemic dissemination. Herein, we report a diagnostically challenging presentation of BPDCN in a young male who initially presented with generalized lymphadenopathy and pancytopenia.
Methods: A 23-year-old Hispanic male presented with easy bruising, pancytopenia and recent B symptoms along with a two-year history of a nontender brownish left anterior pretibial mass. CT scan showed diffuse lymphadenopathy involving the inguinal, mesenteric, retroperitoneal, mediastinal and axillary regions. A needle core biopsy of the left axillary lymph node was performed.
Results: Histologic examination revealed a diffuse monomorphic infiltrate of intermediate-sized blastoid cells with irregular nuclei contours, fine chromatin and scanty agranular cytoplasm, completely effacing the nodal architecture. The tumor cells were characteristically positive for CD45, CD4, CD123, TCL1, and variably positive for CD56 and TdT, but lacked other T, B cell or myeloid markers. A diagnosis of BPDCN was made. Subsequent skin biopsy from the pretibial mass, and bone marrow biopsy, revealed a similar diffuse blastoid infiltrate with an identical immunophenotype to that in the lymph node.
Conclusion: BPDCN is a rare, often diagnostically challenging entity, particularly when presenting at non-cutaneous sites and in unusual (young) patient populations. It is important to include BPDCN in the differential diagnosis of immunophenotypically aberrant hematological tumors. Judicious use of appropriate immunophenotypic markers such as CD123, CD4, CD56, and TCL1 is critical to avoid missing the diagnosis of this aggressive condition.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Koulia, Kalliroi	Poster	Tsavari, Aikaterini Arkoumani, Elissavet Manoloudaki, Kassiani Vasilakaki, Thivi
Abstract No. 026		Tzaneio General Hospital Piraeus Greece		
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Coexistent squamous cell carcinoma and adenocarcinoma of the uterine cervix

ABSTRACT TEXT

Objective: The simultaneous occurrence of squamous cell carcinoma and adenocarcinoma of the uterine cervix has been reported although this combination is very rare.The histogenesis of these carcinomas remains unknown but many authors believe that these arise from the multipotential cells of the transformation zone.
Methods: A 62 year old woman underwent hysterectomy and bilateral salpigo-oophorectomy after curettage she had done which showed areas of squamous cell carcinoma of the cervix.Microscopically the cervix was erosive and in the endocervix revealed an ulcer measuring 2,3cm. in greatest diameter.
Results: Microscopically study from the ulcer showed morphologic and immunohostochemical characteristics [P16(+),Vimentin(-),CEA(+),ER(-),PR(-),S100p(-),Synaptofysin(-)] that confirmed a diagnosis of endocervical adenocarcinoma.Microscopically study from the area of erosion showed invasive squamous cell carcinoma accompanied by foci of SCC in situ. In immunohistochemical study the lesional cells were positive for CK5/6,P63 and P16.
Conclusion: The simultaneous occurrence of squamous cell carcinoma and adenocarcinoma of the uterine cervix is very rare and first reported in 1957.Treatment is conventional and the prognosis is not worsened by the present of the two types of neoplasms.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Lange, Dariusz	Poster	Stanek-Widera, Agata Biskup-Fruzynska, Magdalena
Abstract No. 026		Poland		
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Quantitative morphometry of colorectal cancer vascularity

ABSTRACT TEXT

Objective: Multifactor morphometric evaluation of vascular network in colorectal cancer primary tumor to identify and assess prognostic factors and markers of metastatic potential in untreated patients.
Methods: Samples of tumors from 80 cases of untreated colorectal cancer in stage pT1-pT4 were used as material for immunohistochemical assays. Morphometric parameters of vessels (density, average surface area, perimeter, elongation ratio, compactness and fullness) were estimated by Factor VIII and Podoplanin stains in tumors with metastases versus those without metastases. Vessels characteristics assessed using Factor VIII staining were compared with Podoplanin estimates and correlated with T and N stage
Results: The study shows that average density of lymphatic vessels in colorectal carcinoma is substantially higher in cases with nodal metastases and suggests that the intensity of lymphangiogenesis in colorectal cancer can be considered a negative prognostic factor. The examined vessel shape factors showed statistically significant differences between study groups. It may reflect deformation of lymphatic vessels in cases with metastasis. Also, it indicates the possibility of using the discussed morphometric features as prognostic factors.
Conclusion: Present study shows that Podoplanin assay provides more precise and significant estimates of vascular morphometric parameters than Factor VIII and therefore is recommended for further studies. Tumor vascularity characteristics of colorectal cancer might be used as prognostic factors in combined treatment strategy planning and in treatment outcomes. Studies in this field are in progress
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Provatas, Ioannis Trihia, Helen	Poster	Novkovic, Natasa Lianos, Evangelos
Abstract No. 026		Evangelismos Athens Greece		
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Primary alveolar rhabdomyosarcoma of the breast in an adult. An extremely rare case

ABSTRACT TEXT

Objective: Sarcomas of the breast constitute less than 1% of all malignant breast tumors and primary rhabdomyosarcoma (RMS) is a very rare entity with limited case reports in the literature. RMS is common in children and adolescents and rare in adults. Primary RMS arising from the breast is uncommon. We report a case of a primary RMS of the breast, mimicking invasive ductal carcinoma clinically.
Methods: A 60-year old woman was diagnosed with a radiologic circumscribed density of her left breast, during her regular follow up.
Results: A 22,5X17X5cm mastectomy specimen and sentinel lymph node biopsy were performed. On gross examination, serial sectioning revealed an enlarged solid, well circumscribed lobulated tumor, measuring 4,8X4X3,8cm, with central necrosis. Microscopically, a high grade small-intermediate round cell tumor was diagnosed. Staining for desmin, myogenin, myoD1 confirmed the diagnosis of alveolar rhabdomyosarcoma. After the exclusion of secondary origin, the woman was treated with chemotherapy based on Intermediate risk-good prognosis Alveolar group I-III. The patient was given 14 cycles of second-line chemotherapy with vincristine, dactinomycin and endoxan (VAC). The patient is disease free at the follow-up of 16 months from the completion of treatment.
Conclusion: RMS of the breast is an aggressive malignancy. It may be due to muscle cell forming cell or it may due to mesenchymal progenitor cell which are committed to myogenic lineage. Although very rare has to be thought of as one of differential diagnoses, particularly in adolescent females. Histopathology proved the only means for the correct diagnosis and formulating treatment plan.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18 Abstract No. 026 Date 17.10.2018 & 18.10.2018	Genitourinary pathology	Regragui, Meriem Ibn Rochd Pathology Casablanca Morocco	Poster	Ridai, Sara Benayad, Samira Bennani Guebessi, Nisrine Marnissi, Farida Jouhadi, Hassan Karkouri, Mehdi

ABSTRACT TITLE:
An unusual prostatic carcinoma

ABSTRACT TEXT

Objective: Basal cell carcinoma is a rare primitive prostatic neoplasm with a potential aggressive behavior.
Methods: We report the case of a 40 years old man who presented micturition disorders. Clinical examination found an enlarged and slightly indurated prostate. Serum PSA levelwas normal. Pelvic sonography revealed an enlarged prostate with important post-void residual urine.Histopathological examination of transurethral resection specimen showed morphological features of an adenoid cystic carcinoma. Immunochemistry confirmed the diagnosis: basal cells expressed p63 while luminal cells were cytokeratin 7 positive. PSA and racemase were negative. Extension work-up made by CT scan and MRI showed invasion of the prostatic capsule, the bladder base and the right seminal vesicle. The patient received radiation therapy with poor response after 6 months of treatment.
Results: Basal cell carcinoma is a primitive malignancy composed of prostatic basal cells. Clinical presentation and imaging are nonspecific. Serum PSA is normal or slightly increased. The diagnosis is often made transurethral prostatic resection. On histopathologic examination, this tumor can show either a predominant basaloid patternor an adenoid cystic like growth. By immunochemical examination, tumor cells express cytokeratin 14 and high-molecular-weight keratin while staining for PSA and AMACR are usually negative. Since hormonal therapy, chemotherapy and radiotherapy have little utility, treatment is based on ablative therapy. Basal cell carcinoma outcome is uncertain: recurrence, metastasis and death from disease can occur.
Conclusion: This case illustrates a prostatic tumor which is rarely encountered in practice and that can cause diagnostic problems and subsequently, inadequate treatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08 Abstract No. 026 Date 15.10.2018 & 16.10.2018	Hepatopathology and Biliary System	Shalaby, Asem Sultan Qaboos University Pathology department, College of Medicine Al-Khod Sultanat of Oman	Poster	Hany, Heba AL Kashef, Wagdi Kandil, Wageha Shahin, Rehab-Allah El-Alfy, Hatem Besheer, Tarek Farag, Raghda Mohamed, Mie

ABSRACT TITLE:
Evaluation of the role of notch 1 expression in hepatic carcinogenesis with clinico-pathological correlation

ABSTRACT TEXT

Objective: The role of Notch pathway in hepatocarcinogenesis still unclear with conflicting results reported from different researches. This study aims to investigate the exact role of Noth1 in hepatocarcinogenesis and its influence on the survival and to determine the possibility of being a target therapy.
Methods: Differential immunohistochemical expression of Notch1 in a hundred (100) cases of hepatocellular carcinoma (HCC) and the adjacent non neoplastic liver tissue was performed.
Results: The results showed that expression of Notch1 was significantly higher in the non-neoplastic hepatic tissues than in HCC tissues (P<0.001), but there is no significant difference in Notch1 expression between cirrhotic and non-cirrhotic liver tissue (P = 0.197). Notch1 expression was higher in low grade than high grade HCC (P = 0.036). Notch1 expression showed reverse correlation with mitotic count (P = 0.008), and necrosis (P = 0.005). The disease free survival was shorter in patients displaying low levels of Notch1 expression (P=0.045). The overall survival showed no significant difference between high and low levels of Notch1 expression but, it was somehow longer in patient with high Notch1 expression (P=0.220).
Conclusion: In conclusion, the tumour-suppressor role of Notch1 is supported and the use of Notch1 agonists may have a role to improve the prognosis of HCC.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-03 Abstract No. 026 Date 15.10.2018 & 16.10.2018	Cytopathology	Shawash, Sarah King Husain Cancer Center Amman Jordan	Poster	Jaber, Omar

ABSTRACT TITLE:
Retrospective implementation of the milan system for reporting salivary gland cytopathology: A review of three years

ABSTRACT TEXT

Objective: The Milan System for Reporting Salivary Gland Cytopathology (MSRSGC) aims to standardize reporting terminology, facilitate communication and better guide clinical management by providing risk of malignancy (ROM) for each diagnostic category. Our retrospective cohort aims to study the reproducibility of reporting terminology using the MSRSGC and to calculate the ROM for each diagnostic category.
Methods: Cases of fine needle aspiration (FNA) of salivary glands and related cervical lymph nodes were retrieved from our files between 2015-2017. All cases were reviewed independently by two pathologists and reclassified based on the MSRSGC. Confirmation of diagnosis by histologic and/or clinical follow up was available for 10 cases. The performance of both pathologists was compared and the mean incidence rate and ROM for each diagnostic category were calculated.
Results: 29 cases (15 males, 14 females, mean age: 49.8 years) were studied. FNA sites included parotid gland, submandibular gland, intraparotid and cervical lymph nodes and preauricular area. For pathologist 1, the results were : Non Diagnostic (ND); (n=5), Non Neoplastic (NN); (n=1), Atypia of Undetermined significance (AUS); (n=7), Benign (n=4), Salivary gland neoplasm of Uncertain Malignant Potential (SUMP) (n= 2), Suspicious for Malignancy (SM) (n=1) and Malignant (n=9). For pathologist 2, ND; (n=5), NN (n=1), AUS; (n=5), Benign (n=5), SUMP; (n=2), SM; (n=0) and Malignant (n=11). The mean incidence rate for each category was: ND (17%), NN (3%), AUS (20.5%), Benign (15%), SUMP (6%), SM (1.5%) and Malignant (34.5%). The ROM, when possible, was calculated as: AUS (50%), SUMP(0%), SM (100%) and Malignant (100%). Both pathologists concurred on categorization of all except 3 cases.
Conclusion: Applying the MSRSGC is feasible, has a high reproducible rate which facilitates standardization of reports and stratifying cases preoperatively. Our higher incidence rate and ROM for some categories may be due to the low case number and our cancer- biased patient population.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07 Abstract No. 026 Date 15.10.2018 & 16.10.2018	Head and neck pathology	Srivastava, Pallavi RMLIMS Dept. of Pathology Lucknow India	Poster	Anand, Nidhi Ram, Hari Husain, Nuzhat

ABSRACT TITLE:
Ghost cell odontogenic carcinoma: Role of p53 overexpression

ABSTRACT TEXT

Objective: We present a rare case of a Ghost Cell Odontogenic Carcinoma (GCOC) describing its clinical presentation and histology as well as importance of immunohistochemistry in diagnosis
Methods: Case presentation: 25-year-old female presented with painful mass in the lower jaw since 9 months. An osteo-destructive space occupying lesion was evident on computerised tomography in the mandible measuring 6 x 3.5 x 0.8 cm which extended from the left first molar to canine (figure 1a). A wide local excision hemimandibulectomy with lymph node resection was performed.
Results: Haematoxylin and eosin stained sections showed an infiltrative tumor comprising of island of odontogenic epithelial cells with basaloid morphology admixed with abundant ghost cells representing large polygonal epithelial cells with eosinophilic cytoplasm that have lost their nuclei but have maintained a faint outline of cellular and nuclear membrane. The intra-cytoplasmic keratin preserves the cell outline and the corresponding previous site of the nucleus and represents aberrant keratinization. (Figure1b) Immunohistochemistry revealed high p53 and low Ki-67 index.(Figure1c,d) A diagnosis of GCOC was made on the basis of the clinio-radiological, histopathological, and immunohistochemical findings. The postoperative period was uneventful, after a follow up of 6 months, there were no signs of local recurrence or distant metastasis.
Conclusion: Ghost cell odontogenic carcinoma arises denovo or from precursor lesions like calcifying cystic odontogenic tumor, dentinogenic ghost cell tumor or calcifying odontogenic cyst. GCOC has unpredictable behaviour with local recurrence and distant metastasis. Early diagnosis and treatment is needed along with a long term follow up. Histopathology along with Immunohistochemical markers including p53 are required for distinguishing benign cyst from carcinoma. p53 is overexpressed in GCOC as compared to benign cysts. Ki67 and MMP-9 also predicts disease progression.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-19	Hematopathology	Tei, Shikofumi Toshima Hospital Dept. of Pathology Tokyo Japan	Poster	Komatsu, Akiko Motoi, Toru
Abstract No. 026				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Inflammatory pseudotumor of the spleen: A case report

ABSTRACT TEXT

Objective: Inflammatory pseudotumor (IPT) of the spleen is a rare tumor. We present a case of IPT of the spleen.
Methods: A patient was an 82-year-old man who underwent surgery for a rectal cancer in our hospital before six years. Abdominal CT revealed a mass in the spleen. The splenectomy was performed.
Results: The macroscopic findings of these splenectomy specimens showed a nodular and well-circumscribed mass with a whitish gray cut surface. The mass was 2.5x2.0x2.0cm. Microscopically, the mass showed a mixed inflammatory infiltrate with a proliferation of spindle cells focally in a storiform pattern. The spindle cells revealed positivity for CD68, vimentin, SMA in immunohistochemical study. The pathological diagnosis was IPT. The patient is followed-up for three months after the operation without any trouble.
Conclusion: IPT known as inflammatory myofibroblastic tumor is an uncommon lesion of uncertain origin. It occurs throughout the body, most frequently in the mesentery, omentum, retroperitneum, pelvis and abdominal soft tissue. The splenic presentation is rare in the literature. In this study, we report an additional case of IPT involving the spleen.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Koufopoulos, Nektarios Evangelismos Athens Greece	Poster	Provatas, Ioannis Pigadioti, Eleni Antoniadou, Foteini Kosmas, Konstantinos Khaldi, Lubna
Abstract No. 027				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Invasive lobular carcinoma with extracellular mucin production. A new subtype of invasive lobular carcinoma

ABSTRACT TEXT

Objective: Invasive lobular carcinoma (ILC) with extracellular mucin production is a recently described new variant of ILC with few reported cases in the English literature. We report a case of ILC with extracellular mucin production.
Methods: A 56 year-old patient was admitted to the hospital for a palpable lump of the right breast. Physical examination and imaging studies were consistent with malignancy. Frozen section was positive while sentinel lymph node biopsy was negative for malignancy. A right mastectomy was performed. On gross examination the tumor was soft, pale, grayish blue, gelatin-like and well circumscribed. On microscopic examination the tumor measured 22mm. It consisted of a non-mucinous ILC component of the classical and solid type. The mucinous area represented about 70% of the tumor. Extracellular mucin production was seen in the form of relatively circumscribed multiple nodular areas. Tumor cells in the mucinous area were arranged in clusters and single cells. Few scattered signet ring cells were identified. Tumor cells displayed positivity for ER, PR and negativity for HER-2, E-Cadherin, beta-Catenin, Chromogranin and Synaptophysin. Ki-67 stained 20% of tumor nuclei.
Results: The diagnosis of ILC with extracellular mucin production was made. Adjuvant radiotherapy and hormonal therapy was administered.
The patient is alive without evidence of recurrence or metastasis twenty-four months after surgery.
Conclusion: Correct diagnosis is important because both treatment and prognosis are distinct. Differential diagnosis includes mucinous carcinoma, solid papillary carcinoma with extracellular mucin formation and composite mucinous and lobular carcinoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Kubelka-Sabit, Katerina Acibadem Sistina Skopje Macedonia	Poster	Jasar, Dzengis Filipovski, Vanja Bozinovski, Gorgi Plaseska-Karanfilska, Dijana
Abstract No. 027				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Molecular and histological characteristics of early triploid and partial molar pregnancies

ABSTRACT TEXT

Objective: Molar pregnancy has the highest incidence of all gestational trophoblastic diseases. This is a heterogeneous group of diseases, composed of precancerous lesions and gestational trophoblastic tumors. The hydatidiform mole is characterized by varying degrees of proliferation of syncitiotrophoblastic and cytotrophoblastic cells and stromal edema. Based on established morphological and cytogenetic criteria, molar pregnancy is divided into partial and complete. The risk of persistent trophoblastic disease is higher in complete mole compared with partial mole. The aim of this study was to assess the importance of additional molecular methods as a conjunction to the standard histopathological analysis to accurately determine the type and origin of triploidy and to detect partial molar pregnancy.
Methods: We selected a group of 24 consecutive cases of triploidy from a total group of 231 cases of early spontaneous abortions. All 231 cases were analyzed using Quantitative Fluorescent Polymerase Chain Reaction (QF-PCR). Placental and decidual tissue samples from all cases were formalin-fixed and routinely processed. Hematoxilin and eosin stained slides were analyzed by experienced pathologist.
Results: The QF-PCR results of the placental tissue showed that 10% of the cases were triploid. The extra chromosomal set was of paternal origin in 9 (37.5%) cases, and of maternal origin in 15 cases (62.5%). The genotype 69, XXY more often had maternal origin of the extra chromosomal set (10 vs 5), as well as the genotype 69, XXX (5 vs 2). The difference was not statistically significant. The statistical analysis confirmed the difference in median number of predictor factors between the two groups to be statistically significant (p = 0.04), suggesting that diandric triploidies had significantly greater number of diagnostic parameters suggestive of partial hydatidiform mole.
Conclusion: Due to the histomorphological overlap between partial molar pregnancy and hydropic abortions, concomitant histopathological analysis and molecular analysis of the placental tissue can lead to a correct diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Mokhtar, Noha Soba University Hospital Al-Neeilan University Khartoum Sudan	Poster	Mekki, Salwa Mudawia, Hatim Sulaiman, Sulaiman El-Tahir, Mohmed Mohmed Ahmed, Tigani Omer, Ilham Fargalla, Ishraga Yousif, Badreldin Dafaallah, Mohmed
Abstract No. 027				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Histopathological features of coeliac disease in a sample of Sudanese patients

ABSTRACT TEXT

Objective: This study of coeliac disease with biopsies received in the department of histopathology at 2 hospitals in khartoumm Sudan aimed to gain insight into the demographic profile, clinical presentations and histopathological classification of patients with coeliac disease
Methods: This was a descriptive study carried out at Soba University Hospital and Fedail Hospital during the period from January 2010-December 2013. Haematoxylin & Eosin and CD3-stained slides of small intestinal biopsies of coeliac disease patients were reviewed for various histological features (1) intraepithelial lymphocytes (IEL) count per 100 enterocytes, (2) crypt hyperplasia and (3) degree of villous atrophy. Based on the histopathological findings, the cases were categorized according to the modified Marsh classification. Demographic and clinical data were obtained from the patient request forms. The data were analyzed using Statistical Package for Social Sciences Software (SPSS).
Results: The study included 60 patients. Their age ranged from 2 to 70 years with a mean of 19.5 years (±15.7 SD). The most common age group was below 10 years old (41.6%). Male and female are equally affected. The most common clinical presentation was chronic diarrhoea (55.0%), followed by iron deficiency anemia (41.7%). The degree of villous atrophy ranged from complete atrophy (45.0%), marked atrophy (38.3%) to mild atrophy (16.6%). Marsh grade IIIC was the most common grade. The younger age-groups had a higher prevalence of iron deficiency anaemia and higher Marsh grade
Conclusion: The commonest clinical presentation in our CD cases was chronic diarrhea followed by iron deficiency anemia. The latter was inversely related to age. March grade IIIC was the most common grade followed by IIIB and IIIA.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-18	Genitourinary pathology	Salem, Eman Ahmed Maher Teaching Hospital Cairo Egypt	Poster	Zaki, Dina Essam Talaat, Suzan
Abstract No. 027				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Paratesticular leiomyosarcoma

ABSTRACT TEXT

Objective: To study a case of left inguinoscrotal swelling in a 68 years old male.
Methods: Histopathological and Immunohistochemical examination of the left inguinoscrotal swelling.
Results: Positive staining for Smooth Muscle Actin (SMA) confirmed the diagnosis of a paratesticular leiomyosarcoma.
Conclusion: Leiomyosarcoma is a rare tumor that shoud be considered in the differential diagnosis of any paratesticular spindle cell tumor.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-08	Hepatopathology and Biliary System	Soon, Gwyneth National University Hospital Singapore	Poster	Lee, Jonathan Pang, Yin Huei Binte Jumat, Nur Halisah Tan, Eunice Dan, Yock Young Wee, Aileen
Abstract No. 027				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Influence of ethnicity on histologic parameters in Asian patients with non-alcoholic fatty liver disease

ABSTRACT TEXT

Objective: Most studies investigating ethnic differences on the prevalence and histology of non-alcoholic fatty liver disease (NAFLD) have been demonstrated in United States-based populations. This study aims to explore the effect of ethnicity on liver histological differences within a multi-ethnic Asian population with NAFLD.
Methods: Adult NAFLD patients from a single tertiary hospital in Singapore from 2009 to 2017 were selected, and their liver biopsies scored using the non-alcoholic steatohepatitis (NASH) Clinical Research Network scoring system.
Results: 132 patients with biopsy-proven NAFLD were included, of which 54.5% were Chinese, 31.8% were Malays, 9.8% were Indians and 3.8% were from other ethnic groups. Chinese patients had the highest proportion of NASH (n = 61, 84.7%), defined as the presence of lobular inflammation and ballooning degeneration, compared to other ethnicities (p = <0.01). Chinese patients also showed higher degrees of steatosis, and Indian patients lower degrees of steatosis, compared to other ethnicities (p = <0.01), although Chinese patients had lower body mass index (BMI) values (median BMI 28.3 kg/m2; p = <0.01). A lower proportion of Malay patients had ballooning degeneration compared to other ethnicities (p = 0.03). There was no statistically significant difference in advanced fibrosis among the ethnic groups. On multi-variate analysis, Chinese patients were more likely to have ballooning degeneration, compared to other ethnicities (OR 4.07, 95% CI: 1.02 – 16.2; p = 0.047), adjusting for age, gender, diabetes and BMI.
Conclusion: Chinese patients were more likely to develop ballooning degeneration, compared to other ethnicities, independent of age, gender, diabetes and BMI. This translates to a higher proportion of Chinese patients with NASH. Further studies investigating the biological, genetic and environmental factors contributing to ethnic differences in NAFLD could lead to further insights into NASH pathogenesis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Zawati, Imen Salah Azaiez Institute Dept. of Pathology Tunis Tunisia	Poster	Adouni, Olfa Goucha, Aida Betaieb, Ilhem Moukh, Haithem Boubaker, Samir Gamoudi, Amor
Abstract No. 027				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Head and neck soft-tissue sarcoma in adults: Clinical and pathological study of 50 cases

ABSTRACT TEXT

Objective: The purpose of this study was to highlight the clinicopathological features and therapeutic management of adult patients treated for head and neck soft tissue sarcomas (HNSTS) at our institute.
Methods: A retrospective monocentric study that included 50 patients diagnosed with HNSTS between 2000 and 2018 was carried out at Salah Azaiez Institute (Tunis, Tunisia). All data were collected from medical records.
Results: The median age at presentation was 47 years. The male to female ratio was 1.3. The most frequent location was the soft tissues of the neck (40%) and the mean tumor size was 4 cm. Lymph nodes metastasis was reported in 10% of cases. The most common subtype was rhabdomyosarcoma and most of the tumors were high grade 67%. As for therapeutic management, 74% of patients underwent surgery. Postoperative radiotherapy was administrated to 31% of cases and 6 patients received adjuvant chemotherapy.
Conclusion: There are few site-specific management guidelines for soft tissue sarcoma in adults. Thus, HNSTS be should treated in a reference center, with multidisciplinary staff. Surgery resection with negative margins is the primary treatment. Postoperative radiotherapy therapy cans improve loco-regional control. The role of chemotherapy is not well established and the development of molecular techniques is, therefore, essential to identify potential therapeutic targets.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Lazarova, Blagjica Apostolova Clinical Hospital Shtip Dept. of Pathology Shtip Macedonia	Poster	Kostadinova Kunovska, Slavica Aluloski, Igor Klisarovska, Violeta Jovanovik, Rubens
Abstract No. 028				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Lymphoepithelioma-like squamous cell carcinoma of the uterine cervix and concomitant cavernous haemangioma - a case report

ABSTRACT TEXT

Objective: Lymphoepithelioma-like carcinoma (LELC) is rare primary malignant tumor of the uterine cervix, and accounts for only 0.7% of all cases of primary uterine carcinoma. HPV infection is often associated with the pathogenesis of the LELC, but convincing evidence for association with EBV is still lacking.
We present a case of LELC of the uterine cervix in 53-years-old patient, gravida 2, parity 2, with hypertension, diabetes mellitus type 2, presenting with genital bleeding in menopausis.

Methods: Colposcopy revealed tumor of the uterine cervix, curettage was performed and invasive squamous cell carcinoma of the uterine cervix, pT1b1, was diagnosed. Magnetic resonance imaging revealed a lesion with dimensions 6.6x9.8 mm in the uterine cervix, without locally enlarged lymph nodes. Radiography of the lungs, abdominal ultrasound and urography were done without any significant findings. Radical hysterectomy with bilateral adnexectomy was performed.
Results: On gross section, white tumor mass in the left half of the cervix was seen, with latero-lateral dimension of 1.2 cm, endocervical length 1.5 cm, and deepest stromal invasion of 0.6 cm. On microscopic examination cancer cells were large, with ill-defined cell borders, abundant cytoplasm, prominent nucleoli, and focal syncytial growth pattern, surrounded by extensive lymphocytic infiltration, including interspersed intratumoral lymphocytes. Immunohistochemistry showed positivity of the tumour cells for EBV and HPV. Poorly differentiated non-keratinized squamous cell lymphoepithelioma-like carcinoma was diagnosed, without lymphovascular invasion and lymph node metastasis. There was an incidental finding of cavernous haemangioma in the cervix. The patient was treated with radiotherapy (50Gy in 25 fractions), and was followed for 1 year after surgery, without evidence of recurrence.
Conclusion: LELC of the uterine cervix is rare tumor and further studies are needed to determine its association with HPV and EBV, including analysis of the role of concomitant infection in its pathogenesis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Mekki, Salwa Soba University Hospital Al-Neelain University Khartoum Sudan	Poster	Dabora, Abdulrahim Nogoud, Alaeldin Alhaj, Waleed Abdulbain, Muntasir Agaimy, Abbas Malik, Sarrah
Abstract No. 028				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
IgG4-related autoimmune pancreattitis, mimic pancreatic tumor: A case report

ABSTRACT TEXT

Objective: This is a case report of a rare mimicker of pancreatic cancer
Methods: Whipple specimen grossly showed: Multiple yellowish nodules in the pancreatic head and tail and posterior stomach wall and splenic hilum, measuring 4x2.5cm, 1x0.6cm and 0.5x0.5 cm respectively. Representative sections from the pancreas, stomach and spleen were taken and examined under the microscope. IgG/IgG4 immunostains were performed in the sections that revealed the inflammatory infiltrate mainly plasma cells
Results: Microscopically there is heavy mixed inflammatory infiltrate with increase number of plasma cells, multinucletaed giant cells and fibrosis. No malignancy. The provisional diagnosis as autoimmune pancreatitis, possibly IgG4 related. Immunohistochemistry for IgG4 confirmed the diagnosis, detecting in >50% IgG4 positive cells.
Conclusion: IgG4 autoimmune pancreatitis is not uncommon disease and mimic carcinoma of the pancreas clinically. Careful assessment is needed to avoid Whipple resection
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Radhi, Jasim labrotary service Oshawa Canada	Poster	Pilavdzic, Dragana
Abstract No. 028				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Complex papillary lesion of the Breast

ABSTRACT TEXT

Objective: Papillary lesions of the breast are intraductal neoplasm with conspicuous epithelial cell proliferation and arborescent fibrovascular cores. Excessive and florid ductal cellular proliferation/epithelial hyperplasia with or without sclerosis are features of complex papillary lesions. This entity can be challenging for reporting pathologist and require careful morphological examination as well as application of proper immunohistochemical markers to distinguish it from atypical papilloma, atypical ductal hyperplasia/low grade ductal carcinoma in situ or solid papillary carcinoma.
Methods: Review of Lakeridge Health Oshawa pathology files from January 2013 to March 2018 revealed 3 cases of cellular/complex papillary lesion out of 243 benign papillary lesions/intraductal papillomas of the breast. Evaluation with estrogen receptor protein (SP1), p63 (Leica), CK5/6 (Dako), SMMS (BioGenex) and calponin (Dako) immunostains was conducted.
Results: : The core biopsies of radiologically suspicious breast lesions showed highly cellular epithelial proliferation with suggestion of papillary architecture requiring excision for proper assessment. Excisional biopsies demonstrated well-circumscribed firm white lesions macroscopically. Histological examination showed highly cellular vaguely papillary lesions with no definite epithelial atypia or conspicuous mitotic activity, and inconspicuous slender fibrovascular cores with focal sclerosis. Estrogen receptor protein revealed patchy staining while CK5/6 was prominent in most cellular areas; myoepithelial markers p63, SMMS and calponin showed scanty immunostaining.
Conclusion: Complex papillary lesions of the breast are rare and morphologically can mimic/be overdiagnosed as atypical papillary lesions or even solid papillary carcinoma. The diagnosis on core biopsy should be considered and confirmed upon careful microscopic and immunohistochemical evaluation of the excisional specimen.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Sali Akash India	Poster	
Abstract No. 028				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Parathyroid Carcinoma: A clinicopathological study of 20 cases

ABSTRACT TEXT

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Lim, Diana National University Hospital Singapore	Poster	Laoharojvongsa, Nutthaporn Tan, Tuan Zea
Abstract No. 029				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Clinicopathological features of an Asian cohort of endometrial carcinomas with mismatch repair protein loss

ABSTRACT TEXT

Objective: Lynch syndrome (LS) patients have significantly elevated lifetime risk for several cancers including endometrial carcinomas (EC) and universal LS screening has been suggested for patients with EC. This study examines the clinicopathologic features of EC with mismatch repair protein (MMR) protein deficiency, identified on universal screening at a single Asian institution.
Methods: Slides from all EC screened between January 2016 to February 2018 using MMR IHC were reviewed and correlated with clinicopathological features including age at diagnosis, tumour type, LUS involvement, grade, stage, tumour-infiltrating lymphocytes (TILs), presence of crohn's-like lymphoid reaction (CLR) and family/personal history of cancer.
Results: 85 EC were screened with MMR IHC. Deficiency in ≥1 MMR protein was observed in 20 cases (23.5%) geschweifteklammeraufMLH1/PMS2 loss (11), MSH2/MSH6 loss (5), PMS2 loss (3), MSH6 loss (1)geschweifteklammerzu. These patients ranged in age from 37 to 70 (mean 54.3) years. Eighteen had endometrioid carcinomas (9 G1, 4 G2, 5 G3), 1 had clear cell carcinoma and 1 had MMMT. Eighteen patients were stage I and 2 were stage III at presentation. One patient had a history of breast and renal cancers and 7 had family history of Lynch-related cancers. There were no significant differences in the clinicopathological characteristics of EC with intact or loss of MMR immunoexpression except more TILs (mean 41/10HPFs versus 22/10 HPFs, p =0.0059) and CLR (p=0008) were noted in tumours with MMR protein loss.
Conclusion: Most patients with MMR IHC loss do not fulfill the Amsterdam II or Bethesda criteria for LS testing. The presence of increased TILs or CLR can help to identify EC with MMR deficiency. Our findings support universal LS screening for patients with EC as the majority of potential LS patients in this cohort would have been missed by screening algorithms based solely on age at diagnosis and significant personal or family history of cancers.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Miskad, Upik Andriani Hasanuddin University Dept. of Pathology Makassar Indonesia	Poster	Sirupa, Sharon Otniel Wahid, Syarifuddin
Abstract No. 029				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
Expression of Insulin-Like Growth Factor Type 1 receptor in Colorectal Neoplasm

ABSTRACT TEXT

Objective: Insulin-like growth factor type 1 receptor (IGF-1R), a transmembrane tyrosine kinase receptor, may play critical role in proliferation, differentiation and transformation. It is expressed in many human tissues and overexpressed in many types of cancer. The objective of this study is to assess the association between immunohistochemical expression of IGF-1R and colorectal histopathologic features.
Methods: A total sample of 93 paraffin blocks of colorectal tissue were selected using consecutive sampling method in this cross sectional study. Samples grouped as poorly, moderately and well differentiated colorectal adenocarcinoma, colorectal adenoma and normal colorectal mucosa were stained by using IGF-1R monoclonal antibody.
Results: The expression of IGF-1R was positive in all groups, except in 4 samples (4.3%) of normal colorectal mucosa. Weak positive expression was found in normal colorectal mucosa (50%), colorectal adenoma (42.1%), well differentiated colorectal adenocarcinoma (23.5%) and moderately differentiated colorectal adenocarcinoma (5.3%). Strong positive IGF-1R expression was mostly found in poorly differentiated colorectal adenocarcinoma group (83.3%), followed by moderately differentiated colorectal adenocarcinoma (68.4%), well differentiated colorectal adenocarcinoma (35.3%), colorectal adenoma (47.4%) and normal colorectal mucosa (15%). There was association between immunohistochemical expression of IGF-1R and colorectal histopathologic features (p <0.001). There was significant difference in IGF-1R expression between normal colorectal mucosa and colorectal adenoma groups, as well as between normal colorectal mucosa and colorectal adenocarcinoma groups.
Conclusion: There was association between expression of insulin-like growth factor type 1 receptor (IGF-1R) and colorectal histopathologic features. IGF-1R might play a role in the progression of colorectal cancer.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Radi Gomaa Mahmoud, Rabab Cairo University Dept. of Pathology Cairo Egypt	Poster	Ameen, Solafa Hassan, Hanan Khairy, Rasha
Abstract No. 029				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Evaluation of survivin expression in breast carcinoma. Histopathological and immunohistochemical study

ABSTRACT TEXT

Objective: Investigation of immunohistochemical expression of survivin in cases of female BC and correlation of this expression with the clinico-pathological aspects of the tumors including the molecular subtypes.
Methods: Fifty formalin fixed paraffin embedded BC tissue sections were randomly collected. All the available data were collected from the patients' reports. The paraffin blocks were sectioned and stained with hematoxylin & eosin stains for histologic evaluation. Additional sections were immunostained with survivin.
Results: Nuclear survivin expression was detected in 66% of cases and it was associated with some of the negative prognostic factors although it didn't reach statistical significance (p-values were found to be higher than 0.05) where higher rate of survivin expression showed apparent direct association with IDC-NST histologic type, presence of insitu component, ER and PR negativity and high Ki-67 proliferation index as well as Her 2 enriched molecular subtype.
Conclusion: Survivin expression is detected in 66% of breast carcinoma cases and is likely to be associated with poor prognosis making it a potential target for treatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	Ribeiro-Silva, Alfredo Ribeirão Preto Medical School Brazil	Poster	Duarte, Andressa Silveira, Giórgia Soave, Danilo
Abstract No. 029				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
New insights in the role of the Phosphatidylinositol 3-kinase (PI3K) pathway in the pathophysiology of oral squamous cell carcinom

ABSTRACT TEXT

Objective: The molecular biology of head and neck carcinoma is very complex and develops from the dysfunction of several interrelated pathways. One of them is the phosphatidylinositol-3 kinase (PI3K) pathway, which is known to regulate various cellular functions. Although the PI3K pathway has already been extensively studied in several types of cancer, its role in the pathophysiology of head and neck carcinoma still deserves further study. The present work aimed to evaluate the relationship of the PI3K pathway with mediators of cell survival, proliferation, inflammation, and glycolic pathways in a cell lineage of oral squamous cell carcinoma.
Methods: All experiments were performed on the SCC25 oral squamous cell carcinoma cell line. In the presence or absence of PI3K pathway inhibitors (LY294002 or AKT IV) we analyzed the protein expression (Western Blotting), gene expression (qRT-PCR), and immunolocalization (indirect immunofluorescence) of pAKT and AKT (related to PI3K pathway activation); X-linked inhibitor of apoptosis protein (XIAP); Bcl-2-associated death promoter; Bcl-2-like protein two inhibitor (Bcl-w); Cycloxigensase 1 (COX1); Cyclooxygenase-2 (COX2); and glycoprotein-associated Glucose transporter 1 (GLUT1). For the functional characterization of treated or untreated cells, we also performed matrix invasion assays, cell migration assay and cell proliferation assay.
Results: Our results demonstrated that activation of the PI3K/AKT pathway is directly related to members of the Blc-2 family and to GLUT1, but not to the inflammatory mediators evaluated (COX1 and COX2).
Conclusion: Our data suggest that the PI3K/AKT pathway may be related to cell survival and proliferation in oral squamous cell carcinoma because of its interaction with Bcl-2 family members.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Bellil, Khadija Hopital des FSI la Marsa Service La Marsa Tunisia	Poster	Hemdani, Nesrine Nfikha, Zeineb Dhaoui, Amen Ben Ghachem, Dorra Abdelali, Zein El Imene Jomni, Taieb Hemdani, Nesrine
Abstract No. 030				
Date 17.10.2018 & 18.10.2018				

ABSRACT TITLE:
Gastric lesions revealed by iron deficiency anemia

ABSTRACT TEXT

Objective: Upper gastrointestinal endoscopy for iron deficiency anemia(IDA) investigation remains is a common procedure. Random duodenal and gastric biopsies are usually performed by gastroenterologists.In our study we aim to prove the importance of practicing systematic gastric biopsy to explore IDA.
Methods: A retrospectively maintained database was interrogated to identify all patients undergoing upper gastrointestinal endoscopy with gastric biopsy in order to explore IDA between January 01,2017 and March 31,2018. Stomach-operated patients and those who have known general disease were excluded.
Results: Upper digestive fibroscopy was performed in 100. Sex ratio was 0,17. Average age was 42 years. 91% of patients had no symptoms and 9% associated gastric pain and/or dyspepsia. Endoscopically,upper gastrointestinal fibroscopy was normal in 31% of cases. There was congestive and/or micronodular antral gastropathy in 29% of cases, erosive bulbitis in 14% of cases, crenellated appearance of the duodenum in 16% of cases,atrophic fundic gastropathy in 8% of cases, and a gastric polyp was observed in 2% of cases. Histopathologically: Of the 31 patients with normal upper endoscopy, only 4 patients had normal histological findings, 87% cases had histological gastric lesions: Helicobacter pylori (HP) chronic gastritis 20 patients, reactive gastropathy in 6 patients and granulomatous gastritis in 1 patient. In the group of patients presenting endoscopic lesions, histological findings were about HP associated chronic gastritis in 38 patients, HP-negative chronic gastritis in 21 patients, autoimmune gastritis in 7 patients, chemical gastritis in 2 patients and a MALT lymphoma in one patient. Of the patients with histological gastric lesions, localisation was 51% antrofundic, 25% antral and 24%fundic. Intestinal metaplasia was observed in 12% of cases and gastric atrophy in 11% of cases.
Conclusion: Random gastric biopsies during IDA exploration are necessary to avoid missing out on frequent undiagnosed cases of chronic gastritis that can be treated and prevent complications occurrence.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Matias, Lucilia Maputo Central Hospital Dept. of Pathology Maputo Mozambique	Poster	Fernandes, Fabiola Carrilho, Carla
Abstract No. 030				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
The burden of HIV in maternal mortality in autopsies, Mozambique

ABSTRACT TEXT

Objective: To determine the burden of HIV in maternal deaths and to determine the causes of deaths in these women.
Methods: We conducted a retrospectiveanalysis based on retrospective collection and analysis of autopsies performed during 2013 at Maputo Central Hospital.
Results: were included in this study 143 cases of maternal deaths occurred at Maputo Central Hospital during the period of study, Representing 21,8% of 653 autopsies performed. The average age was 27 years with a standard deviation of 5,7years. The youngest age was 16 years and the older was 42years. Considering the occurrence of death relatively to delivery, most of the cases occurred in puerperium over 6,4%.
According to the causes,the obstetrics direct causes were responsible for 53,1% if compared to non-obstetrics.
Considering all causes of death the most frequent causes was diseases associated to HIV infection n=32 cases (22,4%), followed by eclampsia (n=31 cases, 21,7%) and bleeding (n=29 cases; 20,3%).
In those 32 HIV related patients the causes of death was: Tuberculosis (19), Kaposi Sarcoma (6), criptococosis (3), disseminated candid (2), and Pneumocystisjirovecii pneumonia (1).
Conclusion: Maternal deaths corresponded to two out of ten autopsied deaths, with AIDS being the most frequent cause of death in this group, followed by eclampsia and pregnancy, delivery and puerperium hemorrhage. The leading causes of death for autopsied patients remain treatable diseases including infectious diseases. HIV/AIDS-related diseases were the leading cause of death alone. The most frequent causes of death in AIDS patients were tuberculosis, Kaposi's sarcoma, and cryptococcosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Rashid, Sameera Hamad Medical Corporation Doha Qatar	Poster	Haider, Abdulrazzaq
Abstract No. 030				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Metastatic colon signet ring cell carcinoma in breast: A rare and aggressive entity

ABSTRACT TEXT

Objective: Breast cancer is the most common cancer in women worldwide. It is estimated that worldwide more than 1,676,000 new cases were diagnosed in 2012. According to the World Health Organization out of 8.2 million cancer deaths in 2012, 521,000 of these were due to breast cancer. Metastatic tumor to the breast are rare with an incidence of 0.5 to 3% from extra mammary site. There are only 22 reported cases of colorectal tumor metastatic to breast. Despite its rarity, metastatic disease to the breast is an important diagnostic concern because of poor prognosis and different treatment as compared to breast primary.
Methods: We present a 39-year old female, known case of mucinous adenocarcinoma status post right hemicolectomy in Tunisia, who was found to have a breast mass on staging CT scan. Ultrasound guided breast biopsy was performed that showed a poorly differentiated adenocarcinoma with signet ring cell features. The tumor cells stained for CK 20, CDX-2 and E-cadherin. There was no staining for CK 7, GATA3, mammaglobin, GCDFP-15, ER, PR and Her2/neu. The colon tumor slides were requested for comparison.
Results: Two tissue blocks from Peritoneum and omental nodules were examined that showed signet ring cell carcinoma staining positively for CK 20 and CDX2. There was no staining for Estrogen (ER), Progesterone (PR), GCDFP-15, mammoglobin, CK7 and Hep-Par1. The MRI brain findings were suggestive of leptomeningitis carcinomatosis with possibility of cervical and dorsal spine metastasis. Immunohistochemistry for colon mismatch showed intact staining for MLH1, MSH2, MSH6 and PMS2. The patient was offered palliative care because of advanced disease.
Conclusion: The case highlights the importance of recognizing the signet ring cell morphology and utilizing immunohistochemistry to find the primary site as it shows aggressive behavior and is usually associated with poor prognosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Moety, Shaymaa SQUH Dept. of Histopathology Muscat Sultanat of Oman	Poster	Alhamdani, Aisha
Abstract No. 031				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Lipoleiomyoma of the uterus : A case report

ABSTRACT TEXT

Objective: Lipoleiomyoma of the uterus : A Case Report.
Methods: case report
Results: Lipoleiomyomas are rare benign tumours of the uterus composed of mature adipocytes intermixed with smooth muscle component. They are considered as a variant of uterine leiomyomas that represents 0.03 to 0.2% of all leiomyomas. They are typically seen in postmenopausal women ranging in age from 50 to 70 years old. Lipoleiomyoma should be distinguished from pure uterine lipoma which is a very rare tumour of the uterus. Lipoleiomyomas are often misdiagnosed on imaging, leading to unnecessary invasive procedures. We reported a case of 69-year-old postmenopausal woman, a known case of pulmonary Tuberculosis with extensive destruction of right lung with lung fibrosis and bronchieictatic changes. During follow up, an incidental finding of adnexal mass was seen on imaging. Ultrasonography showed a heterogenous solid well-defined mass in the midline and right adnexal region measuring 7.9 x 6.5 cm. MRI of the pelvis showed a large left adnexal mass measuring 7.7 x 6.7 x 7.2 cm with heterogeneous intensity and evidence of macroscopic fat. A total abdominal hystrectomy with bilateral salpingo -oophrectomy was performed for histopathological examination. Macroscopically, There was a large grey yellow mass filling the uterine cavity and measured 5 x 6x 6 cm. Both adnexal structures were grossly unremarkable. Microscopically, the mass is proved to be lipoleiomyoma consisting of a mixture of smooth muscle fibers and mature adipocytes.
Conclusion: lipoleiomyoma (a case report)
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Ovchinnikova, Tatiana Research Institute of Oncology Patology department Saint-Peterburg Russia	Poster	Artemyeva, Anna Petrov, Aleksey Karachun, Aleksey
Abstract No. 031				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:
The relationship of tumor budding in primary colon cancer with clinical tumor parameters

ABSTRACT TEXT

Objective: Assessment of tumor budding in order to identify the relationship with regional metastasis. Comparison of clinical and pathological stages.
Methods: analyzed 57 patients with colon cancer of any stage in TNM (7th edition), both sexes, over 18 years of age, without preoperative therapy, who underwent resection of the colon.
The macroscopic examination of the operating material was performed in accordance with the protocol of the CAP. The microscopic examination included the evaluation of tumor budding, which was performed according to the recommendations of The international tumor budding consensus conference.
Results: In 39 cases were found low grade tumor budding (68.4%), 13 cases (22.8%) – intermediate grade and 5 (8.8%). cases - high grade There was no correlation with regional metastasis, which is explained by insufficient sampling.
Clinically revealed cT2 - 6 cases, cT3 - 41 cases, cT4a - 5 cases, cT4b - 5 cases; cN0 - 10 cases, cN1 - 45 cases, cN2 - 2 cases
Pathological stages: pT1 – 3 cases, pT2 - 7 cases, pT3 – 42 cases, pT4a – 3 cases, pT4b - 2 cases; pN0 – 35 cases, pN1 - 16 cases, pN2 - 6 cases.
In 21.1% (12 cases) there was a coincidence of stages in both categories (T and N), in 78.9% there was a stage change, including 17.5% in the T category (10 cases), in 22.8% in the N category (22 cases) and 38.6% in both categories (T and N), which is associated with objective limitations of the imaging methods, frequent presence of tumor inflammation.
Conclusion: A comprehensive pathological study leads to complete histological report, reflecting all the characteristics of the tumor, which have prognostic and tactical importance. We are going to assess progression-free and overall survival further.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 031 Date 15.10.2018 & 16.10.2018	Breast pathology	Riekstina, Marta Riga Stradins University Dept. of Pathology Riga Latvia	Poster	Abolins, Arnis Strumfa, Ilze Petersons, Aigars

ABSTRACT TITLE:

Thymidylate synthase and cyclin d1 expression by tumor grade in hereditary and sporadic breast cancer

ABSTRACT TEXT

Objective: Thymidylate synthase (TS) is involved in DNA biosynthesis (Rose et al.,2002; Yu et al.,2005). Cyclin D1 (CycD1) regulates cell cycle and growth of estrogen-responsive tissue (Roy et al.,2006; Ezzat et al.,2012). TS and CycD1 have been associated with higher grade and worse prognosis of breast cancer (Pestalozzi et al.,1997; Mohammadizadeh et al.,2013). Aim of this study is to compare TS and CycD1 expression by tumor grade in hereditary (HBC) and sporadic (SBC) breast cancer.

Abstract is for IAP bursary application.

Methods: A retrospective study included 98 cases of invasive breast cancer, classified as hereditary (37) by positive BRCA1/2 mutation testing in peripheral blood versus sporadic cases (61). Tumors were graded as low (LG), medium (MG) and high (HG) grade based on WHO classification. Expression of TS, CycD1 was evaluated as fraction of positive cells (%). Descriptive statistics and Mann-Whitney U-test was applied. p<0.05 was considered significant.

Results: In HBC, CycD1 was found in 94.6% of cases. The mean expression (ME) was 82.9±23.0% [95% confidence interval (CI):76.6-89.0], ranging from 84.4±22.8% [CI:73.4-95.4] in MG to 80.7±24.9% [CI:67.4-94.0] in HG. In SBC, CycD1 was observed in 83.6% of cases, with ME 29.1±28.1% [CI:20.7-34.4], reaching 25.0±24.8 [CI:0.0-64.5] in LG, 26.8±27.7% [CI:15.4-38.3] in MG and 30.0±28.7% [CI:19.4-40.5] in HG. p for ME (HBC versus SBC)=0.008. In HBC, TS was found in 64.9% of cases with ME 27.9±30.6% [CI:17.8-38.1], reaching 10.5±17.0% [CI:2.3-18.7] in MG and 50.6±30.3% [CI:34.5-66.8] in HG. In SBC, TS was present in 31.1% of cases, ME – 4.7±10.6% [CI:1.7-6.8]. Within LG tumors, ME was 5.5±7.1% [CI:0.0-16.8], MG – 2.7±6.6% [CI:0.0-5.4], HG – 6.4±13.3% [CI:1.5-11.3]. p for ME (HBC versus SBC)=0.03.

Conclusion: HBC was characterized by significantly more widespread expression of cyclin D1, independently of grade. TS was up-regulated in HBC, especially in high grade tumors, contrasting with high grade sporadic cancers. Reactivity was not influenced by grade except TS in high grade HBC.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 032 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Moety, Shaymaa Sultan Qaboos University Hospital Muscat Sultanat of Oman	Poster	Alhamdani, Aisha

ABSRACT TITLE:

Palisading / neurilemmoma-like leiomyoma of the uterus: A case report

ABSTRACT TEXT

Palisaded leiomyoma is very rare benign tumour of the uterus. It is considered one of the variants of leiomyomas that can be confused histologically with neurilemmomas. Palisaded leiomyomas are more commonly seen in the gastrointestinal tract than in uterus. We reported a case of 49 years old female presented to our hospital with history of heavy menstrual bleeding since 3 years. Physical examination showed bulky uterus with normal looking cervix. PAP smear was taken and endometrial pipelle biopsy was performed. Both showed normal findings except for progesterone related changes in the endometrium. Preoperative abdominal ultrasonography showed an enlarged uterus, 12 weeks in size with sub-serous fibroid measuring 5 cm in diameter and another small fibroid in the left round ligament. Cervix, both Fallopian tubes and ovaries were unremarkable.

The patient underwent total abdominal hysterectomy with bilateral salpingo-oophrectomy. Macroscopically, the uterus was distorted with nodular outer surface. An irregular area on the upper anterior surface of the uterus is seen measuring 2.5 cm in diameter corresponding to a detached nodular mass separately found in the same container. On opening, three well-defined intramural firm masses with solid grey cut surfaces and wholly appearance are seen. The detached nodular mass was soft and showed soft tan cut surface. Microscopically, the three intramural nodules are confirmed to be leiomyomata. Sections taken from the detached mass showed a well circumscribed spindle cell lesion with marked nuclear palisading and verocay bodies-like areas resembling neurilemmoma. No mitoses, necrosis or nuclear pleomorphism were detected. The spindle cells showed strong nuclear immune reactivity for desmin and caldesmon and negative reactivity for S100 protein antibodies confirming the smooth muscle origin of the lesion. Based on morphology and immunohistochemical reactivity, the detached nodular mass was proven to be a palisaded leiomyoma.

Methods: case report

Results: case report

Conclusion: Palisading / neurilemmoma-like leiomyoma of the uterus: A case report.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 032 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Park, Yujun Seoul Nat. Univ. Budnang Hosp . Republic of Korea	Poster	Koh, Jiwon Kwak, Yoonjin Kim, Woo Ho Choe, Gheeyoung Lee, Hye Seung

ABSTRACT TITLE:

Clinicopathologic significance and spatial importance of tumor infiltrating lymphocytes and PD-L1 expression in stage II and III gastric cancer

ABSTRACT TEXT

Objective: We aimed to evaluate prognostic values of tumor infiltrating lymphocytes (TILs) and PD-L1 expression in gastric cancer (GC).

Methods: We enrolled 406 stage II and III GC patients treated with curative surgical resection followed by adjuvant chemotherapy. Two cores from central and peripheral areas of tumor were chosen for construction of tissue array blocks. Immunohistochemistry was performed for CD3, CD4, CD8, Foxp3, and PD-L1 (22C3 PharmDx kit). PD-L1 expression was interpreted by combined positive score (CPS), tumor proportion score (TPS), and immune cells positive (IC+). Immunoscore was defined as high and low groups based on colorectal cancer model, and clinicopathologic characteristics including overall survival (OS) were compared.

Results: Patients with high CD3 and CD8-positive TIL densities in tumor periphery had significantly better OS compared to low density group (p=0.005 and p<0.001, respectively). High Foxp3+ TIL density was associated with better prognosis in tumor center and periphery (p=0.015 and p=0.008, respectively). CPS of PD-L1 immunostaining was 1 or more in 61.4% of GCs, but TPS was 5% or more in 17.2%. PD-L1 status by CPS was discordant between center and periphery in 26.6% of stage II/III GCs. PD-L1 expression status by CPS, TPS, and IC+ did not discriminate patients' survival regardless of TIL densities or spatial distribution. Immunoscore was significantly correlated with PD-L1 expression status by CPS, TPS, and IC+ (all p<0.05). Patients with high immunoscore (3 or 4) showed better OS by univariate (p<0.001) and multivariate analysis (p=0.005).

Conclusion: Our results suggest that immunoscore based on spatial distribution of TILs may have notable influence on prognosis in stage II/III GC patients with standard treatment. Although PD-L1-positive cases, defined as CPS 1 or more, was frequently observed in GCs (61.4%), PD-L1 expression status was not associated with patients' outcome regardless of interpretation criteria, spatial distribution, or TIL densities.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 032 Date 15.10.2018 & 16.10.2018	Breast pathology	Saeed Ali, Fatima Royal Hospital Dept. of Histopathology Muscat Sultanat of Oman	Poster	Ali Ramadhan, Fatma Alrahbi, Nasser

ABSRACT TITLE:

Granulocytic sarcoma of the breast: A case report

ABSTRACT TEXT

Objective: The granulocytic sarcomas (chloromas) are rare extramedullary tumours consisting of primitive granulocytic cells. They arise donovo, or are associated with other hematologic disorder such as acute myeloid leukemia, myelodysplastic syndrome, or myeloproliferative disordersa. The most common sites of involvement include the skin(leukemia cutis), head and neck, central nervous system, lymph nodes, and internal organ.The involvement of the breast is rare . A granulocytic sarcoma may precede or occur concurrently, or even after an acute myeloid leukemia.

Methods: A 35 years old female presented with painless lump in the right breast . A diagnosis of acute myeloid leukemia was made in other institution two years ago with a bone marrow transplantation.

Results: Lumpectomy was done and the gross examination revealed a well circumscribed lesion measuring 1.5 x1.7 x 0.8 cm. cut surface was solid and gray. Microscopic examination showed sheets and nests of neoplastic cells with moderate cytoplasm. These cells were surrounding blood vessels and mammary ducts with infiltration into surrounding fibrofatty tissue. These cells were strongly positive for LCA, MPO, CD117 and Lysozyme. They were negative for AE1/AE3, ER and PR.

Conclusion: Granulocytic sarcoma of the breast should be included in the differential diagnosis of patients with a history of acute myeloid leukemia presenting with breast lump.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Mok, Yingting National University Hospital Singapore	Poster	Ong, Ching Ching Ilancheran, Arunachalam Lim, Diana Gkeok Stzuan
Abstract No. 033				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Gastric-type mucinous carcinoma of the cervix associated with synchronous multifocal mucinous lesions of the female genital tract - clinicopathological findings of an unusual case

ABSTRACT TEXT

Objective: Gastric-type mucinous carcinoma is an uncommon variant of non-human papillomavirus-associated adenocarcinoma of the cervix associated with aggressive behavior and poorer prognosis than usual-type adenocarcinomas. A rare subset of patients with gastric-type adenocarcinomas of the cervix show synchronous and multifocal mucinous lesions involving the uterine cervix, corpus, fallopian tubes and ovaries.
Methods: We herein describe one such case of gastric-type mucinous carcinoma with an unusual clinical presentation and spectrum of morphological features that was associated with multifocal mucinous lesions in the female genital tract.
Results: Histological examination of the cervical tumour showed a mucinous carcinoma with gastric, intestinal and focal squamous differentiation. The tumour was negative for p16 and positive for MUC6, CK7, and PAX8. Positivity for CK20 and CDX-2 was observed in the areas of intestinal differentiation whilst p63 highlighted focal areas of squamous differentiation. The endometrium showed areas of gastric-type mucinous metaplasia, and the fallopian tube epithelium showed intestinal metaplasia.
Conclusion: This is an unusual case of mucinous carcinoma of the cervix which illustrates the range of divergent differentiation that can occur in these tumours. This case also adds to the short list of cases of mucinous carcinoma occurring in a setting of synchronous multi-focal mucinous metaplasia/ lesions of the female genital tract, the latter being one of several pathways by which these tumours can arise.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Wibisono, Fennisia Kardinah General Hospital Indonesia	Poster	Priyadi, Agus Amaliawati, Diana
Abstract No. 033				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Mucinous carcinoma of the breast, accidentally diagnosed in young female

ABSTRACT TEXT

Objective: Mucinous carcinoma (MC) also called as gelatinous carcinoma or colloid carcinoma, rare form of invasive breast carcinoma. The incidence is 0,5%-3% and usualy in older women. The characteric is the tumor is made up of tumor cells that "float" in pools of extracelullar mucin. Nodal metastases are rare (2% - 4%), but its include to important prognostic factor. It has a favorable prognosis due to the rare metastasis.
Methods: Here, we report a case of MC of right breast in a 32-year-old female with fibroadenoma component. The patient has chief complain that she has lump in the breast dextra as big as chicken egg for 2 years. there was no peau d'orange, no nipple discharge and occasionally painfull.
Results: we report a case of MC of right breast in a 32-year-old female. it is a rare form of invasive carcinoma. most of the mucinous carcinoma occur in older women, rarely in young women.
Conclusion: Here, we report a case of MC of right breast in a 32-year-old female with fibroadenoma component. The patient has chief complain that she has lump in the breast dextra as big as chicken egg for 2 years. there was no peau d'orange, no nipple discharge and occasionally painfull. mucinous carcinoma is a rare form of invasive carcinoma. most of the mucinous carcinoma occur in older women, rarely in young women.
Policy of full disclosure: IAP BURSARY APPLICATION

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Lim, John Harold S. University of Santo Tomas Hospital Dept. of Anatomic Pathology Manila Philippines	Poster	Yolo, Rowen
Abstract No. 034				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Clinicopathologic profile of triple negative breast cancer in a tertiary university hospital in metro-manila: A 5-year review

ABSTRACT TEXT

Objective: To correlate the histologic subtype with the clinico-pathologic data of triple negative breast carcinoma cases at the University of Santo Tomas Hospital (USTH) in Metro-Manila, Philippines.
Methods: Histopathology reports of invasive breast carcinoma with triple negative immunohistochemical profile were reviewed from January 2012 to June 2017. Using Chi-square test, the correlation of the histologic subtypes with patient's age, laterality, tumour size, multifocality, presence of in-situ carcinoma component, presence of lymphovascular invasion and lymph node status were evaluated.
Results: 70 cases of triple negative breast cancer from female patients aged 20 to 76 years old (mean age of 52.71 ± 12.20) were included in the study. Invasive ductal carcinoma of no special type (NST) is the most common histologic type with a total of 43 patients (61%). This study shows significant correlation between age and laterality (p=0.039). 68% of patient aged below 50 years old have right-sided lesions while 58%of those aged 50 years old and above have left-sided lesions. Statistical analysis of the other clinico-histologic parameters showed no significant correlation.
Conclusion: In this study, statistical analysis of triple negative breast cancer showed correlation with age and laterality, irrespective of other variable parameters including histologic subtype, tumour size, multifocality, presence of in-situ carcinoma component, presence of lymphovascular invasion and lymph node status. Further documentation and assessment of these data may influence prognostication, treatment and follow-up monitoring.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Mwaniki, Jackrogers Mbagathi Hospital Nairobi Kenya	Poster	Walong, Edwin
Abstract No. 034				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

The Pap smear test experience in Mbagathi district hospital (MDH) Nairobi, Kenya: A qualitative study

ABSTRACT TEXT

Objective: Aim was to examine the attitude of women who have had Pap test for early diagnosis of cervical cancer, factors affecting their decisions, their feelings and experiences during this period.
Methods: Data was collected using standard and purposive samplings from 87 women. Detailed interview was held during hospital visits. Data collection tool had two parts, one had information form with 12 questions identifying sociodemographic. The second part had semi-structured interview form with 15 alternative questions taking literature and pap-smear test into consideration. Data was analyzed using SPSS version 20.
Results: Study comprised themes such as decision of taking pap smear test (35,30.5% stated they'd take pap test without hesitation, of this 10,8.7% of them mentioned the reason of taking pap smear test was early diagnoses), knowledge about pap-smear test (21 18.3% had good knowledge of pap smear, with 10,8.7% emphasizing the importance of taking pap smear once a year), obstructive factors during pap smear test (25,21.8% stated gender and age of medical staff, while 20,17.4% mentioned shyness)
Conclusion: Since women perceive gynecological examinations differently from other examinations, they have different feelings in each process of the Pap smear test, Medical staff should advise women more clearly on the nature and advantages of the test.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 035 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Nasreldin, Magda University of Cairo Faculty of Medicine Cairo Egypt	Poster	El-Zenneni, Hazem Moustafa, Rowaa Riad, Amr El-Shazly, Ibrahim

ABSTRACT TITLE:

Assessment of leukemia inhibitory factor as a marker for endometrial receptivity and sub-endometrial blood flow in women with unexplained infertility

ABSTRACT TEXT

Objective: To assess endometrial receptivity in women with unexplained infertility using endometrial leukemia inhibitory factor (LIF),endometrial thickness and sub-endometrial vascular flow resistant index.

Methods: This clinical controlled trial was conducted at Ain Shams University Maternity Hospital during the period from August 2014 to September 2017 on 140 patients divided into two equal groups: Group I (study group): women with unexplained infertility defined as inability to conceive inspite of regular marital life for at least 12 months. Group II (control group): matched women with infertility due to tubal factor, recruited from outpatient gynecology or infertility clinic at Ain Shams University Maternity Hospital.Histopathological examination:Conventional D&C biopsy and IHC for LIF was done and scored. Sonographic examination was performed to assess endometrial thickness and sub-endometrial color Doppler resistance index.

Results: LIF staining intensity score was significantly lower in the unexplained infertility group compared to the tubal factor group. A cutoff value for LIF staining score of ≤1 predicted unexplained infertility with a sensitivity of 73.33% and specificity of 70.67%; whereas a cutoff of > 0.71 for subendometrial blood flow RI predicted unexplained infertility with a sensitivity of 70.67% and specificity of 86.67%. A cutoff of ≤10 mm for endometrial thickness had the highest sensitivity of 100%, but lacked specificity (only 16%).

Conclusion: LIF may be a predictor for unreceptive endometrium in cases of unexplained infertility. Moreover, subendometrial blood flow RI and endometrial thickness were significantly lower in the unexplained infertility group than the tubal factor group. LIF, subendometrial blood flow RI ,and endometrial thickness may be used in the prediction of endometrial factor status in cases of unexplained infertility (Abstract for IAP Bursary Application)

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 035 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Provatas, Ioannis Evangelismos Athens Greece	Poster	Koufopoulos, Nektarios Pavlou, Kalliopi Stamou, Chrysa Paraskevas, Andreas Mitropoulou, Georgia

ABSRACT TITLE:

Challenging diagnosis: A case report of a clear cell sarcoma-like tumor of jejunum

ABSRACT TEXT

Objective: Clear Cell Sarcoma-like Tumors (CCSLTs) of the gastrointestinal tract are very rare malignant tumors involving the wall of the stomach, the small and the large bowel. It affects predominately young adults of both genders and it has a high mortality rat. Histologically it is difficult to distinguish it from the conventional Clear Cell Sarcoma (CCS), as both these entities present similar morphology and they express S-100 but lack immunohistochemical expression of melanocytic differentiation.

Methods: We report a case of a 38 year-old male operated for a jejunal tumor and a liver mass. We received a segment of jejunum, the gross examination of which revealed an ovoid, grayish-white, elastic tumor, developing in the intestinal wall and extending into the perienteric fat. We also received a segment of hepatic tissue infiltrated by a tumor with the same features. On microscopic examination, both the tumors consisted of compact aggregations and nests of homogenous, epitheloid or spindle-shaped cells, with high nuclear atypia, eosinophilic and focally amphiphilic or clear cytoplasm, with medium-sized vesicular nuclei and apparent nucleoli, in a sclerotic stroma. 17 mitoses / 10 HPF were counted. The immunohistochemical control of the tumor cells revealed strong expression of Vimentin, S-100, PGP 9.5 and SOX-10 and negativity for cytokeratins, CD117, NSE, CD99, CD34, Synaptophysin, Chromogranin, Melan-A, MTF and HMB-45.

Results: Although the morphology of the tumor cells was compatible with the conventional CCS, the lack of Melan-A, HMB-45 and MTF expression made finally the diagnosis of a CCSLT of Jejunum with hepatic metastasis.

Conclusion: CCSLTs are rare mesenchymal tumors occurring in the gastrointestinal tract, the diagnosis of which is challenging, because of the morphological similarities with conventional CCS. However the negative immunohistochemical expression of melanocyte-specific markers leads to the hypothesis that they arise from gastrointestinal neuroectodermal precursor cells without potential to differentiate along the melanocytic lineage.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02 Abstract No. 035 Date 15.10.2018 & 16.10.2018	Breast pathology	Zawati, Imen Salah Azaiez Institute Dept. of Pathology Tunis Tunisia	Poster	Adouni, Olfa Goucha, Aida Betaieb, Ilhem Moukh, Haithem Ghozi, Radhia Bouzaine, Hatem Boubaker, Samir Rahal, Kaled Gamoudi, Amor

ABSTRACT TITLE:

Clinicopathological features predicting Her-2/Neu gene amplification in immunohistochemistry equivocal (2+) invasive breast cancer

ABSTRACT TEXT

Objective: This study aimed to investigate the correlation between some clinicopathological features and chromogenic in situ hybridization (CISH) amplification in immunohistochemistry (IHC) equivocal (2+) Her-2/Neu invasive breast cancer cases.

Methods: A total of 204 consecutive (2+) Her-2/Neu IHC invasive breast cancer samples were enrolled in this study. The association between clinicopathological variables and CISH result using 2013 ASCO/CAP guidelines was evaluated.

Results: The median age was 50 years (range, 23-80 years). Estrogen receptor (ER) and progesterone receptor (PR) were expressed in 165 (81.19%) and 142 (71%) patients respectively. The median Ki67 value was 23% (range, 4-80%). A high Ki67 value (>14%) was found in 72.13% (132/183) of the cases. Tumor grade was evaluable in 182 (89.21%) cases, 151 (82.96%) cases being grade 1-2 and only 31(17.3%) cases being grade 3. CISH amplification rate of Her-2/Neu was 26.3%. Grade 1-2 tumors were more frequently amplified than grade 3 tumors (21.42% vs 5.49%). Samples with high Ki67 (>14%) showed higher amplification rates than low Ki67 samples (35% vs 9%). ER and PR expression were decreased significantly in Her-2/Neu+ tumors compared with Her-2/Neu– tumors (ER, 20.6% vs 60.59%; PR, 17.5% vs 53.50%).

Conclusion: In this study, CISH amplification in (2+) Her-2/Neu breast cancer samples was correlated inversely with ER or PR expression. High Ki67 and low tumor grade significantly predicted Her-2/Neu 2+ amplification.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 036 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Bellil, Khadija Hopital des FSI la Marsa Service d´Anatomie Pathologique La Marsa Tunisia	Poster	Nfikha, Zeineb Ben Ghachem, Dorra Dhaoui, Amen Nefoussi, Haifa Hemdani, Nesrine Nfikha, Zeinab

ABSRACT TITLE:

Ovarian Bilharziasis: A case report

ABSRACT TEXT

Objective: we report herein a case of ovarian bilharziasis discovered at histology. Ovarian is not the commonest location and diagnosis is usually made at late stages. This case supports the necessity to include schistosomiasis as a potential etiologic factor of pelvic masses in patients from the disease endemic regions.

Methods: A 40 years old malian woman without medical past history presented with no specific pelvic pain evolving for 2 years. Clinical examination was normal. CT scan showed right adnexal mass, 8 cm in diameter. Rightsided adnexectomy was performed.

Results: Macroscopic examination of the sent specimen revealed a large greyish mass. At histopathological examination ovary was encrusted by the bilharzia eggs more or less calcified with terminal spines specific to Schistosoma haematobium species, surrounded by a granulomatous inflammatory reaction rich in giant cells of the foreign body type. Fianal diagnosis was Ovarian Bilharziasis.

Conclusion: In Schistosoma haematobium endemic zones, the genital schistosomiasis prevalence is 33–75%. Ovaries could also be affected along with other genital tract parts. Pathological lesions linked to the mechanical and toxi-allergic action of parasites and their eggs are crucial for the diagnosis.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Puccio, Ignazio University College London Research Dept of Pathology London United Kingdom	Poster	Butt, Mohammed Adil Oukrif, Dahmane Khan, Saif U Rehman Puccio, Francesca Patel, Dominic Lovat, Laurence B Novelli, Marco Hamoudi, Rifat Rodriguez-Justo, Manuel
Abstract No. 036				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Analysis of DNA ploidy and Ki67 expression on Barrett's crypts on the progression to oesophageal adenocarcinoma

ABSTRACT TEXT

Objective: In non-dysplastic Barrett's esophagus Ki-67 stains cells in the low part of crypt whilst the upper crypt and surface are negative. In low-grade dysplasia (LGD), Ki-67 positivity is confined to the upper crypt with occasional surface cell reactivity. In high-grade dysplasia, there is strong staining in the luminal surface. Chromosome instability, which induces abnormal amounts of DNA, promotes tumour progression. This study aims to analyse changes in cellular DNA content and differences in proliferation in different compartments of Barrett's crypts to investigate cellular organisation in the upper GI cancer sequence

Methods: Ki67 expression within Barrett's crypts was assessed on NBDE 11, LGD 15, HGD 14. The Barrett's crypts were divided into: crypt base (bottom third), middle region and the surface (upper third), respectively. Allred scoring system, one-way ANOVA with Bonferroni post-hoc analysis was used for statistical significance. DNA ploidy was carried out using image cytometric analysis

Results: One-way ANOVA showed significant difference across the three groups ($p < 0.0001$). Bonferroni post-hoc analysis showed a significant difference in the surface architecture between NBDE and HGD ($p < 0.0001$) and LGD and HGD ($p < 0.0001$). For the middle region, although there was no statistical significance between the groups, NBDE and LGD and LGD and HGD showed statistical trends ($p = 0.079$ and $p = 0.089$). For the basal compartment, there was a significant difference between NBDE and LGD ($p= 0.035$). Ploidy data showed an increase in aneuploidy in HGD with average DNA index scores of 1.45

Conclusion: This study showed an increase of DNA content in HGD and significant difference in the Ki67 expression between NBDE, LGD and HGD in the basal and surface regions. Middle compartments showed trends but additional NDBE, LGD and HGD groups need to be analysed to increase the statistical power

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	Zulfu, Azza Omdurman Islamic University Dept. of Histopathology Khartoum Sudan	Poster	Elkhatim, Ahmed Musa, Arwa Bedri, Shahinaz
Abstract No. 036				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

C IHC expression of estrogen receptor, progesterone receptor & her 2 receptor in 150 cases of breast cancer

ABSTRACT TEXT

Objective: The aim of this study was to investigate the estrogen receptor (ER),progesterone receptor (PR)and Her2 receptor status in Sudanese females with breast cancer

Methods: This was a cross-sectional study involving 150 female patients of breast cancer received at the National Health Laboratory khartoum ,Sudan during Jan-March2018. Sections of formalin fixed parrafin embedded tissue blocks were stained using monoclona antibodies against ER,PR and Her2 by Ventana XT Benchmark instrument .slides examined by two pthologists .

Results: Patients age ranged from 21to80 years .out of the 150 patients 104(69.3%)were EP positive ,78 (52%) PR positive .126 patients (84%) were her2 negative ,17(11.3%)Her2 positive and 7 patients (4.3%)were equivocal .

Conclusion: Most Sudanese breast cancer cases express ER(69%),PR(52%) Her2(11.3%) similar to other studies.IHC testing is essential for breast cancer is important for patient managment managment and it is better to be confirmed with FISH

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Ngimba, Caroline MUHAS Dept. of Anatomical Pathology Dar-es-Salaam Tanzania	Poster	Mwakyoma, Henry Chande, Hassan
Abstract No. 037				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Pregnancy Luteoma: A report of two cases and Literature Review

ABSTRACT TEXT

Objective: Description of clinical-pathological findings of two cases of luteoma of pregnancy and review of literature.

Methods: We report two cases of pregnancy luteoma which were incidentally found during caesarean section and were suspicious of malignancy. Cases were obtained retrospectively from the archives in the Department of Pathology at Muhimbili National Hospital, Dar es salaam, Tanzania. Demography and clinical information were recorded. Histological diagnosis was confirmed by the routine H/E stain.

Results: Two cases were reported. First case was a 31years female, Gravida three underwent emergency caesarean and an incidental mass was found on the left ovary, Oophorectomy was performed. Histology showed well circumscribed lesion composed sheets of large polygonal cells with abundant granular eosinophilic cytoplasm some with vacuoles, variably prominent nucleoli and few mitotic figures were present, follicles with colloid materials were seen. A second case was a 37 years old female, Gravida four underwent caesarean section and during operation an incidental cystic mass on the right ovary was removed. Histology showed an ovary with sharply circumscribed lesion containing large polygonal cells abundant eosinophilic cytoplasm with vacoulation in some cells, round nuclei, variably prominent nucleoli. Few areas showed follicles. The findings in both cases were consistent with luteoma of pregnancy.

Conclusion: Luteoma of pregnancy should be considered as differentials among ovarian masses found during pregnancy. It is a hyperplastic condition and regress after delivery. Wedge biopsy or frozen sections should be considered in such cases to avoid unnecessary Oopherectomy.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gastrointestinal pathology	Puccio, Ignazio University College London Research Dept of Pathology London United Kingdom	Poster	Butt, Mohammed Adil Khan, Saif U. Rehman Lovat, Laurence B Novelli, Marco Rodriguez-Justo, Manuel Hamoudi, Rifat
Abstract No. 037				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

Significant correlation between E2F and Ki67 p53 and Survivin: snapshot of the dynamics between cell cycle and apoptosis along the Barrett metaplasia-dysplasia-adenocarcinoma sequence

ABSTRACT TEXT

Objective: It has been postulated that the apoptotic process leads to the development of neoplastic clones with prolonged cell life. Survivin, an inhibitor of apoptosis, is integral to this process. E2F, a transcription factor protein, is involved in the cell cycle regulation through its interaction with retinoblastoma (Rb) and E2F transcription factor regulator. Cell cycle regulation involves many molecules that affect E2F phosphorylation, such as Ki67, TP53, TGF-b and growth factors such as EGF and PDGF.

The aim of this study is to analyse using immunohistochemistry (IHC), the interplay between apoptosis and cell cycle in the oesophageal adenocarcinoma pathway

Methods: Samples from 77 patients (squamous n=12, non-dysplastic Barrett's n=16, low-grade dysplasia (LGD) n=13, high-grade dysplasia (HGD) n=23 and invasive adenocarcinoma n=13) were immunostained for Survivin, p53, Ki67 and E2F expression. IHC expression was scored by 2 expert GI pathologists using the Allred system and analysed using one-way ANOVA with Bonferroni post-hoc analysis to examine the linear trend between the various groups in the upper GI sequence.

Results: Survivin expression shows up-regulation in the progression to OA. One-way ANOVA with Bonferroni post-hoc analysis confirmed expression with incremental pathological grades followed a linear relationship ($P=<0.0001$; $F=13$). The results show a significant correlation between E2F and Ki67, p53 and Survivin ($p < 0.01$), but that p53 is not significantly correlated to Survivin ($p = 0.113$) and marginally significant to Ki67 ($p = 0.33$). In addition, the results show that E2F has the lowest mean expression across the Barrett metaplasia–dysplasia–adenocarcinoma sequence.

Conclusion: This study shows that E2F expression differs significantly from Ki67, p53 and Survivin along the along the Barrett metaplasia–dysplasia–adenocarcinoma sequence. These results provide a phenotypic snapshot of the dynamics between the cell cycle, as shown by p53, E2F and Ki67 and apoptosis as shown by Survivin.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Nikolaidou, Anastasia Anticancer Hopital Thessaloniki Greece	Poster	Galidis, Eleftherios Dolkiras, Filippos Chatzinikolaou, Fotios Kapetanios, Georgios Michalopoulou, Despoina Chrysanthopoulos, Konstantinos
Abstract No. 038				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

A case report of a mullerian adenosarcoma of the uterus with sarcomatous overgrowth and concurrent ovarian high-grade serous adenocarcinoma.

ABSTRACT TEXT

Objective: Mullerian adenosarcomas (MA) are rare malignancies. They usually arise in the uterus (5% of uterine sarcomas), but they may also occur in extrauterine locations. They are biphasic tumors, with benign or atypical epithelial component and low-grade malignant stromal component. Mullerian adenosarcoma with sarcomatous overgrowth (MASO) represents 10% of uterine MAs and is characterized by the presence of a high-grade pure sarcomatous component, occupying at least 25% of the tumor volume. High-grade serous carcinoma of the ovary is a more common neoplasm, with a characteristic morphology and immunophenotype.

Methods: We present a case of a postmenopausal woman, aged 65 years old, with abnormal vaginal bleeding. Imaging studies were suggestive of uterine tumor with a coexisting lobulated mass of the right adnexa. Endometrial curettage was performed and a diagnosis of endometrial stromal sarcoma was given. The patient underwent hysterectomy with bilateral salpingo-oophorectomy. She was further subjected to omentectomy.

Results: Grossly, the endometrial cavity was occupied by a large, polypoid mass, arising from the uterine corpus, measuring 10X6,2X2 cm. Sections of both the ovaries and the omentum revealed multiple, scattered whitish areas. Microscopic examination of the polypoid mass revealed a biphasic tumor with a leaflike appearance, composed mostly of benign glands scattered throughout a malignant sarcomatous component. The epithelial component focally (1%) exhibited considerable cytological atypia. High-grade pure sarcomatous overgrowth (SMA+, desmin+, p53+, ER,CD10: focally+, Ki-67: 80%) involved about 90% of the tumour volume. There was >1/2 myometrial invasion. The whitish areas of both ovaries corresponded histologically to high-grade carcinoma (Ker7+, p53+, ER+, WT1 focally+, PR focally+, Ker20-, vimentin-), with infiltration of the right mesosalpinx and omental spreading. The tumours were clearly demarcated and separate from each other.

Conclusion: A diagnosis of uterine MASO, with concurrent high-grade serous carcinoma of the ovaries was established. This is an extremely rare phenomenon, as we did not find a similar case reported in the literature.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gynecological pathology	Raphael, Solomon University of Abuja Dept. of Pathology Abuja Nigeria	Poster	Mohammed Ibrahim, Imam
Abstract No. 038				
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:

Histopathological pattern of gastric biopsies: An experience in a tertiary institution in Nigeria

ABSTRACT TEXT

Objective: Disorders of the stomach are a frequent cause of clinical disease and a major reason for general and gastrointestinal outpatient clinic visits. We undertook this study to document the pattern of gastric lesions in a tertiary institution in northern Nigeria.

Methods: The study included 543 cases of gastric biopsies received at the Pathology department of Aminu Kano Teaching Hospital from January 2009 to December 2015. Haematoxylin and eosin (H & E) stained slides of cases were retrieved from the archives and where necessary, fresh slides were made from archival paraffin embedded tissue blocks and stained with routine haematoxylin and eosin. Special stain stains were employed where necessary while the tumours were classified according to the WHO classification of tumours. The clinical data of the patients such as age, sex, and clinical summaries were extracted from the histology request forms and patients' files where necessary.

Results: There were 346 (63.7%) males and 197 (36.3%) females with a male to female ratio of 1.8:1. The ages of the Patients ranged from 12 to 100 years with a mean age of 51 years. There were 420 (77.3%) non-neoplastic and 123 (22.3%) neoplastic lesions. Chronic gastritis (388/71.5%) and Adenocarcinoma (111/20.4%) constituted the most common non-neoplastic and neoplastic lesion seen respectively. The gastritis was superficial in 237 (61.1%) cases, active in 50 (12.9%) cases and atrophic in 37 (9.5%)cases. Helicobacter pylori organisms were detected in 62 (16%) cases. Helicobacter pylori gastritis was active in 52 (13.4%) cases, atrophic in 9 (2.3%) cases and metaplastic in 1 (0.3%) case. The other non-neoplastic lesions consisted of 14 (3.3%) cases of reactive gastritis, 9 (2.1%) cases of benign ulcer, 6 (1.4%) cases of non-chronic gastritis, and 3 (0.7%) cases of hyperplastic gastropathy.

Conclusion: Chronic gastritis is prevalent in our environment with Helicobacter pylori associated gastritis prevalence that is lower than the results of most studies in Nigeria. Adenocarcinoma is a common gastric lesion in our locality with a low frequency of premalignant histologic changes

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Orah, Nnamdi University of Lagos Nigeria	Poster	Banjo, Adekunbiola
Abstract No. 039				
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:

Prevalence and distribution of high risk human papillomavirus subtypes in invasive cervical cancer in South-West Nigeria

ABSTRACT TEXT

Objective: This study was carried out to determine the prevalence and distribution of human papillomavirus types in invasive cervical cancer in South-West Nigeria.

Methods: Paraffin embedded tissue blocks of 235 archival cervical cancers diagnosed in three laboratories from the South West of Nigeria were analyzed for the presence of HPV DNA.

Results: Of the 187 samples that were considered appropriate for HPV detection after histological evaluation, 160 (85.6%) were positive for HPV DNA. The five most common types identified as single types among HPV positive cases were HPV16 (46.9%), HPV18 (19.4%), HPV45 (11.9%), HPV35 (5.0%) and HPV31 (3.1%). Others were HPV33, 39, 51, 52, 56, 58, 59, 66 and 68. HPV16 and 18 in single/multiple infections accounted for 69.4% of the samples. Multiple infections were detected in 4.4%. All the adenosquamous and neuroendocrine carcinomas tested positive for HPV, while 86.1% and 66.7% of the squamous cell and the adenocarcinomas were positive respectively

Conclusion: These results are in consonance with reports from all other parts of the world that HPV 16 and 18 accounts for almost 70% of cervical cancers, supporting data that effective vaccination against these 2 types will reduce the cervical burden in South West Nigeria.

THIS IS FOR AN IAP BURSARY APPLICATION

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17	Gynecological pathology	Rashid, Sameera Hamad Medical Corporation Doha Qatar	Poster	Emran Soofi, Madiha
Abstract No. 039				
Date 17.10.2018 & 18.10.2018				

ABSTRACT TITLE:

I diopathic sclerosing encapsulating peritonitis (Cocoon abdomen) in an adult male: A rare and difficult diagnosis

ABSTRACT TEXT

Objective: Idiopathic sclerosing encapsulating peritonitis is a rare condition, mostly affecting adolescent girls. It is believed to be caused by recurrent low-grade or subclinical peritonitis presenting with nonspecific systems. It eventually progresses to sclerosis and membrane formation with the so-called cocoon formation. It is characterized by a thick greyish-white fibrotic membrane encasing the contents of the abdomen, predominately the small intestine.

Methods: We report the case of a 33-year old Egyptian male with no known co-morbidities that presented with upper abdominal colicky pain and distension for two weeks. The pain was intermittent, started in the upper abdomen and later involved the periumbilical region as well. There was no nausea or vomiting, decrease in appetite or altered bowel habits. Analgesics failed to improve the patient's condition. CT abdomen showed dilated distal jejunal to proximal ileal loops with enhancing walls with maximum dilated loop measuring 3.7cm, secondary to cocooning of middle and distal ileal loops by thick enhancing membrane findings suggesting small bowel obstruction secondary to sclerosing encapsulating peritonitis. Laparotomy was planned that showed 70cm small bowel loop entrapped in a pocket of thin membrane.

Results: The cocoon membrane was sent to histopathology that showed membranous tissue showing dense collagenous fibrosis, consistent with idiopathic sclerosing encapsulating peritonitis.

Conclusion: The diagnosis requires a high level of suspicion, as signs and symptoms are nonspecific and imaging findings are not always conclusive. Careful excision of the accessory peritoneal sac and lysis of adhesions between bowels is the best treatment.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 040 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Petronilho, Sara IPO Porto Dept. of Pathology Porto Portugal	Poster	Ferreira, Joana Vieira, Renata Félix, Ana Bartosch, Carla

ABSTRACT TITLE:
Accuracy of pre-surgical uterine sampling for the diagnosis of endometrial carcinosarcoma: Agreement between initial and final histologic findings

ABSTRACT TEXT

Objective: Surgical management of patients with uterine tumors is often based on the histological findings of pre-surgical tissue samples. Uterine carcinosarcomas are aggressive tumors which require extensive surgical staging, including hysterectomy, lymphadenectomy, omentectomy and peritoneal biopsies. We aimed to assess whether histological features from pre-surgical uterine samples correlate with those of surgical resection specimens in patients diagnosed with endometrial carcinosarcoma.
Methods: Retrospective selection of consecutive carcinosarcomas diagnosed in surgical specimens (n=70), in two tertiary centers (2000-2016) and comparison of the morphological features between pre-surgical uterine tissue samples and surgical resection specimens. Statistical analysis was performed to evaluate concordance rate and its association with pathological parameters.
Results: Pre-surgical uterine samples encompassed 28 biopsies and 42 curettage specimens. Surgical resection specimens had tumors with a gross median size of 8cm (2.5-17.5cm). Their epithelial component ranged from 1% to 95% of the total tumor mass. It most frequently consisted of endometrioid carcinoma (n=38, 54%), followed by serous (n=36, 51%) and undifferentiated (n=6, 9%) carcinoma. Heterologous sarcomatous elements were present in 30 cases (43%). Distribution by FIGO stage was: I- 46%, II- 11%, III- 26%, IV- 17%. Initial and final diagnosis was concordant in 43 out of 70 cases (sensitivity=61%). Discordant cases included pre-surgical representation limited to the epithelial (n=16) or mesenchymal (n=9) components or the exclusive presence of necrotic tumor in the presurgical sample (n=2). Discordance was not related to the type of sampling (p=0.109), tumor size (p=0.805), presence of heterologous elements (p=0.228), or FIGO stage (I vs. II/III/IV, p=0.099). The pre-surgical diagnosis significantly correlated with the relative amount of epithelial and mesenchymal components in surgical resection specimens (p=0.002).
Conclusion: Agreement between initial and final histological findings is moderate. Percentage of tumor components was the only pathologic feature that influenced pre-surgical samples' diagnostic accuracy of carcinosarcoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 040 Date 17.10.2018 & 18.10.2018	Gynecological pathology	Rekik, Wafa Tunis Tunisia	Poster	Zehani, Alia Chelly, Ines Chelly, Beya Zouaoui, Sonia Azzouz, Heifa Shili, Soukeina Haouet, Slim Kchir, Nidham

ABSRACT TITLE:
Heterotopic Pancreatic Tissue of the Stomach: Report of Two Cases

ABSTRACT TEXT

Objective: Introduction: Ectopic pancreas is defined as pancreatic tissue found outside the usual anatomic location of the pancreas. It is a relatively infrequent lesion most often found in the stomach. Histologically, heterotopic pancreas can be divided into the following 4 types: (1) those comprising all cell types (total heterotopia), (2) those composed of ducts only (canalicular heterotopia), (3) those comprising acinar cells only (exocrine heterotopia), and (4) those composed of islet cells only (endocrine heterotopia).
Methods: The author describes two cases of pancreatic heterotopia in the stomach detected after histopathological studies.
Results: The first case was a 57-year-old woman who presented with epigastralgia. Endoscopic examination was performed as a routine examination, and it revealed a submucosal tumor, and biopsy was taken. The biopsy showed heterotopic pancreatic tissue in the mucosa. It consisted of acinar cells and ducts.
The second case was a 54-year-old woman without symptoms. Endoscopic examination showed chronic gastritis. The biopsy revealed heterotopic pancreatic tissue in the mucosa. It consisted of acinar cells and ducts.
Conclusion: : Although presentation of ectopic pancreatic tissue in stomach is a very rare condition, it should be considered during gastroitestinal diagnostic in patients with nonspecific gastrointestinal symptomatology.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 041 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Poletaeva, Svetlana Samara State Med. University Samara Russia	Poster	Fedorina, Tatyana Kiseleva, Ekaterina Selezneva, Aleksandra Yunusova, Yulia Zotova, Yulia Natalya, Isakova Kaganov, Oleg

ABSTRACT TITLE:
Clinicopathologic features of endocervical adenocarcinomas: 32 cases

ABSTRACT TEXT

Objective: The aim of study is determine the relation between pathological features of endocervical adenocarcinomas (EAc) and clinical outcomes.
Methods: A retrospective review (2011-2018) of clinical, cytologic, pathohistological dates and ICH-stainings (p53, p16, ER, PR, Ki67) of EAc from 32 patients was carried. Preneoplastic lesions were identified in 19 cases. Mean age at diagnosis was 48,5 years (from 28 to 72, one case of clear cell EAc in 92-years woman), 2 cases in pregnant women.
Results: In 32 primary types of EAc were: 11 mucinous (8 well-differentiated, 3 high-grade); 3 gastric, 2 mucinous intestinal, 3 serous, 3 endometrioid, 8 clear cell, 2 adenosquamous. 6 patients had ultrasound signs of spreading EAc to the small pelvic tissue, vagina, ilium lymph nodes, 2 - with infiltration of the wall of the bladder. 2 In 9 cases significant histological heterogeneity, various ER and PR expression in different patterns within one tumour were revealed. 15 EAc were P53-positive. There is tendency for transformation into high-grade EAc in 14 cases. Results of PCR-RT studies of gene mutations associated with high oncogenic risk (BRCA1, BRCA2) were negative in all cases. HPV DNA types 16, 31, 35 were detected in 3 cases, HPV DNA types 33, 52, 58 were not detected in most cases. HPV DNA types -18, 39, 45, 59 – were detected in 5 cases. All patients underwent surgery treatment with lymphadenectomy and omentum resection, followed by radiochemotherapy, but distant metastases (in axillary and mediastinum lymph nodes, lung, brain, liver) appeared in 9 cases. The mean time to progression of the disease was 2,2 years (0,3-7 years).
Conclusion: Variable of histologic patterns in EAc are common and in cases with distant metastases clear call and mesonephroid types were prevailed. The rate of associated HPV-infection is higher in cases with squamous metaplasia or adenosquamous type of EAc.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 041 Date 17.10.2018 & 18.10.2018	Gynecological pathology	Rekik, Wafa Tunis Tunisia	Poster	Zehani, Alia Chelly, Ines Azzouz, Heifa Shili, Soukeina Zouaoui, Sonia Chelly, Beya Haouet, Slim Kchir, Nidham

ABSRACT TITLE:
Pneumatosis Cystoides Intestinalis: A Case Report

ABSTRACT TEXT

Objective: Pneumatosis intestinalis is a rare condition affecting 0.03% of the population. Pneumatosis cystoides intestinalis (PCI) is a benign primary cause. This is a rare disease characterized by multiple gas cysts in the submucosa or subserosa, principally within the colon. It has a myriad of aetiological causes and hence presentation can vary immensely.
Methods: We present a case of a 73 year old who presented in a gastroenterology outpatients department with a history suggestive of intermittent small bowel obstruction associated with abdominal pain.
Results: Physical examination revealed a soft abdomen with no significant tenderness to light palpation; however there was diffuse tenderness to deep palpation. An optical endoscopy was performed due to gastric ulcer. A submucosal round mass was detected in the jejunum with a stricture. The stricture was surgically resected, and a histopathological examination confirmed the presence of an intramural, submucosal cystic gas space, with a thin wall. A diagnosis of pneumatosis intestinalis was made and Symptoms had gradually improved.
Conclusion: Pneumatosis intestinalis is rare. The exact mechanism whereby cysts are formed is uncertain, but there has been speculation on their possible relationship with chronic pulmonary disease1 and other diseases in the gastrointestinal tract.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 042 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Sahraoui, Ghada Salah Azaiez Institute Tunis Tunisia	Poster	Sassi, Asma Boujelbene, Nadia Charfi, Lamia Doghri, Raoudha Abbes, Imen Sellami, Rym Mrad, Karima Driss, Maha

ABSTRACT TITLE:
Metastatic tumors to the colon and rectum

ABSTRACT TEXT

Objective: The colon and the rectum are uncommon sites of metastatic disease.The aim of this study was to evaluate the clinicopathologic features of secondary colorectal malignancies and the site distribution of the primary neoplasms.
Methods:
We retrospectively reviewed patients diagnosed with metastasis to the colon/rectum over a period of 17 years between 2001 and 2018 in our department.
Results:
Our study included 23 patients. There were 18 female patients and 5 male patients. The median age was 58 years old (range, 32 – 87 years old). Carcinomas were the most common histological type (n=20; 87%%) of which squamous cell carcinoma was the most frequent (17%). Diffuse large B cell lymphoma was diagnosed in one patient. Carcinosarcoma was reported in one female patient and fibrosarcoma arising from dermatofibrosarcoma protuberans in one male patient. Locoregional extension to the colon/rectum was noticed in 70% (n=16) of cases and lymphatic or hematogenous dissemination was reported in the remaining cases. The ovary was the most common primary site (22%), followed by endometrium (17%) and breast (13%). The primary site was unknown in 9% (n=2) of cases.
Conclusion:
Colorectal metastases are exceptional (0.34%) with breast carcinoma representing a potential diagnostic pitfall. Despite their scarcity, the pathologist should be aware of the possibility of secondary tumors especially in biopsy specimens and clinical information has to be considered. Patients usually present with a late stage of disease and a poor prognosis. The role of the pathologist in determining the primary or metastatic origin of the tumor is important. Morphology as well as immunohistochemical study using antibodies such as: CK7, CK20, CDX2 ... can be of great diagnostic help.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 042 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Trihia, Eleni Evangelismos Athens Greece	Poster	Provatas, Ioannis Nomikos, Iakovos Iavazzo, Christos Lambrodimo, Georgia

ABSTRACT TITLE:
Mucoepidermoid carcinoma of the vagina presenting as constipation

ABSTRACT TEXT

Objective: Mucoepidermoid carcinoma (MEC) of the vagina is an exceedingly rare variant of adenosquamous carcinoma. Histologically, resembles mucoepidermoid carcinoma of the salivary glands. MEC of the vagina has the potential to metastasize, usually to the regional lymph nodes. We report an exceedingly rare case of MEC of the vagina, with multiple distant lymph node metastases, presenting as constipation.
Methods: A 60-year old woman was admitted with constipation. Colonoscopy revealed extrinsic compression of the sigmoid colon. Before surgical intervention, an enlarged right cervical lymph node was presented. Fine needle aspiration revealed necrosis and ghost cells. Subsequent computed tomography revealed multiple enlarged lymph nodes in the right mediastinum, carina, left para-aortic region. A pathologic evaluation of a transthoracic biopsy specimen was undertaken. A gynaecological examination revealed a tumor mass of the vagina. Biopsy was undertaken. PET-CT of the scalp and clinical otorhinolaryngeal examination were unremarkable.
Results: The transthoracic biopsy specimen consisted of five fragments of 0,7cm to 2cm larger dimension. All of them comprised tumour fragments with large areas of necrosis and histologic and immunohistochemical features of a high-grade MEC. There was a limited peripheral lymphocytic component, but no architectural features of decidual lymph node. The biopsy of the vagina had similar histologic features.
Conclusion: Clinical, pathological and therapeutic aspects of this uncommon site of metastatic disease and clinical presentation are discussed, emphasizing the important contribution of special stains and immunohistochemistry to the diagnosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 043 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Kir, Gozde ISTANBUL MEDENIYET UNIVERSITY Istanbul Turkey	Poster	Toksoz Yildirim, Ayse Nur Soylemez, Tuce Alimoglu, Orhan

ABSTRACT TITLE:
A Pitfall of Frozen Section: Co-existence of Intrahepatic Bile Duct Adenoma and Esophagogastric Adenocarcinoma

ABSTRACT TEXT

Objective: Intrahepatic bile duct adenoma (BDA) is a rare benign liver tumor arising from the epithelium of the intrahepatic bile ducts. It's incidence is very low, and the majority of cases have been discovered incidentally at radiological imaging, intraabdominal operation, or autopsy. It can be difficult to distinguish benign bile duct proliferations from well-differentiated metastatic adenocarcinomas on histological grounds alone.
Methods: A 78 year old male patient was diagnosed with adenocarcinoma located in the endoscopic biopsy of esophagogastric junction in our pathology clinic. Pet CT showed a mild hypermetabolic lesion with subcapsular localization in the liver. The patient was planned for distal esophagectomy and total gastrectomy. Intraoperative consultation for this lesion in liver was requested during operation.
Results: Intraoperative consultation was reported as suspicious lesion for metastasis. Then distal esophagectomy and total gastrectomy is performed during the same operation. The microscopic sections of the liver showed the nodules to be composed of rather dense fibroconnective tissue in which were numerous small, slightly irregular duct structures lined with uniform columnar or cuboidal cells. The nuclei were oval or round and uniform in size. No pleomorphism or mitotic activity was seen. On immunohistochemical examination; CK7, CK19, MUC-1, MUC-6, EMA, CD10 were positive, and CK20, CDX2, P53 were negative. The final diagnosis was bile duct adenoma.
Conclusion: This lesion is still confused with metastatic carcinomas by both surgeons and pathologists during frozen sections performed in patients with known carcinomas. The differential diagnosis included cholangiocarcinoma and metastatic adenocarcinoma, biliary adenofibroma, Von Meyenberg syndrome and primary sclerosing cholangitis .
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 043 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Saeed, Zara Shaukhat Khanum Cancer Hospital Dept. of Histopathology Lahore Pakistan	Poster	Hassan, Usman

ABSTRACT TITLE:
Frequency of napsin A positivity in ovarian clear cell carcinoma and serous carcinomat

ABSTRACT TEXT

Objective: Ovarian clear cell carcinoma (OCCC) are known for their distinct morphology. These tumors behave aggressively. It is important to differentiate it from other high grade ovarian epithelial tumors due to its high chemoresistance. The aim of our study was to differentiate clear cell carcinoma and serous carcinoma by performing Napsin A on both types
Methods: The study was conducted in Shaukat Khanum Memorial cancer hospital Lahore. A total of N=59 cases of previously diagnosed cases of clear cell carcinoma and high grade serous carcinoma were selected for this study. The slides were reviewed for diagnosis. Napsin A (MRQ-60) Ventana monoclonal antibody was applied to all the cases. Weak to strong membranous staining in more 5% tumor cells was considered positive.
Results: Mean age of patients in the study was 46.25±11.16 years. There were n=33 (55.9%) cases of serous carcinoma, n=23 (38.9%) cases of clear cell carcinoma and n=3 (5.08%) cases had mixed histologies. CK7 was applied in n=30 cases and showed positive expression in all the cases. Napsin A was found positive in all the cases of clear cell carcinoma as compared to only n=1 (3%) high grade serous carcinomas and none of the mixed tumors. The relations ship was significant with a p-value of 0.00
Conclusion: Napsin A shows significant difference of expression between high grade serous carcinoma and clear cell carcinoma ovary.Therefore, Napsin A is a sensitive and specific marker for the diagnosis of ovarian Clear cell carcinoma and can reliably differentiate it from high grade serous carcinoma ovary
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 044 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Sahraoui, Ghada Salah Azaiez Institute Tunis Tunisia	Poster	Sassi, Asma Charfi, Lamia Boujelbene, Nadia Doghri, Raoudha Abbes, Imen Sellami, Rym Mrad, Karima Driss, Maha

ABSTRACT TITLE:
Secondary ovarian malignancies

ABSTRACT TEXT

Objective: The diagnosis of the metastatic origin of an ovarian tumor can be difficult to make as it commonly mimics a primary ovarian malignancy. The aim of this study was to evaluate the clinicopathologic features of secondary ovarian malignancies and the site distribution of the primary neoplasms.
Methods: We analyzed 84 cases of ovarian metastases over a period of 18 years between 2000 and 2018 in our department.
Results:
The median age was 49 years old (17 – 77). Carcinomas were the most common histological type (92%) followed by neuroendocrine tumors (5%). Diffuse large B cell lymphoma was diagnosed in one patient and gastrointestinal stromal tumour(GIST) in one patient. Of carcinomas, 49% were signet ring cell carcinomas, 21% were invasive carcinoma of no special type and 19% were mucinous adenocarcinoma. The gastro-intestinal tract was the most common primary site (65%), followed by breast (17%) and the pancreatobiliary system (5%). The other primary sites found are the kidney and the lung. Bilateral ovarian involvement was present in 78% of the patients, including all patients with tumors of the stomach (Krukenberg tumors). All patients aged under 35 years old presented with ovarian metastases of gastrointestinalneoplasms of which the stomach was the most common primary (56%).
Conclusion:
In case of an ovarian malignancy, metastatic disease should always be considered especially that ovarian metastases may precede the detection of the primary tumor in 38% of cases.
Preoperative distinction between primary and metastatic ovarian neoplasms is very important in order to manage the appropriate treatment. Gross and histological findings that favors a metastatic tumor include bilaterality, surface implants, a nodular and infiltrative pattern, single cell invasion, signet ring cells and vascular invasion. PAX8 may be helpful particularly to rule out gastrointestinal ovarian metastasis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 044 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Srivastava, Pallavi RMLIMS Dept. of Pathology Lucknow India	Poster	Husain, Nuzhat Shukla, Saumya Anand, Nidhi Mishra, Shridhar Chauhan, Smita Masood, Shakeel Pandey, Anshuman

ABSTRACT TITLE:
PDL-1 in colorectal carcinoma: Is BRAF co-expressed?

ABSTRACT TEXT

Objective: To correlate PDL-1 expression in colorectal carcinoma (CRC) with clinico-pathological parameters, BRAF mutation and Microsatellite repair (MMR) protein deficiency
Methods: Study group comprised of 110 cases of resected CRC. Tissue microarrays were stained with immunohistochemistry using antibodies to PDL1 (VENTANA SP263) and assessed at cut off ≥1%, ≥5%, ≥50%, BRAF 600VE (VE1) Mouse Monoclonal Antibody and MMR protein antibodies [MLH-1 (M1), PMS2 (EPR3947), MSH2 (G219-1129), anti-MSH6 (44)].
Results: PDL-1 was expressed in 40% CRC, BRAF in 11%, MLH1/PMS2 loss in 9% and MSH2/MSH6 loss 12.7%. Correlates of PDL1 expression are shown in Table 1. Nine of 12 PDL-1 positive cases showed BRAF, 10 cases of MLH1/PMS2 loss 6 expressed PDL1. (Table1 attached as image)
Conclusion: A high fraction of colorectal cancers express PDL1 which can be considered a potential candidate for immunotherapy. Significant co-expression of PDL1 with BRAF expression and MMR loss was evident.
(Abstract for IAP bursery application)
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 045 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Salillas, Annette L . GCGMH Tagbilaran City Philippines	Poster	Chatto, Joseph Antoine F.

ABSTRACT TITLE:
Gastric type mucinous carcinoma of the cervix presenting as ovarian masses: A case report

ABSTRACT TEXT

Objective: To be able to diagnose metastatic ovarian masses from a rare primary cervical mucinous adenocarcinoma.
Methods: A 43- year -old female (G0P0) presented with prolonged menstrual bleeding and right flank pain radiating to the hypogastrium. Physical examination revealed a fixed, tender mass at the right lower quadrant. The cervix was nodular and firm. Transabdominal ultrasound revealed multi-septated ovarian masses. Total abdominal hysterectomy with bilateral salpingo-oophorectomy, appendectomy and frozen section of both ovaries were performed.
Results: Frozen section diagnosis was Mucinous Cystadenoma (right ovary) and Mature Cystic Teratoma (left ovary).
The uterus measured 9.0 x 7.0 x 6.0 cm. Endometrial and myometrial thickness were 0.10 cm and 4.0 cm, respectively, with slit--like spaces in the latter. The detached cervix was fragmented. The right ovary showed a multiloculated mass containing mucinous fluid with no solid areas on sectioning. The left ovary had a biloculated mass, one contained hairs and sebum and the smaller cyst contained mucinous fluid. The fallopian tubes and appendix were grossly unremarkable. Histologically, irregular, abnormally -shaped glands lined by a single layer of columnar cells with bland, basally -located nuclei and clear cytoplasm associated with desmoplasia were seen in the entire thickness of the cervix as well as in the endomyometrium and bilateral ovaries. These tumor cells in the cervix, endomyometrium and both ovaries were CK7 positive and negative for ER, PR, CK20 and CDX2.The patient is alive but complains of persistent hypogastric pain eight months post--op.
Conclusion: We described an extremely rare case of Cervical Mucinous Adenocarcinoma, Gastric type metastasizing to the uterine corpus and bilateral ovaries. Benign appearing glands involving both ovaries is a diagnostic challenge. They may have a sinister origin and should be investigated rigorously.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 045 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Tounsi, Haifa Institut Pasteur of Tunis Tunis Tunisia	Poster	Jaballah, Amira Kabbage, Maria Hamdi, Yosr Ben Ayed, Ines Madhioub, Mouna Hamzaoui, Lamine Abdelhak, Sonia Azzouz, Moussadak Boubaker, Samir

ABSTRACT TITLE:
De novo variation on POLE gene in Tunisian patients with hereditary non polyposis colorectal cancer

ABSTRACT TEXT

Objective: Polymerase proofreading-associated polyposis (PPAP) is a recently described, autosomal dominant condition that is functionally related to Lynch Sydrome (LS). Specific germline missense mutations in the POLE and POLD1 genes cause proof-reading deficiency and tumorigenesis. Whole-genome sequencing combined with linkage disequilibrium studies were recently conducted in families affected by multiple colorectal adenomas and early-onset CRC. By doing so, p.Leu424Val and p.Ser478Asn mutations in POLE and POLD1 DNA polymerases, respectively, were established as a new high-penetrance cause of germline CRC predisposition with an autosomal dominant pattern of inheritance.
In this study, we aimed to gain a better understanding of the phenotypic and genotypic characteristics of this syndrome in Tunisian patients, to establish specific criteria for POLE and POLD1 mutation screening.
Methods: This study enrolled 5 index cases, from 5 different families with familial non polyposis CRC. The p.Leu424Val and p.Ser478Asn mutations detection was performed using simple PCR followed by direct sequencing. 59 whole exome sequencing of subjects without CCR were used as controls.
This study enrolled 5 index cases, from 5 different families with familial non polyposis CRC. The p.Leu424Val and p.Ser478Asn mutations detection was performed using simple PCR followed by direct sequencing. 59 whole exome sequencing of subjects without CCR were used as controls.
Results: Our results showed that none of the two previously reported mutations in POLE and POLD1 were found. However, an intronic variation (rs148851899), in the intron (13-14) of the POLE gene, was detected in the 5 index cases. This variation was considered as rare with an allelic frequency (MAF: < 0.01) and it has not been reported up to now. It was also absent in the 59 investigated Tunisian exomes. By using several bioinformatics tools this variant is probably involved in abnormal splicing process.
Conclusion: Due to the current need for guidelines for POLE / POLD1 genetic testing, preliminary recommendations for routine use are to be defined. To this end, other families are being explored.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 046 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Sassi, Asma Salah Azaiez Institute Tunis Tunisia	Poster	Sahraoui, Ghada Boukelbene, Nadia Chafti, Lamia Doghri, Raoudha Sellami Dhouib, Rym Abbes, Imen Ben Ghorbel, Radhia Mrad, Karima Driss, Maha

ABSTRACT TITLE:
Female genital tuberculosis: Case series of 18 patients

ABSTRACT TEXT

Objective: The aim of this study was to determine clinical and histological findings of female genital tuberculosis.
Methods: We performed a retrospective study of female patients diagnosed with genital tuberculosis in the department of pathology of Salah Azaiez Institute over a period of 20 years (1996-2015).
Results: Our study included 18 women aged between 36 and 80 years old (mean age = 52). No past medical history was reported. Surgical specimens included hysterectomy with bilateral salpingo-oophorectomy in 7 cases, inter-adnexal hysterectomy in 4 cases, endometrial curettage in 3 cases, adnexectomy in 3 cases and cervical conisation in one case. Genital tuberculosis involved the endometrium (n=11), the fallopian tube (n=9), the ovary (n=3) and the cervix (n=1). Multifocal genital tuberculosis was noted in 6 cases. The final diagnosis was histologically made and revealed in all cases tuberculoid granuloma with epithelioid and langhans giant cells. Caseous necrosis was absent in 8 cases of which 5 were located in the endometrium.
Conclusion: In the genital location, tuberculosis is a challenging diagnosis because of nonspecific symptoms, which may lead to therapeutic delay and increases the risk of infertility. Genital tuberculosis should be kept in mind for any atypical or latent gynecological functional symptomatology. Though the fallopian tube is the most common site of genital tuberculosis in literature, the endometrium was the most frequent location in our series.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 046 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Tounsi, Haifa Institut Pasteur of Tunis Tunis Tunisia	Poster	Ben Ayed, Ines Attafi, Salsabil Ben Jemii, Nadia Yaiche, Hamza Habbachi, Essia Mezghani, Najla Abdelhak, Sonia Boubaker, Samir Jaballah, Amira

ABSRACT TITLE:
EGFR expression pattern in Tunisian wild type RAS patients

ABSTRACT TEXT

Objective: Currently, epidermal growth factor receptor (EGFR) is a therapeutic target in metastatic colorectal cancer (mCRC). The benefit from EGFR inhibitors appears to be limited to a subset of patients with RAS wild type. The lack of agreed reproducible scoring criteria for EGFR immunohistochemistry has, in various clinical trials yielded conflicting results as its use as a companion diagnostic. This has resulted in this test being removed from the licence for the drug panitumumab and not performed in clinical practice for cetuximab. Therefore, we aimed to evaluate EGFR expression in mCRC patients with wild type KRAS status
Methods: This study enrolled 27 patients with mCRC at the same stage and grade presenting RAS wild type status. To evaluate EGFR expression we investigated immunohistochemistry (IHC) on formalin fixed paraffin embedded sections using NCL-EGFR (NCL-EGFR-384, Novocastra) monoclonal antibody. The pattern of staining and the scoring were assessed. Scoring took into account the percentage of stained tumor cells (0-100%) as well as staining intensity category (0-3).
Results: Our results showed that among the 27 samples, five had negative staining (18.5%), all the positive samples showed cytoplasmic staining. Seven harbored a score 1 (26%) whereas, fifteen had a score 2 to 3 (55.5%).
Conclusion: These results show that 44.5% (score 0 and 1) of patients receiving EGFR inhibitor therapies had a weak and cytoplasmic expression of the targeted receptor. Cytoplasmic EGFR expression as well as his overexpression have been reported to be linked to a poorer prognosis in colorectal cancer. This could explain, at least in part, the difference in response observed in treated patients and should be taken into account for the selection of patients to avoid toxicity of an inactive drug.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 047 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Titiloye, Nicholas KNUST Dept. of Pathology Kumasi Ghana	Poster	Duduyemi, Babatunde Okai, Isaac Konney, Thomas Fefemwole, Prince

ABSTRACT TITLE:
Analysis of endometrial biopsies in a tertiary hospital in Ghana

ABSTRACT TEXT

Objective: The endometrium is subjective to effect of cyclical hormonal changes and disruptions in these hormones predispose the endometrium to various pathologies. Endometrium is one of the commonest biopsies seen in our Department. The aim of this study is to analyse the clinical demography and histological diagnoses of endometrial biopsies received in our department between 2008 and 2017.
Methods: We abstracted the clinical details and histological diagnoses of all endometrial biopsies received at our department within 10 years study period. The slides for the cases were retrieved and reviewed. The results obtained were analysed using SPSS 21
Results: We analysed 1132 endometrial biopsies. The age range was 17 to 96 years, mean of 43.11 (SD 13.77). Most of the cases clustered around 3rd to 6th decade with dwindling frequencies at the extreme of ages. Highest age group was 40-49 years with 329 cases (29.06%). The histological diagnoses were benign tumours in 397 cases (35.35%), malignant in 95 cases (8.39%), inflammatory in 30 cases (2.65%), non- neoplastic in 346 cases (30.57%) and normal in 264 cases (23.32%). The benign neoplasms include leiomyoma (17.33%), endometrial polyps (33.02%) and endometrial hyperplasia (27.4%). The endometrial hyperplasias were simple (85%), complex (8%) and complex with atypia (7%).The gestational trophoblastic disease seen were complete mole (34 cases), partial mole (23 cases), invasive mole (1 case) and choriocarcinoma (7 cases). The commonest malignant lesion was adenocarcinoma seen in 59 cases (13.8%). Endometrial stroma sarcoma, neuroendocrine carcinoma, adeno-squamous carcinoma and metastatic carcinoma were seen in variable percentages. The malignant tumours have predilection for the older age group above 60 years while the benign lesions were spread through the various age groups.
Conclusion: Our data represent a widespread of endometrial pathologies. Endometrial hyperplasia and gestational trophoblastic disease were relatively common in our study.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 047 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Ulase, Dita Riga Stradins University Dept. of Pathology Riga Latvia	Poster	Plum, Patrick Sven Chon, Seung-Hun Berlth, Felix Zander, Thomas Alakus, Hakan Bollschweiler, Elfriede Hölscher, Arnulf Strumfa, Ilze Quaas, Alexander Löser, Heike

ABSRACT TITLE:
IMP3 expression is associated with aggressive tumour features in early invasive esophageal adenocarcinoma

ABSTRACT TEXT

Objective: The incidence of esophageal adenocarcinoma (EAC) is increasing in Western populations. Despite advances in early diagnostics and treatment, the mortality remains high. Lymphatic invasion (LI) is an adverse prognostic factor denoting aggressive course. Insulin-like growth factor-II mRNA-binding protein 3 (IMP3) is an oncofetal protein that might predict increased aggressiveness in different tumours. The study aim was to evaluate the expression of IMP3 in early invasive EACs.
Methods: In 75 early invasive EACs, the invasion depth (pT1a, pT1b), tumour grade (G), presence of LI and lymph node metastasis (LNM) was assessed. Tumours were classified as IMP3+and IMP3- by immunohistochemistry using tissue microarrays. Statistical analysis was performed by IBM SPSS software.
Results: The study included 30 (40%) pT1a and 45 (60%) pT1b EACs. Eight (10.6%) of them were G1, 50 (66.7%) - G2 and 17 (22.7%) - G3 tumours. Among 49 (65.3%) IMP3+ carcinomas, 16 were T1a and 33 - T1b. In 26 (34.7%) IMP3- carcinomas, 14 were T1a and 12 - T1b. LI was detected in 27 (36%) cases from which 85.2% (n=23) showed IMP3 positivity. IMP3 expression was seen in 87.5% (n=7) out of 8 (10.7%) cases with LNM. Independent t-test showed statistically significant difference by tumor grade (p=0.0001) and lymphatic invasion (p=0.003) but not pT (p=0.076) and pN (p=0.099) between IMP3+ and IMP3- carcinomas.
Conclusion: In early invasive EACs, IMP3 expression is significantly associated with higher tumour grade and lymphatic invasion. No significant differences by depth of invasion and lymph node status between IMP3+ and IMP3- carcinomas were found. However, IMP3+ tumours tended to have higher pT and pN stage than IMP3- tumours. Thus, further studies are needed.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 048 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Titiloye, Nicholas KNUST Dept. of Pathology Kumasi Ghana	Poster	Duduyemi, Babatunde Okai, Isaac Konney, Thomas Fefemwole, Prince

ABSTRACT TITLE:
Histopathological analysis of ovarian specimens in a tertiary hospital in Ghana

ABSTRACT TEXT

Objective: Ovarian tumours both benign and malignant are relatively common worldwide. Specimens from the ovaries are commonly received in our department for histological appraisal. This study reviewed retrospectively the clinical data and the diagnoses made over a ten year period.
Methods: All reports of ovarian cases were retrieved from the department record and clinical demographics and histological diagnoses were abstracted. Archival slides were retrieved and reviewed. When slides were not found blocks were sectioned for review and data obtained were analysed using SPSS 21.
Results: Our Department received 492 ovarian biopsies during the study period. The age range was 2 to 96 years with a mean of 31.62 (SD 13.61). Most of the cases were seen in the 3rd and 4th decade with frequency of 33.7 and 27.85% respectively. 14 cases (2.85%) were childhood tumours while 25 cases (5.08%) occurred after 60years. Bilateral lesions were 18% while lesions in right and left ovaries were 43 and 39% respectively. The final diagnoses were benign in 215 cases (43.7%), borderline and malignant in 98 cases (19.9%) and non- neoplastic in 179 cases (36.38%). The spectrum of the benign cases showed benign cystic teratoma to be the commonest with 118 cases (54.88%), while cystadenoma, fibroma, granulosa cell tumour and Brenner's tumour were seen in variable percentages. The spectrum of the borderline and malignant cases showed the adenocarcinomas to be the highest cases (39.8%). Other tumours seen in this category were immature teratoma, non-Hodgkin lymphoma, dysgerminoma, yolk sac tumour, metastatic tumours in variable percentages.
Ovarian cysts, endometriosis, ovarian gestation, polycystic ovarian syndrome, tuberculosis, abscess and schistosomiasis were seen in the non –neoplastic category.
Conclusion: Benign and non -neoplastic ovarian lesions occur more frequently than malignant lesions in our environment. Cystadenocarcinoma is the most common malignant lesion comparable to other studies worldwide.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 048 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Yacoub, Sarah Farhat Hached Hospital Dept. of Pathology Sousse Tunisia	Poster	Marwa, Mhiri Aya, Ben Hadj Khelifa Ayda, Bouriga Atika, Baccouche Moncef, Mokni

ABSRACT TITLE:
Anorectal melanoma: Histopathological and immunohistochemical features of two cases

ABSRACT TEXT

Objective: Anorectal melanoma (ARM) is a rare tumor representing less than 1% of anorectal cancers. it appears in the third rank of frequency after the melanomas of the skin and the retina , and is associated with a very poor prognosis. Our aim is to specify the pathological aspects of anorectal melanoma
Methods: We report 2 rare cases of ARM diagnosed in 2018.
Results: There were two women aged of 75 and 68 years old, presented with anal bleeding.
Endoscopy showed a tumoral process in two cases, biopsy concluded to an anorectal melanoma in one case and to an undifferentiated carcinoma in the second.
Both patients underwent abdominoperineal resection (APR), preceded by neoadjuvant radio and chemotherapy in one case.
The lesion size at diagnosis was 9 cm, and 3 cm localized in the anorectal region in both cases.
Tumor thickness was estimated at 4,5 and 3cm. The tumor was vegetating, ulcerated and dark in one case pediculated, brownish with dark zones, in the other. They shared the same morphologic characteristics: cells were epithelioïd type, and spindle shaped, arranged in nests and sheets, associated to a frequent and intense melanin pigmentation. Junctional activity under the squamous epithelium and elevated and atypical mitotic index were encountred.
Only vascular invasion was found in both patients
Six micro metastatic lymph nodes out of 12 were found in the first case and only two negative lymph nodes in the second case.There were staged: T3N2a et T4N07. IHC analysis was performed with melanoma-associated antigens HMB45 and Melan-A. it showed a strong positivity
Conclusion: ARM are tumors with high malignant potential, and their rarity makes it difficult to establish diagnostic and therapeutic procedures with statistically significant results. Immunohistochemistry is essential for achromic lesions
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-17 Abstract No. 049 Date 17.10.2018 & 18.10.2018	Gastrointestinal pathology	Dursun, Nevra University of Health Sciences Istanbul Turkey	Poster	Akgün, Hülya Yeni, Begüm

ABSTRACT TITLE:
Osseous metaplasia in a colonic polyp: A rare phenomenon

ABSTRACT TEXT

Objective: Inflammatory pseudopolyps generally develop as a response to inflammatory, infectious or ischemic colitis. They are composed of inflamed lamina propria and distorted colonic glands. Rarely they might cause symptoms of obstruction and surgical excision is indicated.
Methods: Case
A 48-year-old woman applied to the hospital with chronic epigastric pain and constipation. She had a history of cholecystectomy 3 years ago and iron deficiency which she had taken medicine for. A colonoscopy was performed and revealed a 3 mm polypoid lesion at the level of hepatic flexura in colonic mucosa.
Results: Histopathologic examination revealed an inflammatory pseudopolyp with osseous metaplasia in its stalk region with foreign bodies and foreign body reaction in and around the newly formed bone.
Conclusion: Osseous metaplasia in these polyps in colonic mucosa is a rare finding which we haven't got a full acknowledgement of the process.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 049 Date 15.10.2018 & 16.10.2018	Gynecological pathology	Tsavari, Aikaterini Tzaneio General Hospital Dept. of Pathology Piraeus Greece	Poster	Koulia, Kalliroi Galanopoulos, Georgios Ieronimaki, Ioanna Zizi-Sermpetzoglou, Adamantia

ABSRACT TITLE:
Primary peritoneal serous carcinoma: A rare case

ABSTRACT TEXT

Objective: Primary peritoneal serous carcinoma(PPSC) is an extremely rare malignancy that was first described in 1959.This type of cancer arises from the peritoneal epithelium and is similar to serous ovarian carcinomaA diagnosis is difficult preoperatively.
Methods: Woman 74-year-old presented to our hospital with pain,abdomen distension and constipation.The thorax CT scan was unremarkable and the abdominal CT revealed a mild thickening of the rectal wall.A surgical procedure was performed and sent for rapid biopsy multiplenodulesof peritoneum (2cm) and was given a positive response to malignancy.
Followed by hysterectomy, removal of a large intestine (26 cm) and gall bladder.
Results: Histological examination showed malignant neoplasm with morphologically and immunohistochemicaly characteristics CK7(+),WT1(+),BerEP4(+),ER(+),P16(+),CDX2(-),CK20(-). Calretinin(-),Ca19-9(-) showed serous papillary carcinoma.Uterus ovaries,large intestine and the gall bladder were free of tumor.Similar immunophenotypic features are observed in multiple mesenteric nodules
The non-participation of the uterus and the ovaries and the immunohistochemical examination confirmed diagnosis primary peritoneal serous carcinoma.
Conclusion: According to the Gynecology Oncology Group criteria,for diagnosisare as follows: i) The ovaries are either absent or normal in size; ii) the involvement of the extraovarian sites is greater than the involvement of the surface of either ovary; iii) histopathological and cytological characteristics of the tumors similar to those for epithelial ovarian cancer
PPSC appears to be a part of the hereditary breast-ovarian cancer syndrome as the frequency of BRCA mutations in peritoneal and ovarian cancer cases is comparable. Patients with germ line mutation of BRCA1 develop multifocal origin of PPSC.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 050 Date 15.10.2018 & 16.10.2018	Gynecological pathology	**Tsavari, Aikaterini** **Tzaneio General Hospital Dept. of Pathology Piraeus Greece**	**Poster**	Koulia, Kalliroi Arkoumani, Elissavet Manoloudaki, Kassiani Vasilakaki, Thivi

ABSTRACT TITLE:
An uncommon case of uterine lipoleiomyoma

ABSTRACT TEXT

Objective: Lipoleiomyomas are very rare uterine tumours and are considered to be a variant of uterine myomas.lipoleiomyoma consists of variable proportion of mature lipocytes and smooth muscle cells.The pathogenesis of lipoleiomyomas remains unknown,however several hypotheses exist.The most widely accepted theory is fatty metamorphosis of smooth muscle cells into adipose tissue.
Methods: A 58 year old postmenopausal woman presented with a 5 month history of abdominal fullness and vaginal bleeding since 20 days. Her transvaginal ultrasound (US)showed the present of a well circumscribed hyperehoic solid mass within the lumen of the uterus measuring 5cm. in greatest diameter. Also there were six intramural and subserosal nodules from 0,5cm to 1,7cm. in diameter. The patient underwent hysterectomy with bilateral salpingo-oophorectomy.
Results: Histological examination of the mass showed a mixture of bland spindle shaped smooth muscle cells without nuclear atypia with a significant amount of mature adipocytes. Based on the above finding the tumour was diagnosed as a benign lipoleiomyoma. Sections from the other nodules showed histomorphology of conventional uterine leiomyomata.
Conclusion: Lipoleiomyoma is an unusual fatty tumour.Lipoleiomyomas are mostly seen in advanced age and showed a favorable outcome.If asymptomatic,lipoleiomyomas require no treatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 051 Date 15.10.2018 & 16.10.2018	Gynecological pathology	**Tziakou, Paraskevi** **Athens Greece**	**Poster**	Arkoumani, Elisavet Nifora, Martha Ieronimaki, Ioanna Zizi-Sermpetzoglou, Adamantia

ABSTRACT TITLE:
Leiomyo adenomatoid tumor: A rare variant of uterine adenomatoid tumor

ABSTRACT TEXT

Objective: Adenomatoid tumor (AT) occurs in the testicular spermatic cord of men and in the fallopian tube and uterus of females. These tumors are usually incidental findings in females, whose uteri are removed for various other indications. Leiomyo-adenomatoid tumor (LMAT) is a variant of adenomatoid tumor, in which the smooth muscle component is predominant.
Methods: A 40-year-old woman presented to the gynecology outpatient department of our hospital with complaints of painful vaginal bleeding during the last 10 months. Clinical examination revealed multiple tumors in the uterus leading to hysterectomy and salpingoophorectomy. Grossly the uterus measured 10x5x5 cm. During dissection multiple submucosal, intramural and subserosal tumors were found in the uterine wall measured 4cm-8cm.Three intraserosal tumors had polycystic appearance with gelatinous content and grey fibrous areas.
Results: Microscopic examination revealed multiple uterine leiomyomas. Few sections from the subserosal location revealed leiomyoma with extensive clustering of small cystic spaces, as well as sheets of cells located in the stroma with vacuolated cytoplasm separating the smooth muscle bundles. These spaces were lined by either flattened or cuboidal epithelium. Immunohistochemical analysis showed positivity at Calretinin and Vimentin of these epithelial cells. The smooth muscle fibers were identified by strong SMA positivity. The above findings set the diagnosis of LMAT. No tumour recurrence haw appeared so far in a 1year patient's follow up.
Conclusion: In 1992, Epstein described a variant of adenomatoid tumor with prominent smooth muscle component and introducing the term "LMAT". The presence of adenomatoid component intermixed with smooth muscle proliferation favors the hypothesis that LMAT should be considered as a variant of AT that originated in precursor cells with dual differentiation; mesothelial and muscle cells, rather than a collision tumor.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 052 Date 15.10.2018 & 16.10.2018	Gynecological pathology	**Tziakou, Paraskevi** **Athens Greece**	**Poster**	Galanopoulos , Georgios Arkoumani, Elisavet Delliou, Eleftheria Zizi-Sermpetzoglou, Adamantia

ABSTRACT TITLE:
Luteoma of pregnancy: A rare case report

ABSTRACT TEXT

Objective: Pregnancy luteoma is a benign rare tumor that occurs in the ovaries due to hormone effects during pregnancy. It presents a diagnostic and management challenge in the way that it can simulate a malignant ovarian tumor. Less than 200 documented cases have been reported until today worldwide.
Methods: A 29 years old woman presented at 20 weeks of gestation with a 11cm mass on her left ovary. This was found by a routine ultrasound check and was surgically removed. Macroscopic examination showed an enlarged ovary measuring 11×6×4.5 cm. Cut surface of the ovary was circumscribed, soft, fleshy, and gray-brown.
Results: Histologically, sections from left ovarian mass revealed a lesion composed of polygonal luteinized cells with abundant eosinophilic granular cytoplasm and prominent nucleoli were identified. No mitotic figures or atypia were found. Tumor cells were positive in Vimentin and Inhibin. Reinke crystals were not found in the sections studied; therefore, Leydig cell tumor and steroid cell tumor were ruled out. Based on the clinical and histopathological findings, the diagnosis of pregnancy luteoma was set.
Conclusion: Sternberg in 1963 and others described a group of tumors classified as "luteomas of pregnancy." These tumors occur in the last trimester of pregnancy and are invariably discovered during cesarean section. Grossly, they are usually brown, soft, and bulging, with the configuration of a corpus luteum. They are frequently multicentric and bilateral, may be functional, and are evanescent. Predisposing factors are polycystic ovarian syndrome due to high levels of hormones, multiple pregnancies and advanced age. The differential diagnosis for pregnancy luteomas includes granulosa cell tumors, thecomas, Sertoli-Leydig cell tumors, pure Leydig (hilar) cell tumors and stromal hyperthecosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06 Abstract No. 053 Date 15.10.2018 & 16.10.2018	Gynecological pathology	**Vranic, Semir** **Qatar University College of Medicine Doha Qatar**	**Poster**	Ghabreau, Lina Al-Thawadi, Hamda Alkhalaf, Moussa Al Moustafa, Ala-Eddin

ABSRACT TITLE:
The frequency of Epstein-Barr virus and high-risk human papillomaviruses co-infection in cervical carcinoma samples of Syrian women

ABSTRACT TEXT

Objective: Cervical carcinoma is caused by high-risk human papillomaviruses (HPV). Likewise, Epstein–Barr virus (EBV) has been recently shown to be co-present with high-risk HPVs in a substantial proportion of cervical carcinoma patients. We recently provided evidence on HPV infection in 95% of cervical carcinoma samples from Syrian women. In the present study, we further explored the status of EBV in Syrian patients with cervical carcinomas.
Methods: Forty-four samples of cervical carcinoma from Syrian women were explored using tissue microarray for EBV and HPV expression using immunohistochemistry and polymerase chain reaction analysis.
Results: We found that EBV and high-risk HPVs are co-present in 15 out of 44 of the samples (34%). We also noted that the co-expression of LMP1 and E6 genes of EBV and high-risk HPVs, respectively, are associated with more aggressive squamous cell carcinoma phenotype.
Conclusion: Our results indicate that EBV and HPVs are co-present in 1/3 of cervical carcinoma samples from Syrian women. The EBV/HPV co-presence is associated with more aggressive cancer phenotype. Future studies are needed to elucidate the exact role of EBV and HPVs cooperation in cervical carcinogenesis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Zakarneh, Lama	Poster	Lloyd, Kirsty Wilkinson, Nafisa
Abstract No. 054		University College London Hospital London United Kingdom		
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
A rare Colorectal complication of Tension free vagina tape

ABSTRACT TEXT

Objective: We report a complication of Tension -free vaginal tape (TVT) use for posterior vaginal wall prolapse, so that histopathologists are aware of the need for thorough examination and documentation when examined such a specimen
Methods: 64 years old lady, underwent posterior vaginal wall prolapse repair with mesh and sacrospinious fixation in 2009.
Following which, the patient became clinically symptomatic with vaginal and anal pain and dyspareunia.
The Magnetic resonance imaging revealed that the mesh was launched in to the posterior vaginal wall close to the rectum
This was partially removed under emergency colorectal operation in 2015. A year later, she suffered intermittent episodes of systemic sepsis. The 3D ultrasound scan showed that there was mesh between the lower posterior vaginal wall and the rectum. This resulted in a rectovaginal fistula. She required an ultra-low anterior resection to excise the rectovaginal mesh and fistula.
Gross examination of the bowel revealed the mesh in situ within the bowel wall and histological confirmation of the microscopic erosion of the mesh into the intestinal mucosa was confirmed. Recto-vaginal fistula was not obvious on examination of the specimen
Results: Complications of Tension-free vaginal mesh have been associated with medico legal issues and national enquiries about safety.
We have described here a rare but serious complication of bowel injury following the use of TVT/ sling procedure, and feel it is important for the pathologists to be aware of the vaginal mesh related complication so that appropriate examination and documentation can occur.
Conclusion: This is case report detailed a rare but serious complications of bowel injury following the use of Tension-free vaginal mesh.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Abdel Azeem, Gena	Poster	Zaki, Marwa Mohammed Kamal El-Hawary, Amira El-Shawaf, Ebrahim
Abstract No. 055		Abdel Fattah Mansoura University Dept. of Pathology Mansoura Egypt		
Date 15.10.2018 & 16.10.2018				

ABSRACT TITLE:
Her-2/neu immunohistochemical expression in surface epithelial ovarian carcinoma

ABSTRACT TEXT

Objective: Her-2/neu overexpression/amplification has been reported in ovarian cancer and is associated with poor clinical outcome. The aim of our study is to evaluate expression of Her-2/neu in surface epithelial ovarian carcinomas (SEOC) and its relation with different clinicopathological parameters.
Methods: This retrospective study was carried out on 94 cases of SEOC retrieved from archive of surgical pathology lab at Mansoura Oncology Center during the period from 2010 to 2017.All available H & E stained slides were examined. Immunohistochemical staining was performed and Her-2/neu positivity was assessed. The relation between Her2 expression and different clinicopathological features was assessed.
Results: Serous adenocarcinoma was the most common histopathological type (58.5%), while malignant Brenner tumor was the least common variant (2.1%). Forty-seven cases were of score (0), twenty-eight cases were of score (1), eleven cases were of score (2) and eight cases were of score (3). Three out of the 8 positive cases were serous adenocarcinomas. We found no statistically significant relation between Her-2/neu expression and any of the clinicopathological features of the tumors. We observed non-statistically significant higher percentage of Her-2/neu negativity among serous carcinoma, endometrioid carcinoma and mucinous carcinoma. On the other hand, 50% of clear cell carcinoma were Her-2/neu positive. A statistically significant strong positive correlation was found between tumor stage and Her-2/neu expression. On the other hand, the correlation between Her-2/neu expression and patients age, tumor grade, tumor size was statistically insignificant.
Conclusion: Her-2/neu is overexpressed in 8.5% of SEOC. Serous type and high grade carcinomas showed the maximum number of Her-2/neu positive cases. There was no statistically significant association between Her-2/neu overexpression and any of the clinicopathological features.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-06	Gynecological pathology	Zaytsev, Nikon	Poster	Asaturova, Alexandra
Abstract No. 056		FBSI Kulakov Center Dept. of Pathology Mosow Russia		
Date 15.10.2018 & 16.10.2018				

ABSTRACT TITLE:
Cross-talk between autophagy and cell cycle-related proteins in uterine smooth muscle tumors

ABSTRACT TEXT

Objective: Uterine smooth muscle tumors (USMT) are the most common pelvic tumors in reproductive-age women and they cause bleeding, pain, infertility and can be fatal in case of leyomiosarcoma. Autophagy is a collection of processes that enables the cells to disassemble unnecessary or dysfunctional components. The role of dysregulation in autophagy and its interact with cell-related proteins in USMT development is yet to be investigated
Methods: We recruited 40 patients with USMT (20 women with fibroids and 20 women with leyomiosarcoma). Totally 60 tissue samples were analyzed [benign (n=20), malignant (n=20) and normal myometrium (n=20)] histologically and immunohistochemically with cell cycle-related proteins p16, p53 and Ki-67 and autophagy markers LAMP1 and LC3B. LAMP1, LC3B, p16 expression were assessed semi-quantitatively (in scores), p53 – as 'mutant-type' and 'wild-type', Ki-67 was assesed in percent. Pearson correlation coefficient and U-test were utilized for statistics.
Results: We found an increase in the LC3B and LAMP1 expression in the fibroids (1.8±0.7 and 2,0±0.9 consequently) compared to normal miometrium (0.9±0.7 for LC3B and 0.9±0,8 for LAMP1), p<0.05. The expression of these markers was more prominent in leyomiosarcoma compared to fibroids [2±0,7 for LC3B (p>0.05) and 3.3±0,8 for LAMP1 (p<0.05)]. In addition, we showed the difference in p16, p53 and Ki-67 expression between fibroids and leyomiosarcoma (p<0.05) and the areas with high cell cycle-related proteins expression showed significantly higher autophagy-related markers expression (p<0.05).
Conclusion: We suppose that there is a mutual regulation between cycle-related proteins and autophagy; the dysregulation of this pathway differs in leyomiosarcomas and fibroids. In fibroids, normal cell cycle-related proteins slightly potentiate the autophagy to control tumor growth. While mutant p16 and p53 can dysregulate the balance between autophagy and proliferation, being one of the triggers for malignant transformation and leyomiosarcoma growth. Targeting autophagy pathway could provide novel therapeutic approach for non-surgical treatment of uterine fibroids and post-surgical treatment for lyomiosarcoma due to its unfavorable response to standard chemotherapy.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-07	Head and neck pathology	**Abdullahi, Yusuf** **Gombe State University Dept. of Histopathology Gombe Nigeria**	Poster	Abdulmajeed, Yahya Aliyu, Lawan Danladi, Bojude
Abstract No. 001				
Date & Time 15.10.2018 16.10.2018				

ABSTRACT TITLE:

Clinicopathological Pattern of Nasopharyngeal Carcinoma:5 Years Review In Federal Teaching Hospital Gombe, North-Eastern Nigeria

ABSTRACT TEXT

Objective: The aim of this study is to evaluate the clinical and pathological pattern of NPC cases seen in Federal Teaching Hospital Gombe, between August 2011 and September 2016.
Methods: This was a retrospective study of all patients seen in ENT department, Federal Teaching Hospital Gombe, with the diagnosis of NPC between August 2011 and September 2016.
The patient's bio data, clinical presentation, and histopathological pattern, were all studied. Data obtained was analyzed using SPSS Version 20.0.
Results: A total of 11 histopathologically confirmed cases of NPC were seen within this period of study. There was a male preponderance with a male to female ratio (M: F) of 4.5: 1. The ages of the patients ranged from 20 to 80 years with a mean age of 46.5 and median of 50 years. During this period, the Hospital's cancer registry recorded a total of 1615 new cancer cases, with NPC forming 0.68%. The commonest presenting symptom was Cervical lymphadenopathy in 81.8% of the patients, followed by Nasal obstruction in 63.6%. Others were Epistaxis (45.5%), Otalgia (45.5%), Hearing impairment (36.7%), and Headache (36.7%). Palatal bulging was seen in 63.6% of the patients. The commonest histological type was Undifferentiated squamous cell carcinoma, seen in 54.5% (6) cases, 27.3% (3) were Non-keratinizing Squamous cell carcinoma, while Keratinizing squamous cell carcinoma was found in 18.2% (2) cases only.
Conclusion: Nasopharyngeal carcinoma is a challenging head and neck tumour that is commoner in males. The commonest presenting symptom is cervical lymphadenopathy, followed by nasal obstruction. The commonest histological type is Undifferentiated squamous cell carcinoma (W.H.O. type III). Early diagnosis and referral for Chemo radiation is essential for favorable prognosis and survival.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-23	Pediatric pathology	**Njim, Leila** **Tunisia**	Poster	Belkacem, Oussama Ben Khalifa, Sarah Njima, Manel Chiba, Dorra Hamdani, Moez Hadhri, Rim Zakhama, Abdelfatteh
Abstract No. 002				
Date & Time 17.10.2018 18.10.2018				

ABSRACT TITLE:

Fibrous hamartoma of infancy: A report of five cases

ABSTRACT TEXT

Objective: Fibrous hamartoma of infancy (FHI), also known as 'subdermal fibromatous tumor of infancy', is a rare fibrous proliferation occurring typically in infants and young children with male predominance. In 20 % of cases, FHI are detected at birth presents as a congenital lesion. Commonly, the axillary soft tissue or the proximal parts of the upper extremities are involved. We report five cases of FHI and we study epidemiological and clinicopathological features.
Methods: This is a retrospective study about 5 cases of FHI diagnosed in our department of Pathology in the university Hospital of Monastir from 2008 to 2018.
Results: Our study was composed of 3 females and 2 males with an average age of 18.8 months. All lesions were subcutaneous. It was located in the forearm in two cases, in the scalp in two cases and in the inguinal region in one case.All patients had a surgical resection of tumor in pediatric surgery department. Grossly, the tumor size was ranged from 1.7 to 9 cm. At the cut, it was whitish in 2 cases, yellowish-white in 2 cases, and yellowish in one case.
The confirmation of the diagnosis was based on histological examination. In fact, all lesions showed a characteristic triphasic morphology with an admixture of fascicles of fibroblastic and myofibroblastic cells, mature adipose tissue, and vascular myxoid nests of primitive mesenchyme.
No nuclear atypia or mitosis was detected. In one case, there are numerous mast cells in the interstitial tissue.
During six-month follow-up, no local recurrence was observed.
Conclusion: FHI is a pediatric benign soft tissue tumor, characterized histologically by an organoid mixture of three components.
This study demonstrates that FHI can occur in children older than 2 years and in unusual anatomic sites including the scalp, the inguinal region.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-16	Endocrine pathology	**Abou-Jaoude, Rosy** **Beirut Lebanon**	Poster	El-Naderi, Samah Ghorra, Claude
Abstract No. 001				
Date & Time 17.10.2018 18.10.2018				

ABSTRACT TITLE:

A new pattern of metastatic lung cancer to the thyroid gland: Intra-follicular colonization

ABSTRACT TEXT

Objective: Isolated thyroid metastasis arising from lung adenocarcinoma are extremely rare, usually detected on both imaging and macroscopic examination. We herein report a first case of thyroid intra-follicular colonization by a lung carcinoma, in an otherwise unremarkable multinodular goiter.
Methods: A 61-year-old male patient having persistent hyperthyroid symptoms non-responsive to medical treatment was admitted for total bilateral thyroidectomy. His past surgical history included a left upper pulmonary lobe lung resection for a 4,4 cm mass diagnosed as an adenocarcinoma with papillary and micropapillary architecture. Resected lymph nodes were all negative (pT2bN0). A metastatic work-up was carried out (including a PET-SCAN) showed no extension of the disease.
Results: Gross examination revealed a 144 g multinodular thyroid goiter, with cystic and hemorrhagic changes, as well as calcifications. On histology, the nodules were mostly macrofollicular with foci of hemorrhage and resorptive modifications. Interestingly, some follicles were colonized by an unusual cell proliferation replacing the normal follicular epithelium. Also, small clusters of tumoral cells were observed within colloid substance. No stromal invasion was identified. Careful examination didn't reveal any vascular, lymphatic or perineural invasion. These atypical cells lacked nuclear criteria of thyroid papillary carcinoma and revealed to be positive for TTF-1 and Napsin A and negative for Calcitonin. Extensive sampling of the goiter showed similar foci on a total of 3 blocs.
Conclusion: We report the first case of an intra-follicular pattern of metastatic spread to an otherwise "typical" thyroid goiter. This finding highlights the importance of extensive thyroid gland sampling in patients with a history of malignancy. It also raises questions concerning the underlying mechanisms of metastatic dissemination: Does this pattern represent an early stage of metastatic development preceding stromal invasion? Is it a form of metastatic dormancy? What is the appropriate therapeutic management of such patients?
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
P-02	Breast pathology	**Ahmed, Syed Salahuddin** **Singapore General Hospital Singapore Singapore**	Poster	Iqbal, Jabed Ong, Clara Chong Hui Li, Huihua Lim, Jeffrey Chun Tatt Yeong, Joe Poh Sheng Thike, Aye Aye Tan, Puay Hoon
Abstract No. 003				
Date & Time 15.10.2018 16.10.2018				

ABSTRACT TITLE:

MMP-3 Expression is Associated with Chemotherapy Resistance in Triple Negative Breast Cancers.

ABSTRACT TEXT

Objective: Matrix metalloproteinases (MMPs), a family of zinc-dependent proteinases are significant for their role in extracellular matrix degradation and a variety of pathogenic processes. Much less is known about the role of MMP-3 expression in the context of disease progression and overall survival in breast cancers. Triple negative breast cancer (TNBC), a subset of aggressive breast cancers, lack expression of oestrogen receptor (ER), progesterone receptor (PR) and human epidermal growth factor receptor 2 (HER2); these are characterized by poor prognosis and limited therapeutic options. We investigated the expression of MMP-3 in TNBC by immunohistochemistry (IHC) and its association with the clinicopathologic parameters and outcome.
Methods: IHC using MMP-3 (clone EP1186Y, Abcam ab52915) in a dilution of 1:500, was performed on 4-µm tissue microarray sections from 296 TNBCs. MMP-3 expression was assessed in the tumour cell cytoplasms and membranes. Disease free survival (DFS) and overall survival (OS) were defined as time from diagnosis to disease recurrence/death of breast cancer for events, respectively, and date of diagnosis to date of last follow up for censored cases. MMP-3 expression was correlated with clinicopathological parameters and clinical outcomes.
Results: Seventeen (17) cases were excluded due to tissue loss. Using H-score of ≥1, 99 (35.5%) tumours showed positive MMP-3 expression. No significant correlation of MMP-3 expression was seen with the clinical parameters. DFS analysis of patients treated with either or both anthracycline and taxane therapy (n=115) showed a significant increase of tumour recurrence in patients with positive MMP3 expression (p=0.0066). MMP-3 expression did not adversely affect the OS.
Conclusion: MMP-3 expression was significantly associated with increased recurrence in patients post-chemotherapy. MMP-3 expression was not significantly associated with tumor characteristic. Further studies are warranted to explore role of MMP-3 as potential therapeutic target in TNBC.
Policy of full disclosure: /

Oral Presentation Abstracts

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-13	Gynecological pathology	Abdallah, Dina Alexandria Faculty of Medicine Dept. of Pathology Alexandria Egypt	Oral Presentation	Badawy, Amira Mansour, Hassan
Abstract No. 001				
Date & Time 16.10.2018 13:30-14:20				

ABSTRACT TITLE:
Assessment of tumor budding in endometrial carcinoma and its correlation with other prognostic factors of the disease

ABSTRACT TEXT

Objective: Endometrial cancer is the most frequent malignancy of the female genital tract. It is early presented by abnormal uterine bleeding. However, its prognosis depends upon many factors as patient age, menopausal status, tumor type, grade, stage, and lymphatic spread. Tumor budding (TB) is a histo-pathological finding that have been correlated to lymph node status, local recurrence, and poor prognosis in many types of cancer. However, it was poorly evaluated in endometrial cancer.
The current study was carried out to evaluate TB in endometrial carcinoma and to correlate it to other prognostic factors of the disease.
Methods: Sixty-five cases -previously diagnosed to have endometrial carcinoma- were included. Cases were subjected to total abdominal hysterectomy with bilateral salpingo-oophorectomy and pelvic lymphadenectomy. All specimens were subjected to detailed histopathological evaluation. TB was assessed by Hematoxylin & Eiosin stain and immune-histochemical stain using Anti-cytokeratin C11. TB was defined as low-grade if <5 budding foci/field were detected, and as high-grade if ≥5 budding foci/field were seen.
Results: it was found that high-grade TB was significantly related to age group from 51 to 80 years, postmenopausal status, type-2 endometrial cancer, advanced stage and lymph node metastasis. However, no significant relation was found between TB and parity, complaint, tumor grade, positive peritoneal wash and lympo-vascular space invasion.
Conclusion: we concluded that high-grade TB may be related to poor prognosis in endometrial carcinoma, as it was significantly related to other poor prognostic factors. Therefore, it should be considered as a predictive marker for the behavior of endometrial carcinoma.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-08-I	Education in pathology I	Abdel Haleem, Ihsan Mohammed Osman Alzaiem Alazhari University Faculty of Medicine Khartoum North Sudan	Oral Presentation	Salman, Alya Khalafallah, Omnia Humeida, Amira Howarry, Omema
Abstract No. 001				
Date & Time 15.10.2018 14:00-14:30				

ABSTRACT TITLE:
Perception and attitude of Sudanese pathologists towards Biobank (Repository)

ABSTRACT TEXT

Objective: Biobank have become an important component of routine practice of pathology. There are several advantages to establish biobank managed by pathologist. The aim of this study was to explore the role of Sudanese pathologists in establishing biobanks in Sudan. This is achieved through investigating their understanding, perception and attitudes towards biobank.
Methods: A cross-sectional quantitative and qualitative study among pathologists practicing in Khartoum State was conducted. Quantitative data was collected through self-administered questionnaire. A total of 75 pathologists were involved in the study with a response rate of 80 %.We used the qualitative techniques of focus group interviews and four focus group discussion were conducted. The analysis was guided by principles of grounded theory methodology.
Results: It was found that the inadequate knowledge of pathologists about the biobanks structure and benefit was the main barrier. Biobank was never been taught during their pathology training, nor as part of continuous professional training. Most of pathologists related biobank activities to stem cells and reproductive activity. Only 60% thought it is of benefit to have biobanks for the purpose of research. Thirty three percent thought it is of no benefit as there are issues of research funding and quality of specimens. Identified themes from focus group discussions include ethical consideration, importance of research, protection of diagnostic slides and blocks, fear of miss use of specimens, quality of tissue, extra load and benefit to pathologists.
Conclusion: Knowledge of pathologists towards Biobank need improvement. Introduction of biobank in pathology curricula is important to enable pathologists to play their role in establishing and managing biobanks.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-22	Neuropathology	Abu Farsakh, Hussam First Medical Laboratory pathology Amman Jordan	Oral Presentation	Abu Farsakh, Noor Sbeih, Ibrahim
Abstract No. 001				
Date & Time 18.10.2018 13:30-14:10				

ABSTRACT TITLE:
Cross-talk between autophagy and cell cycle-related proteins in uterine smooth muscle tumors

ABSTRACT TEXT

Objective: Meningiomas are divided into 3 grades according to the WHO 2007 classification: grade I, grade II and grade III. Grading is important to predict survival and plan further therapy. Histomorphology and immunohistochemistry markers are important aids for grading._
Methods: We studied 244 meningioma cases during the last 10 years at our center. All cases were studied for the following: gender, tumor size, mitotic count, the presence of small cell component (SCC), brain invasion (BRI), bone invasion (BNI), necrosis, and atypia (defined as pleomorphism, prominent nucleoli +/- large hyperchromatic nuclei). Additionally, Immunohistochemistry for the percentage of progesterone receptors(PRG) expresoin, p53 and Ki 67 were calculated._
Results: Grade I and II meningiomas were more common in females, but Grade III were equally distributed (p<0.05). See Table for all parameters
Conclusion: Meningioma are more common in females except for Grade III. Grade III are likely to be larger in size than Grade I and Grade II. Grade II and Grade III have higher mitotic counts, a higher chance of having necrosis, are more likely to have a small cell component, and are more likely to have brain or bone invasion. The higher the grade, the higher the Ki67 index, the higher the percentage of p53 expressing cells and the less likely to have progesterone expression.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-25	Pediatric pathology	Abu Qasida, Khaloud Suhar Sultanat of Oman	Oral Presentation	Al-Shamsi, Ruqaiya Al Lawati, Fatma Rabah, Raja
Abstract No. 001				
Date & Time 17.10.2018 13:30-14:00				

ABSTRACT TITLE:
Tufting enteropathy in an Omani child - A case report

Objective: Tufting enteropathy (TE) also known as intestinal epithelial dysplasia, is an autosomal recessive, congenital enteropathy presenting with a neonatal-onset severe intractable diarrhea. As a result, the patients develop failure to thrive, become dependent on total parenteral nutrition and eventually require transplantation for treatment.
The pathology is related to mutations in the epithelial cellular adhesion molecule (EPCAM) gene, resulting in a dysfunctional epithelial cell barrier.
We present a case of tufting enteropathy in an Omani child as it is a rare disease but important to be recognized.
Methods: Three months old child, a product of a consanguineous marriage, presented with persistent chronic watery diarrhea since the age of two weeks of life. He has a sibling presented with the same complaint and died before the age of one year.
An oesophagogastroduodenoscopy and colonoscopy revealed normal gross appearance of the upper and lower gastrointestinal system. Biopsy was taken from the stomach, duodenum and rectum.
Results: The duodenal biopsy showed features of tufting enteropathy with loss of MOC31(EpCAM) expression on immunohistochemistry. Testing for mutation of the EpCAM gene show homozygous variant c.347G> A p.(Cys116Tyr).
Despite continuous nutritional support, the child eventually died at the age of seven months.
Conclusion: Tufting enteropathy is a rare disease that has to be included in the differential diagnosis of congenital diarrhea. The endoscopy of patients presenting with tufting enteropathy in the first few months of life may show normal findings and the characteristic histological features might also be difficult to be found at an early stage.
Therefore, in the absence of obvious pathological findings in a patient with a strong clinical suspicion of TE, immunohistochemical staining for EPCAM should be performed.Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-II	Molecular pathology II	Abu-Farsakh, Sohaib Hussam University of Rochester Dept. of Pathology Rochester, NY- USA	Oral Presentation	Campbell, Andrew Buscaglia, Brandon Hicks, David Ding, Yi
Abstract No. 001				
Date & Time 16.10.2018 13:30-14:40				

ABSTRACT TITLE:

Quantitative Measurement of Human Epidermal Growth Factor Receptor-2 (HER2) amplification by next generation sequencing: a Comparative Study

ABSTRACT TEXT

Objective: HER2, also known as proto-oncogene Neu or ERBB2, is a protein encoded by the erythroblastic oncogene B (ERBB2) gene. Targeting HER2/ERBB2 protein overexpression in breast cancer has been shown to be an effective therapeutic modality. The status of Her2/ERBB2 is routinely evaluated clinically by immunohistochemistry (IHC, to detect protein overexpression) or florescence in situ hybridization (FISH, to detect gene amplification). FISH results are classified based on the HER2/CEP17 ratio and HER2/ERBB2 gene copy number. In the current study, we use the next generation sequencing (NGS) to quantitatively measure HER2/ERBB2 copy number change and its correlation with IHC and FISH.

Methods: 17 cases of breast invasive ductal carcinoma, which had previously undergone IHC and FISH testing, were selected for this study. NGS study was performed on all cases using the Oncomine Comprehensive Assay by Thermo Fisher Scientific on an Ion Torrent S5 XL sequencer. A copy number greater than or equal to 5 was considered positive. We then compared HER2/ERBB2 copy number results by NGS with IHC and FISH results.

Results: HER2/ERBB2 copy number ranges from 1.1 to 16.9 among all the cases. Out of the 17 cases examined, 4 had a HER2/ERBB2 IHC result of (3+). All four cases had an average number of HER2 signals by FISH greater than 6 and a HER2/CEP17 ratio greater than 2. Three out of the four cases (75%) had a HER2/ERBB2 copy number greater than 5 by NGS (median copy number of 14.4 and mean copy number of 14.2). None of the 13 other breast cases had an HER2/ERBB2 copy number greater than 5 by NGS (median copy number of 2.2 and mean copy number of 2.2). The IHC results for these 13 cases were as follows: One case was score 0 of 3, 2 cases were score 1 of 3 and 10 cases were score 2 of 3.

Conclusion: Our results show good correlation between NGS and FISH data in the detection of HER2/ERBB2 amplification, which are also concordant with the positive IHC HER2/ERBB2 scores (score 3 of 3). For the IHC score categories of 0 to 2, no significant copy number difference was detected by either next generation sequencing or FISH (HER2/CEP17 ratio). In addition to the HER2/ERBB2 copy number change, the Oncomine Comprehensive Assay also covers 160 genes that enable fast simultaneous detection of thousands of variants relevant to breast cancers as well as other solid tumors. To further evaluate its clinical value, follow up studies with a larger patient cohort are warranted.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-I	Breast pathology I	Adoke, Kasimu Ahmadu Bello University Dept. of Pathology Zaria Nigeria	Oral Presentation	
Abstract No. 001				
Date & Time 15.10.2018 14:00-14:30				

ABSRACT TITLE:

Metaplastic breast carcinoma with marked tumour microenviroment response: A histopathological and immunohistochemical study of three cases

ABSTRACT TEXT

Objective: Metaplastic breast carcinoma is a rare and heterogenous group of tumours comprising less than 1% of breast cancers. They are mostly triple negative tumours with poor response to systemic therapy. Overexpression of programmed death (PD)-ligand 1(PD-L1) and tumour infiltrating lymphocytes have recently been documented. In this study, analysis of the tumour microenvironment of three patients with metaplastic breast carcinoma was done.

Methods: Three diagnosed cases of metaplastic breast carcinoma were retrieved from our departmental archives. H&E slides were cut. Immunohistochemical stains using CD5, CD20, ER, PR and Her2 stains were performed using DB BIOTECH protocol.

Results: The patient's ages were 25, 27 and 32 years respectively. H&E in all patients shows pleomorphic cells forming intercellular bridges having hyperchromatic nuclei and moderate eosinophilic cytoplasm. The stroma is markedly infiltrated by lymphocytes in all cases. Immunohistochemistry shows triple negative staining with CD 20 positive lymphocytes. CD 5 was negative.

Conclusion: Metaplastic breast carcinoma may have a dismal prognosis. Tumour microenvironment can be a useful tool to explore in future for immunotherapy.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-05	Cytopathology	Al Jajeh, Issam Singapore General Hospital Singapore	Oral Presentation	Chan, Norman Hok Ling
Abstract No. 001				
Date & Time 15.10.2018 14:00-14:30				

ABSTRACT TITLE:

Cytomorphology of papillary thyroid carcinoma in liquid based cytology: How different is it from conventional smear cytology?

ABSTRACT TEXT

Objective: Liquid based cytology (LBC) of fine needle aspiration (FNA) of thyroid has been used in parallel with conventional smear cytology (CSC) for over a year at Singapore General Hospital (SGH). This first familiarization phase was intended to gauge applicability of cytomorphological features of papillary thyroid carcinoma (PTC) as seen in CSC to LBC. A consensus emerged suggesting both, that PTC in LBC looked rather different and the need for an LBC-derived PTC cytomorphology. The second phase aims at analyzing LBC-derived cytological features of PTC.

Methods: The LBC cytomorphology of 10 consecutive cases of FNAC of thyroid with histologically proven PTC were analysed.

The shape and size of cell groups was classified as large sheets, medium sized groups, and dissociated small groups and dispersed single tumour cells.

The 40X microscopic cell appearance was described as small, intermediate or large cell type. Matching cell types were searched for in respective histology sections.

Results: Intermediate cell type showed pervasive nuclear features of PTC that matched conventional PTC histology. Large cell type showed short or tall columnar shape, granular cytoplasm and smooth or irregular nucleus masquerading as Hurthle cell. It matched tall cell histology of PTC. The less frequent small cell type displayed minimal irregularities and cytoplasm and no inclusions. It matched microfollicular histology of PTC.

Conclusion: The most important feature of PTC was seen at low power, and consisted of large to medium sized sheets with notable nuclear crowding.

Nuclear abnormalities in LBC of PTC could be focal or subtle. Recognition of the various cell types is necessary to avoid being dismissed when few in numbers, or admixed with benign elements.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-12	Genitourinary pathology	Alsheikhyaqoob Dunia Unfallkrankenhaus Berlin institute for pathology Berlin Germany	Oral Presentation	
Abstract No. 001				
Date & Time 18.10.2018 13:30-13:50				

ABSTRACT TITLE:

Bladder cancer in spinal cord injury patients

Objective: Patients with spinal cord injury and neurogenic bladder dysfunction (NBD) display a high incidence of recurrent urinary tract infection and an increased risk of developing bladder cancer . Between 2000 and 2016, 106 cystectomies were carried out at the Unfallkrankenhaus Berlin, including 22 cases with chronic NBD.

Methods: All 106 cystectomy specimens were subjected to histological review.

Results: A total of 106 cystectomy cases from 22 patients with NBD and from 84 patients without NBD were analysed. These included 94 patients with bladder carcinoma (15 with NBD and 79 without NBD). In 12 cases (7 with NBD and 5 without NBD) the diagnosis was chronic urocystitis. 7 of 15 cancer cases with NBD were diagnosed with squamous cell carcinoma (47%). On the other hand, only 6 of 79 cancer cases without NBD showed squamous cell carcinoma (7, 6%, P= 0, 0002). The tumors in patients with NBD presented with a more advanced stage (10/15; 67% , at least pT3a) in comparison to patients without NBD (45/79; 57 %, at least pT3a).

Conclusion: Bladder cancers developing in patients with chronic NBD are significantly more frequently squamous cell carcinomas in comparison to patients without NBD. We postulate that this is due to chronic inflammatory changes in patients with chronic NBD.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-19 Abstract No. 001 Date & Time 17.10.2018 13:30-14:10	Molecular pathology II	Ardhaoui, Monia Institut Pasteur de Tunis Tunis Tunisia	Oral Presentation	Ennaifer, Emna Letaief, Hajer Bouaffif, Nissaf Boubaker, Mohamed Samir

ABSTRACT TITLE:

HPV infection in Tunisian population: Prevalence, genotype distribution and risk factors

ABSTRACT TEXT

Objective: Implementation of Human Papillomavirus (HPV) vaccination should be considered a key cervical cancer prevention strategy in Tunisia, where Pap smear screening is not efficient. This study aims to estimate the prevalence and to identify risk factors associated with HPV infection among women from Tunisia.
Methods: We conducted a cross-sectional study, from December 2012 to December 2014 Eligible women for this study were those aged 18-65 years, sexually active, who sought medical attention at their primary health care centre or clinic in Grand Tunis, Tunisia and who gave written consent. A liquid-based Pap smear sample was obtained from all women using a cervical brush. Only women with betaglobin positive test were further analysed for HPV detection and typing. A nested-PCR of the L1 region was performed followed by NGS sequencing. Multiple logistic regression modeling was used for the analysis of associations between variables with some considered possible confounders after checking for interactions.
Results: A total of 1518 women were enrolled in this study. A total of 1517 women were enrolled in this study and 1229 out of the 1517 cervical samples were positive for the betaglobin test. Overall HPV prevalence was 7.8% [6.5%-9.4%], with the following most prevalent HPV genotypes: HPV6 (40%), HPV40 (14%), HPV31 (12%), HPV16 (9%), HPV52and HPV59 (7%), followed by HPV68 (4%). Mean age of HPV positive women was 40.7±0.92 years. Independently associated risk factors of HPV infection were smoking (OR:2.8 [0.8-9.6]), low income (OR:9.6 [1.4-63.4), bad housing type (OR:2.5 [1-6.8]), partner with multiple sexual relationship (OR:4.5 [0.9-22.9]) and single women (widowed, divorced, separated, never married) (OR:6.9 [1.1-42.2]).
Conclusion: This study provides the first national-based estimate of HPV prevalence in Tunisia. Our findings contribute to the evidence on the current burden of HPV infection, the critical role of sexual behaviour and socioeconomic status and call for increased support for the screening program in Tunisia to prevent cervical cancer. These results allow us to evaluate the cost-effectiveness of vaccine program implementation in Tunisia in future.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-II Abstract No. 001 Date & Time 16.10.2018 13:30-14:10	Breast pathology I	Bashlyk, Viktoriya Russia	Oral Presentation	Kudaibergenova, Asel Artemyeva, Anna Vladimir, Semiglazov

ABSRACT TITLE:

estrogen receptor, progesterone receptor, human epidermal growth factor 2 and forkhead-box protein A1 discordance between primary breast cancer, residual tumor and axillar lymph node metastasis

ABSRACT TEXT

Objective: Discordance of ER, PR, HER, FOXA1 in primary breast tumor before and after neoadjuvant chemotherapy and in axillar lymph node metastasis not well described.
Methods: 32 breast cancer treated TAC and TC regimens was compared case-to case with biopsy, residual tumor and axillar lymph node metastasis. We compared ER, PR, HER2 and FOXA1.
Results: We divided patients into three groups. The first group (n=11) composed primary tumor before and after therapy. We found changes of ER in 1 case (9%), PR in 7 cases (63.6%). Conversion of expression of hormonal receptors was in different directions, as increase (37.5%) and as decrease expression (62.5%), in half of decreased cases there was complete loss. Expression HER2 changed in 4 cases (36.4%), only upward.
The second group (n=32) compose residual tumor and regional metastasis. The conversion of hormonal receptors was noted in 12.5% (in 4 cases by ER and in 4 cases by PR). HER2 expression changed in 7 cases (21.87%).
In the third group (n=11), the tumor biopsy before therapy compared with lymph node metastasis after treatment. The conversion of ER was in 18.2% (2 cases) as complete lost, and for PR in 54.5% (6 cases) both as lost (4 cases), as appears (2 cases). HER2 was increased in 5 cases (45.5%).
FOXA1 did not change after therapy in all cases where expression of hormonal receptors was present. Expression of FOXA1 remained stable in all cases after neoadjuvant treatment, where expression of hormonal receptors (ER and PR) decreased or disappeared.
Conclusion: Study of immunohistochemical status of metastasis in lymph node is important since in almost 20% of cases the receptor status changes, while the signal pathway for the hormone receptors unchanged. We found HER2 changes in almost half of cases when comparing the primary biopsy and metastasis after therapy.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-08-II Abstract No. 001 Date & Time 16.10.2018 13:30-14:00	Education in pathology II	Cree Ian France	Oral Presentation	

ABSTRACT TITLE:

The future of cancer classification

ABSTRACT TEXT

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-I Abstract No. 001 Date & Time 15.10.2018 14:00-14:30	Molecular pathology I	de Alava, Enrique University of Seville HUVR-IBiS Seville Spain	Oral Presentation	Diaz-Martin, Juan Aguado, Elena Biscuola, Michele Delgado, Mercedes Hernández, Maria-José Marcilla, David Martin-Broto, Javier

ABSTRACT TITLE:

Detection of NAB2-STAT6 gene fusions by targeted RNA-seq can be of help to diagnose solitary fibrous tumor

Objective: Solitary fibrous tumor (SFT) is a rare mesenchymal neoplasm presenting three pathologic variants: typical (TSFT), malignant (MSFT) and dedifferentiated (DDSFT), the latter with a worse prognosis. An intrachromosomal fusion between NAB2 and STAT6 is the defining driver event. These genes lie adjacent in the genome hindering FISH analyses, but nuclear STAT6 expression is consistently detected by IHC. We evaluated targeted RNA-seq performance in detecting NAB2-STAT6 fusions and investigated the association between fusion and histological variants.
Methods: We used Archer™ FusionPlex™ Sarcoma Panel for fusion transcripts detection in a series of 56 SFT comprising 22 TSFT, 31 MSFT and 3 DDSFT. IHC for STAT6 expression was performed in a subset of 25 cases. Molecular findings were correlated with pathological features.
Results: STAT6 nuclear staining was observed in 22 cases and SFT fusion transcripts were identified in 21 cases, thus achieving 95% sensitivity for detection of SFTs predicted by IHQ. No fusion transcripts were detected in two IHC negative samples, but SS18-SSX fusions (pathognomonic of synovial sarcoma) were identified in the remaining IHC negative case. The most frequent fusion variants in the whole series (n=56) were NAB2ex6-NAB2ex16 (18 cases) and NAB2ex4-STAT6ex2 (16 cases). No correlation was found between fusion variants and histopathology. Interestingly, no fusion was detected in 2 out of 3 DDSFT.
STAT6 nuclear staining was observed in 22 cases and SFT fusion transcripts were identified in 21 cases, thus achieving 95% sensitivity for detection of SFTs predicted by IHQ. No fusion transcripts were detected in two IHC negative samples, but SS18-SSX fusions (pathognomonic of synovial sarcoma) were identified in the remaining IHC negative case. The most frequent fusion variants in the whole series (n=56) were NAB2ex6-NAB2ex16 (18 cases) and NAB2ex4-STAT6ex2 (16 cases). No correlation was found between fusion variants and histopathology. Interestingly, no fusion was detected in 2 out of 3 DDSFT.
STAT6 nuclear staining was observed in 22 cases and SFT fusion transcripts were identified in 21 cases, thus achieving 95% sensitivity for detection of SFTs predicted by IHQ. No fusion transcripts were detected in two IHC negative samples, but SS18-SSX fusions (pathognomonic of synovial sarcoma) were identified in the remaining IHC negative case. The most frequent fusion variants in the whole series (n=56) were NAB2ex6-NAB2ex16 (18 cases) and NAB2ex4-STAT6ex2 (16 cases). No correlation was found between fusion variants and histopathology. Interestingly, no fusion was detected in 2 out of 3 DDSFT.
Conclusion: Targeted RNA-seq detects with high accuracy different variants of NAB2-STAT6 fusion which are not related to different histology. Targeted RNA-seq could be useful when SFT diagnosis is uncertain and may prevent misdiagnosis of other mesenchymal tumors expressing STAT6 protein.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-I Abstract No. 001 Date & Time 17.10.2018 13:30-14:10	Hematopathology I	Di Stefano, Gioia Careggi Hospital Dept. of Pathology Firenze Italy	Oral Presentation	Ambrosio, Maria Raffaella Lo Bello, Giuseppe Granai, Massimo Lazzi, Stefano Nesi, Gabriella Leoncini, Lorenzo

ABSTRACT TITLE:

New insights on the Epstein-Barr virus lytic cycle in plasmablastic lymphoma with Real Time Polymerase Chain Reaction, Immunohistochemistry and micro RNA profilig analysis

ABSTRACT TEXT

Objective: Plasmablastic lymphoma (PBL) is an aggressive lymphoma, often arising in the context of immunodeficiency and associated with Epstein-Barr virus (EBV) infection. The role and latency program of EBV is still debated. The present study aims to better define the pathogenesis and molecular features of PBL by assessing the EBV latency patterns.
Methods: We studied 23 PBL cases. To assess EBV latency patterns, we used RT-qPCR for the expression of EBV-encoded genes characterizing the different latency programs, and immunohistochemistry (IHC) to determine the expression of some latent and lytic proteins. We performed microRNA (miRNA) profiling by next generation sequencing (Illumina) for the research of EBV-encoded miRNA in PBL, and the results were validated by qPCR.
Results: By means of qPCR we detected: EBNA-1 (92.3%), EBNA-2, EBNA-3, EBER (92.3%) together with LMP-1 (7.7%) and LMP-2 (76.9%), BZLF-1/ZEBRA (92.3%), BMRF-1/Ea-D, BHRF-1/Ea-R (77%), and BLLF1/gp350 (0%). IHC confirmed: 1) non-canonical latency associated program with the partial expression of some proteins characterizing latency II and lytic phase proteins; 2) activation of an abortive lytic cycle in neoplastic cells. The miRNA profiling revealed 19 of 45 EBV miRNAs to be expressed in PBL cases, all of which were from the BART coding region. To correlate the detected miRNA in PBL pathogenesis, we searched for genes targeted by them and we found genes encoding for tumor suppressors (PTEN, PBX2) and lipid metabolism controller (PPARGC1A, PLIN2/adipophilin). IHC revealed a higher expression of the encoded proteins in EBV-positive cases.
Conclusion: This report sheds new light on EBV lytic involvement in PBL. This may lead to development of specific therapies including combination of full EBV lytic cycle induction and anti-EBV drugs. Studies on the immunological microenvironment are ongoing.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-16 Abstract No. 001 Date & Time 15.10.2018 14:00-14:50	Hepatopathology and Biliary System	Francalanci, Paola Children´s Hosp Bambino Gesu ´ Dept. of Pathology Roma Italy	Oral Presentation	Callea, Francesco Candusso, Manila Spada, Marco Boldrini, Renata

ABSRACT TITLE:

Glycogen ground glass bodies in liver biopsies after liver transplant in children

ABSTRACT TEXT

Objective: Ground glass cytoplasmic change in hepatocytes have been described in a variety of conditions. We report a series of cases of glycogen-ground glass (GGG) bodies that closely mimicked HBV inclusions, but appeared in liver biopsies of children after liver transplant (LT).
Methods: 698 liver biopsies in 207 pediatric LT were done between 2008 and 2018. GGG cytoplasmic inclusions were looked for. Clinical and laboratory data were reviewed.
Results: Six patients (0,85%), 2 m and 4 f, at LT age ranged from 7m to 9y, showed GGG bodies on liver biopsies, done on calendar follow-up or due to liver enzymes increase. Patients were immunosuppressed according to solid organ transplant (Steroids + Tacrolimus). Histologically, the GGG inclusions were essentially identical to the GG change seen in chronic HBV. All cases were negative for HBsAg immunostaining and/or HBV serological testing. The GGG change was PAS positive and diastase sensitive. Transaminases were slightly altered, only in 1 case they were 10 times n.v. In 4 pz GGG bodies in liver biopsies were observed after a rejection treated with steroids (all but 1 due to high EBV viral load). In another, GGG bodies were observed after hematopoietic stem cell transplantation complicated by GVHD treated with steroids and in the last one the GGG inclusions were observed after a multiorgan failure treated with several drugs. Those two pz received also total parenteral nutrition for a short time. Three cases had follow-up biopsies (after 1, 8 and 14 months), and the GGG inclusions were resolved in all case.
Conclusion: there are drugs with known diabetogenic effect: steroids and tacrolimus produce disturbances in glucose metabolism. GGG inclusions have been reported in drug immunosuppressed individuals due to rejection or GVHD and closely mimic the ground glass change of chronic HBV. However, this abnormal glycogen accumulation is transitory and not require any treatment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-II Abstract No. 001 Date & Time 18.10.2018 13:30-14:10	Hematopathology II	Granai, Massimo University of Siena Siena Italy	Oral Presentation	Mundo, Lucia Akarca, Ayse Mancini, Virginia Lo Bello, Giuseppe Vergoni, Federica Marafioti, Teresa Leoncini, Lorenzo Ambrosio, Maria Raffaella Lazzi, Stefano

ABSTRACT TITLE:

Transformation of follicular lymphoma to epstein barr virus positive diffuse large b cell lymphoma: A case report and review of the literature

ABSTRACT TEXT

Objective: Importance of viral lytic cycle reactivation in the evolution of a FL to a DLBCL.
Methods: In December 2011, a 77-year woman presented for the swelling of a laterocervical lymph node. Histological examination revealed a grade 2 FL, stage IVA and the patient underwent R-FND and rituximab treatment. In March 2016, the patient relapsed and was treated according to the Renoir protocol. In November 2017, the patient was hospitalized for recurrent fever and a new biopsy was performed with a diagnosis of EBV-positive DLBCL. Since EBV reactivation has been observed following chemotherapy, it was hypothesized that EBV had been the trigger of the transformation of FL, determining the multiple relapses of the disease. Accordingly we checked EBV by EBER in all the samples, then we studies the latency of the virus by RT-PCR and immunohistochemistry, and the immunologic background of the different lymphomas as well as their clonal origin.
Results: EBV was demonstrated also in FL samples increasing from the first (10%) to the second (30%) biopsy. In all the biopsies the virus elicited a latency I associated to the activation of an abortive lytic cycle in the DLBCL sample. Interestingly, in FL samples there was a significant number of CD- 4 and PD-1 lymphocytes within the follicles; in DLBCL the reactive T-cells were manly CD8 and FOXP3 lymphocytes. IGHV rearrangement confirmed the clonal origin of FL and DLBCL.
Conclusion: This paper supports the view that the reactivation of lytic cycle may play an active role in EBV-driven lymphomagenesis by increasing the total number of latently infected cells, promoting the tumor growth and inducing a microenvironment permissive for the neoplastic transformation.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-11 Abstract No. 001 Date & Time 16.10.2018 13:30-14:10	Gastrointestinal pathology	Gurzu, Simona University of Medicine Dept. of Pathology Tirgu-Mures Romania	Oral Presentation	Copotoiu, Constantin Tugui, Alexandra Banias, Laura Jung, Ioan

ABSTRACT TITLE:

Primary gastric chorioadenocarcinoma: A challenging diagnosis

Objective: To present one of the rare histological variants of gastric carcinomas.
Methods: A 66 year old male was hospitalized with weight loss (more than 5 kilograms in two months), jaundice and fulminant hematemesis. The upper gastrointestinal endoscopy revealed a protruded tumor of the stomach and multiple hepatic metastases were also identified. A semi-urgent laparotomy with palliative gastrectomy and hepatic biopsy was performed.
Results: The histopathological examination of the gastrectomy specimen revealed that the tumor infiltrated mucosa, submucosa and muscularis propria of the stomach (pT2 stage) and consisted in two histological components: conventional moderately differentiated adenocarcinoma (10% of the tumor) and collision choriocarcinoma (90%). The choriocarcinoma component consisted of proliferation of highly pleomorphic cytotrophoblastic cells with single oval nuclei and syncytiotrophoblastic cells with multiple bizarre nuclei. The first component was marked by AE1/AE3 keratin, Carcinoembryonic antigen (CEA) and CDX2, whereas the choriocarcinoma part was positive for AE1/AE3 keratin, Inhibin and Human Choriogonadotropin (HCG). The Keratin 5/6, p63 and Placental Alkaline Phosphatase (PLAP) were negative in both components. Large areas of necrosis and hemorrhage were seen. In the liver, the choriocarcinoma component only was identified. No testicular tumor was detected. The final diagnosis was primary choriocarcinoma-like variant of gastric adenocarcinoma with hepatic metastases (stage IV). Oncologic consult was recommended.
Conclusion: Primary gastric choriocarcinoma is a rare but highly metastatic tumor that should be differentiated by a metastatic trophoblastic tumour of testis or ovary. It is probably a dedifferentiated variant of gastric adenocarcinoma. The abstract intends to be submitted for IAP travel bursary application.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-17	History of Pathology and Ocular Pathology	Handjari, Diah Rini Faculty of Medicine, FKUI Jakarta Pusat Indonesia	Oral Presentation	Himawan, Sutisna
Abstract No. 001				
Date & Time 18.10.2018 13:30-14:00				

ABSTRACT TITLE:
Brief history of pathology in Indonesia

ABSTRACT TEXT

Objective: N/A
Methods: N/A
Results: N/A
Conclusion: Pathology laboratory service in Indonesia initially was a solution for health problems especially infectious diseases among plantation laborers in Indonesia. As pathology developed as a distinct discipline of medicine in Western Countries, it also became part of the medical curriculum in the School for Javanese Doctors during the Dutch colonial period. The establishment of the Central Medical Laboratory in Jakarta, 1887, pioneered laboratory based research in Indonesia. There Christiaan Eijkman discovered vitamin B1 as a cure for beriberi, which resulted in Nobel Prize for Medicine in 1929. In 1925 the anatomic pathology laboratory service was available in four major cities. Professor Sutomo Tjokronegoro became the first Indonesian Professor of Pathology, and regarded as the Father of Indonesian Pathology. In 2017 as yet are 579 registered Anatomical pathology specialists in Indonesia which were trained in 11 centers of Anatomical Pathology residency programs.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-14	Head and neck pathology	Hermanova, Marketa Masaryk University 1st Dpt Brno Czech Republic	Oral Presentation	Gurin, Dominik Slavik, Marek Hendrych, Michal Sana, Jiri Kazda, Tomas Selingerova, Iveta Ahmad, Parwez Smilek, Pavel Slaby, Ondrej
Abstract No. 001				
Date & Time 16.10.2018 13:30-14:10				

ABSRACT TITLE:
Clinicopathological correlations of CD44 and EGFR in oropharyngeal squamous cell carcinoma with respect to the American Joint Committee on Cancer 8th edition staging system

ABSTRACT TEXT

Objective: The objective of this study is to analyze the expression profiles of EGFR, CD44 and p16 in oropharyngeal squamous cell carcinoma (OPSCC) and to correlate them with radiotherapy treatment outcomes and clinicopathological parameters. Additionally, prognostic impact of the American Joint Committee on Cancer (AJCC) 8th edition staging system in comparison with 7th edition was evaluated.
Methods: The study included 77 OPSCC patients treated by definitive intensity-modulated radiotherapy (IMRT) in curative intent. Clinical staging was assessed according to the AJCC, both 7th and 8th edition. Immunohistochemical (IHC) analysis of CD44 and EGFR was performed on primary biopsy tumor tissues. To evaluate the HPV status, IHC detection of p16 was employed.
Results: Application of the AJCC 8th edition staging system revealed significant correlations between overall survival (OS), progression-free survival (PFS), loco-regional control (LRC)/time to local recurrence and clinical stage. In our cohort of patients, p16 negativity (-), EGFR and CD44 positivity (+) were significantly associated with clinical stage IV of the disease. These correlations were not found if the AJCC 7th edition staging system was applied. Kaplan-Meier analysis displayed significantly worse OS and LRC for CD44+ and EGFR+ OPSCC, and these cases also showed the worst 3-year OS and LRC. Better survival rates were confirmed in HPV-mediated p16+ OPSCC. Combined analysis of protein expressions identified a significant association between p16- and EGFR+, p16- and CD44+, and EGFR+ and CD44+. Combined immunoprofiles CD44+/p16-, EGFR+/p16-, and EGFR+/CD44+ were associated with the worst OS and LRC.
Conclusion: Combined immunoprofiles of p16, EGFR and CD44 might provide a valuable prognostic and predictive information for the individual OPSCC patients, especially in terms of response to IMRT and prediction of treatment outcomes. Moreover, application of the AJCC 8th edition staging for HPV+ OPSCC proved to improve hazard discrimination and prognostication of OPSCC.
Supported by the Czech Health Research Council project 15-31627A.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-18	Immunohistochemistry	Kasajima, Atsuko Technical University Munich Department of Pathology Munich Germany	Oral Presentation	OKa, Naomi Konukiewitz, Björn Suzuki, Hiroyoshi Sakurada, Akira Okada, Yoshinori Ishikawa, Yuichi Sasano, Hironobu Weichert, Wilko Klöppel, Günter
Abstract No. 001				
Date & Time 15.10.2018 14:00-14:30				

ABSTRACT TITLE:
A prognostic implication of Ki67 index in pulmonary neuroendocrine neoplasms

ABSTRACT TEXT

Objective: Ki67 index is currently the most reliable and objective tool to predict patient´s outcome in neuroendocrine neoplasms of gastroenteropancreatic organs. In pulmonary neuroendocrine neoplasms, however, its prognostic role is still controversial and therefore Ki67 is only be considered as a complementary tool in establishing the diagnosis. We aimed to define the most accurate Ki67 index in predicting the outcome of the patients with pulmonary neuroendocrine neoplasms.
Methods: Surgically resected pulmonary neuroendocrine neoplasms with clinical follow up data were collected from 244 patients from Japan. Pathology diagnosis was reviewed and Ki67 index was re-assessed by multiple pathologists and correlated with disease free-survival duration.
Results: The series included 59 (typical 39, atypical 20) carcinoids, and 185 carcinomas (58 large cell neuroendocrine carcinomas, 127 small cell lung carcinomas). Mean Ki67 index of the carcinoids and carcinomas were 6.3 (range 0.2-36) and 75 (range 34-99), respectively. In carcinoids, Ki67 index was positively associated with tumor progression (histological type, pN, stage), whereas it was not associated with any clinicopathological factors in carcinomas. In carcinoids, Ki67 index was significantly associated with patients´ prognosis, as a grading classification based on a three-tiered stratification (<3%, 3-15%, ≥15%) most accurately represented outcome of the patients with these neoplasms. In contrast, Ki67 index did not associate with patients´ prognosis in carcinomas.
Conclusion: Ki67 index plays a prognostic role in pulmonary carcinoids, but not in neuroendocrine carcinomas. A three-tiered classification based on the Ki67 index successfully identifies carcinoid patients with favorable, intermediate and aggressive post-operative course. The most appropriate cutoff-value to identify the latter patients (15%) seems to be lower than that proposed in pancreatic neuroendocrine neoplasms (20%).
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-21	Nephropathology	Khalid, Sobia University of Health Sciences Dept. of Morbid Anatomy Lahore Pakistan	Oral Presentation	Nagi, A.H . Riaz, Sabiha Naseem, Nadia Mujahid, Muhammad Jahangir Tanvir, Imrana Wahid, Zakia Ali, Ghaniya
Abstract No. 001				
Date & Time 16.10.2018 13:30-14:00				

ABSTRACT TITLE:
Expression of NGAL in class I to V of lupus nephritis using immunohistochemical and immunoflourescent techniques

Objective: To study the immunohistochemical and immunofloresence expression of Neutrophil gelatinase-associated lipocalin (NGAL) in the renal biopsies of cases with Class I –V lupus nephpritis and its association with disease activity.
Methods: A descriptive study was conducted in the department of pathology at Fatima memorial Hospital Lahore in 12 months. Both male and female patients with clinical suspicion of lupus nephritis having serum ANA and Anti-dsDNA level investigations were included. The staining methods performed for light microscopy were hematoxylin and eosin, periodic acid Schiff, john methanimine silver, immunohistochemical and immunoflorescent stains for NGAL.
Results: Among 38 patients, 18.4% were males and 81.6% were females which makes the male to female ratio, 1:5. Mean age of the patients was 26.55 ± 8.13 years with age range of 14-49 years. Mean age of the female patients was 27.93 ± 9.68 years with a range of 12-56 years, while for the males it was 34.67 ± 12.64 years (Range of 17-56 years). All the cases with active lesions showed positivity for NGAL IHC and IF.
Conclusion: NGAL expression is associated activity of the disease. So it can be included in the activity index used for lupus nephritis to assess the presence of neutrophils accurately. NGAL might be the actual culprit to cause the acute flares of the lupus nephritis so targeted therapy against NGAL might be helpful to relieve the patients from acute flares.
NGAL expression can be used to determine the acute flares of the lupus nephritis. Hence it can be used on the kidney biopsy for the diagnostic purposes and later urinary NGAL can be used for follow up.
NGAL is also a sensitive marker to determine the treatment response in case of lupus nephritis as well and later on the prognosis can be determined by following the levels of urinary NGAL.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-28	Soft tissue and bone pathology	Kosemehmetoglu, Kemal Turkey	Oral Presentation	Al-Tarawneh, Hassan Orhan, Diclehan Gedikoglu, Gokhan
Abstract No. 001				
Date & Time 18.10.2018 13:30-14:10				

ABSTRACT TITLE:
Epstein-Barr Virus-Associated Smooth Muscle Tumor

ABSTRACT TEXT

Objective: To evaluate the presence of EBV in a leiomyosarcoma cohort and describe clinicopathological features of EBV-SMT
Methods: Retrospective archive search. ISH for EBER (Leica, Ready to Use) and immunohistochemistry for LMP1 (EBV-CS1-4, Leica) were performed on 3-4 mm diameter tissue microarrays of 93 leiomyosarcomas of various locations (55 uterine, 38 non-uterine), using Leica Bond Autostainer.
Results: Four cases were available: 2 cases previously diagnosed with core biopsy and 2 non-uterine cases (2/93, 2.2%) found to be positive for EBER in tissue microarrays. One case was 4 years-old child with immunodeficiency and other 3 cases were elder females (55, 56 and 77 years-old). LMP1 was negative in all cases. None of the adult patients had known immunosuppression. Renal cell carcinomas (papillary and clear cell) and grade 3 lymphomatoid granulomatosis of lung accompanied in 2 cases. Pediatric tumor was located at liver while adult cases involved thigh, pancreas and chest wall. Median tumor size was 13 cm (3.7-23 cm). Tumors were multinodular and composed of short to long fascicles of monotonous spindle cells. Pleomorphism was variable: mild in 2 cases, focal in 1 case and diffuse in 1 case. Lymphocytes accompanied the tumor cells only in immunosuppressed pediatric case. Mitotic index was low (1-2/hpf) except one case reaching up to 20 per hpf. Areas of necrosis were present in 3 cases. SMA and desmin were diffusely positive in all cases, whereas LMP1 was negative in all cases. One case also showed CD10 expression. Two cases presented with metastases to lungs and one case showed bone and pleural invasion.
Conclusion: EBV does not seem to play a role in the etiology uterine leiomyosarcomas. EBV-SMT can also occur in immunocompetent patients and may be associated with other malignancies. EBER testing may be helpful in diagnosing smooth muscle tumors occurring in unusual locations. Morphology is quite variable.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-III	Breast pathology III	Ohayi, Samuel Enugu State University Dept. of Histopathology Enugu Nigeria	Oral Presentation	
Abstract No. 001				
Date & Time 17.10.2018 13:30-14:10				

ABSRACT TITLE:
Clinicopathologic characteristics of papillary carcinoma of the breast: An analysis of 5 cases

ABSTRACT TEXT

Objective: Papillary carcinoma (PC) is a group of rare breast carcinoma constituting 1-2% of breast cancers. They are classified into intraductal papillary carcinoma, encapsulated papillary carcinoma (EPC) and solid papillary carcinoma (SPC). They occur mostly in elderly women; present diagnostic challenges and their pure forms are indolent with excellent prognosis. The objective of this study is to highlight the characteristics of this rare class of tumours in our environment.
Methods: Cases of papillary carcinoma of the breast diagnosed over a seven-year period in Histopathology laboratory of Enugu State University Teaching Hospital were retrieved from the database, reviewed and analyzed.
Results: There were 5 cases representing 2.6% of diagnosed breast cancer in the period; 3 were EPC (with invasion), 1 SPC (in situ) and 1 SPC (invasive). Patients' mean age was 42.2 years and range 32 – 55 years. Average tumour size was 5.5cm; range 2.5cm to 10.0cm. Two tumours were initially misdiagnosed from trucut specimen as atypical papillary lesion and non-Hodgkin lymphoma; one was correctly diagnosed as SPC (invasive). Histologically, the SPC consisted of typical nodules of neoplastic epithelial cells with interspersing fibrovascular cores; EPC showed a lesion comprised of papillae of fibrovascular cores and lining neoplastic cells with invasion beyond the surrounding capsule. Myoepithelial cells were lacking from all the tumours. Diagnosis was therefore straightforward without recourse to immunohistochemistry which is still not commonly available in our environment.
Conclusion: Prevalence of papillary carcinoma of the breast in our environment is similar to that reported in literature. It however occurs in younger age group and those with poor prognosis are commonest. These peculiarities of PC in our environment call for further study. Because histologic type affects prognosis and treatment, pathologists should be acquainted with its various subtypes and their overlapping features so as to accurately diagnose the tumours.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-22	Neuropathology	Al Kindi, Hunaina Directorate General of Khoula Muscat Sultanat of Oman	Oral Presentation	
Abstract No. 002				
Date & Time 18.10.2018 13:30-14:10				

ABSTRACT TITLE:
Central nervous system high-grade neuroepithelial tumour with BCOR alteration (CNS HGNET-BCOR)

ABSTRACT TEXT

Objective: Central nervous system high-grade neuroepithelial tumour with BCOR alteration (CNS HGNET-BCOR) is a rare entity affecting particularly children. First described in 2016, it was previously diagnosed as CNS primitive neuroectodermal tumours as per the WHO classification (2016).
HGNET-BCOR is characterized by somatic internal tandem duplication (ITD) in the C-terminus of BCL-6 co-repressor (BCOR) associated with an upregulation of BCOR expression. This tumor shares pathologic features and characteristic BCOR-ITD with clear cell sarcoma of the kidney and these tumors may represent local variants of the same entity.
Objective: To present a case of CNS High grade neuroepithelial tumour with BCOR alteration
Methods: A 5-year-old boy was operated for a right cerebellar lesion in 2015, which was reported as a Glioblastoma, WHO Grade IV. He underwent subsequent radiation and chemotherapy.
Three years after initial surgery, he presented to our hospital in 2018 with one-month history of restlessness and headache at night. A Brain MRI revealed a recurrent enhancing mass lesion in the right cerebellum. The tumour was excised and sent for histopathological examination.
Results: A well circumscribed, highly cellular neoplasm composed of moderately pleomorphic cells with irregular nuclei and vesicular chromatin, arranged mostly in sheet-like to fascicular architecture pattern, was seen. In many areas the tumour cells were arranged in vague perivascular pattern suggestive of pseudorosettes. Mitosis were abundant, and palisaded necrosis and apoptotic lakes were present.
Immunohistochemical studies showed the tumour was focally positive for NeuN, with patchy positivity for Neurofilament and demonstrated occasional EMA cytoplasmic to paranuclear dot-like staining. The cells were negative for GFAP, Synaptophysin and OLIG2. INI1 immunostain showed retained nuclear staining.
Molecular analysis of the tumour demonstrated an internal tandem duplication within exon 15 of the BCOR gene. Focal amplification of TERT gene and a splice site mutation in the SMARCA2 gene with loss of the remaining wild type allele was also noted. The final histopathological and molecular diagnosis was Central nervous system high-grade neuroepithelial tumours with BCOR alteration.
Conclusion: Central nervous system high-grade neuroepithelial tumours with BCOR alteration (CNS HGNET-BCOR) represents a rare tumor occurring in young patients with an unfavorable prognosis. This diagnosis must be considered when microscopic features mimic to some extent ependymomas, especially when immunostaining for GFAP and EMA are negative. Optimal treatment protocols are yet to be defined.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-II	Molecular pathology II	Bukelo, Maria Frances St. John´s Medical College Dept. of Pathology Bangalore India	Oral Presentation	Krishna, Sudhir Kini, Usha
Abstract No. 002				
Date & Time 16.10.2018 13:30-14:40				

ABSTRACT TITLE:
Genotypic studies in Hirschsprung disease patients of the Indian cohort

Objective: To evaluate the presence of the common genetic variants in patients with Hirschsprung disease(HD) for Indian cohort
Methods: Exome sequencing of RET, EDNRB, GDNF and EDN3 on an NGS platform (Ion PGM) had been performed on genomic DNA from 43 patients and 7 trios (proband+parents). The primer panel had been designed with reference to the human genome (hg38) with a target size of 27.2kb made up of 102 amplicons (in 2 pools) ranging in size of 125-375bp with a coverage of 98.5%. All genes were sequenced for an average of 500x coverage.
Results: Of the 50 cases (26 short segment, 14 long segment and 10 TCA) sequenced, there are 8 missense mutations on RET, one frameshift mutation on EDNRB and 3 missense mutations on EDN3. Of the 8 missense mutations on RET, 4 are known and 4 are novel. Of the 4 novel variants, 2 are located on the Ca2+ binding motif and are likely pathogenic. Sequence alignment studies for the rest of the 2 novel variants suggests that one is an un-conserved residue and the other is a conserved residue. The variants on EDNRB and EDN3 are of uncertain significance. There is no significant correlation between the variants noted and HD phenotype.
Conclusion: RET is the most commonly involved gene in the HD patients of the Indian cohort with no clinical correlation to the disease phenotype. For clinical application, as per the ACMG classification of the variants obtained on RET, one is pathogenic, 2 are likely pathogenic, 2 are benign and 3 are of uncertain significance.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-I Abstract No. 002 Date & Time 15.10.2018 14:00-14:30	Molecular pathology I	de Alava, Enrique University of Seville Seville Spain	Oral Presentation	Diaz-Martin, Juan Biscuola, Michele Aguado, Elena Delgado, Mercedes Blanco, Angela Marcilla, David

ABSTRACT TITLE:

Targeted RNA-seq of gene fusions helps in the differential diagnosis of Ewing Sarcoma and Ewing-like Sarcoma

ABSTRACT TEXT

Objective: Ewing sarcoma (ES) are characterized by a canonical fusion involving EWSR1 gene in most of cases, and FLI1 as the most common partner. Ewing-like tumors (ELT) morphologically resemble ESFT but show a different clinical behavior and distinct chromosomal alterations involving CIC or BCOR. Therefore, differential diagnosis of ES and ELT upon histopathology and FISH can be challenging. Here we explored the potential of targeted RNA-seq as an ancillary technique to improve diagnostic precision.
Methods: 28 cases with morphology suggestive of ESFT or ELT were FISH-probed to detect EWSR1 translocations (break apart probe). These 28 cases and 7 additional cases were studied with Archer™ FusionPlex™ Sarcoma Panel.
Results: FISH EWSR1 rearrangement was detected in 18 cases. Targeted RNA-seq identified different EWSR1-FLI1 transcripts in 17 cases, and EWSR1-NAFTC2 fusion in a single case, thus achieving 100% sensitivity. Ten cases were EWSR1 FISH negative, and targeted RNA-seq identified 3 cases expressing EWSR1-ERG, 3 cases with CIC-DUX4, 2 cases with BCOR-CCNB3, one case with EWSR1-FLI1, and one case without any fusion call. All cases without EWSR1 FISH data showed fusions consistent with a previously rendered morphologic diagnosis (ESFT or ELT).
Conclusion: Targeted RNA-seq outscores EWSR1 FISH determinations overcoming common pitfalls such us low performance in detecting EWSR1-ERG. Moreover, the RNA-seq panel simultaneously detects ELT gene fusions, circumventing singleplex FISH probing. We propose a diagnostic algorithm for differential diagnosis of ESFT and ELT in which negative EWSR1 FISH results are followed by an RNA-seq targeted panel assessment.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-I Abstract No. 002 Date & Time 17.10.2018 13:30-14:10	Hematopathology I	Elbjeirami, Wafa King Abdullah Medical City Makkah Saudi Arabia	Oral Presentation	

ABSRACT TITLE:

Molecular Follow-up of CML Patients: Summary of Current Guidelines and Challenges in the Region

ABSTRACT TEXT

Objective: Chronic myeloid leukemia (CML) is one of the predominant hematological malignancies in Saudi Arabia (SA) and the region. Tyrosine kinase inhibitors (TKIs) have dramatically changed the prospects for patients with CML by reducing disease burden and prolonging overall survival in the majority of patients. Molecular monitoring, the most sensitive approach currently available to assess treatment response, measures BCR-ABL messenger RNA levels and serves as a surrogate marker of disease.
Methods: It is important for advanced practitioners to become familiar with the technology and interpretation of molecular monitoring results as well as efforts to standardize this type of testing so they can educate their patients and aid their understanding of test results. Indeed, regular molecular monitoring is critical for patients on TKI therapy to assess response, identify nonadherence, and detect treatment failure as early as possible.
Results: Root causes for lack of standardization for BCR-ABL quantitative real-time PCR (RQ-PCR) in the region include different: technology platforms used in testing, control genes, primers, result reporting, as well as lack of quality control. Therefore, it is imperative these variables are discussed and compared among different groups in the region to identify challenges and achieve guidelines set by both European LeukemiaNet (ELN) and the National Comprehensive Cancer Network (NCCN) for CML molecular monitoring. Furthermore, recent trials demonstrate that some CML patients who have achieved stable deep molecular response (DMR) can safely cease their therapy without relapsing (treatment free remission [TFR]). Thus, sensitivity of RQ-PCR testing is crucial, both for assessing eligibility to TFR studies, and to detect impending relapse as soon as possible.
Conclusion: CML monitoring by currently available molecular techniques and its standardization according to international guidelines will be discussed and demonstrated by our center experience (King Abdullah Medical City in Makkah), both in the clinical and laboratory settings.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-I Abstract No. 002 Date & Time 15.10.2018 14:00-14:40	Breast pathology I	Gachii, Andrew Kenyatta National Hospital Nairobi Kenya	Oral Presentation	Mbaya, Martin

ABSTRACT TITLE:

Challenges of breast cancer diagnosis in africa-team and collaboration to improve the breast cancer patient journey-the kenyan example

ABSTRACT TEXT

Objective: Despite advances in cancer management, breast cancer remains the leading cause of cancer death among women worldwide. over 70% of all cancer deaths occur in low and middle income countries where the management of breast cancer patients has limitations due to lack of quality ER, PR and HER 2 immunohistochemistry (IHC) testing to justify therapeutics. A collaboration between Kenyatta National Hospital and Roche diagnostics(Public-Private partnership was initiated in 2016 and aimed at bringing the gap identified in breast cancer management in Kenya and by extension to countries from the eastern part of Sub-saharan Africa.
Methods: immeadiate plan: in partnership with Roche, histotechnichians were trained to improve sample management while two reference labs were equipped with IHC and ISH automation in order to achieve high quality breast cancer immunohistochemistry testing. In parallel, breast cancer histoseminar was organized to train local pathologists on interpretation of Breast cancer.
MEDIUM TERM: To ensure quality will be maintained, participants were registered to the breast module of UKNekas/ NordiQC EQA for ER/PR as well as HER 2 IHC and ISH. The pathologists initially trained internationally are involved in local trainings with the aim of building further capacity among the Pathologists
LONG TERM: To ensure an optimal management of all patients from the local and refencence center through autonomy and local knowledge
Results: The turn around time of specimen reduced from 8 to 2 weeks. Sample handling process were enhanced to improve and maintain optimal sample management not only within the pathology lab but also from surgical theatre and the slide interpretation. The lab currently is processing up to 35 IHC tests per month up from average of 4 with sub-typing sub-outcomes of 27.6% HER 2 positives, 61.4% Hormonal positives and 20.2% Triple negatives
Conclusion: There is improved access to IHC testing and ultimately to HER2 targeted with 81 patients having benefited with the therapy since the start of collaboration. This further emphasizes the importance of private-public partnership in patient care.
Policy of full disclosure: ROCHE DIAGNOSTICS PROVIDED THE EQUIPMENT, REAGENTS AND TRAINING OF STAFF.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-II Abstract No. 002 Date & Time 16.10.2018 13:30-14:10	Breast pathology II	Gachii, Andrew Kenyatta National Hospital Nairobi Kenya	Oral Presentation	Mungania, Mary

ABSTRACT TITLE:

Estrogen, progesterone and human epidermal growth factor 2 testing in breast cancer at Kenyatta National Hospital

Objective: To determine the proportion of breast cancer sub-types at Kenyatta National hospital, largest public referral hospital in East African region
Methods: 273 cases were analyzed using immunohistochemistry markers for estrogen receptor(ER), Progesterone(PR) and Her2 in order to identify the molecular sub types. The sub types Luminal A (ER and /or PR positive Her 2 negative, luminal B(ER, PR and HER 2 positive), Her 2 enriched (ER and PR negative, Her 2 positive) and triple negative (ER, PR and Her 2 negative. Other clinico-pathological characteristics including age, menopausal status, and tumour size, grade, and stage where available were recorded for each sub type
Results: Overall, the proportion of ER positive breast cancers was 64.8%(177 out of 277), PR positive tumours constituted 56%(153 out of 277 and Her 2 positive(73 out of 273). Luminal A was the most common sub-type (42%), followed by Luminal B, Triple negative and Her 2 enriched breast cancer sub-types at 23%, 21% and 19.8% respectively. There was no significant difference between the sub-types with regard to age and menopausal status.
Conclusion: The prevalence of breast cancer sub-types appears to be similar to that which has been recently published from Kenya. Further studies are warranted to explore the genomic differences that may explain the varying rates of hormone receptor positivity from Africa.
Policy of full disclosure: The study was funded by Roche diagnostics

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-08-II Abstract No. 002 Date & Time 16.10.2018 13:30-14:00	Education in pathology II	Hall, Jacqueline IQN Path ASBL Luxembourg Luxembourg	Oral Presentation	

ABSTRACT TITLE:
The establishment of an international gold-standard PD-L1 Digital Education Resource

ABSTRACT TEXT

Objective: IQN Path is an international, multi-stakeholder expert association focused on improving quality of clinical biomarker testing. It develops tools and data resources to support External Quality Assessment (EQA) providers. This project aims to establish a high-quality, international digital education resource to allow accurate and harmonised evaluation of Programmed Cell Death Ligand 1 (PD-L1) in Non Small Cell Lung Cancer (NSCLC) tissue. PD-L1 is an immune checkpoint protein that mediates anti-tumour immune suppression and response. Its detection using immunohistochemistry (IHC) in FFPE tissue predicts clinical response to PD-1/PD-L1 immunomodulator therapy e.g. Pembrolizimab and Nivolumab, and it is used as a companion/complementary diagnostic in NSCLC. Correct interpretation of PD-L1 staining is critical for patient access to immunomodulatory drugs, yet evaluation of PD-L1 expression can be challenging with four different FDA approved assays and different scoring algorithms. The IQN Path gold-standard digital resource will ensure quality by allowing EQA providers to provide self-assessments of PD-L1 read-out for pathologists worldwide.
Methods: The "gold-standard" nature of this resource is ensured by:
- **Only NSCLC tissue stained using manufacturer-approved, on-label methods using clones 22C3, 28-8, SP263 or SP142 are permitted.**
- **PD-L1 slides, plus corresponding H&Es, are scanned at the highest possible resolution (x40). On-slide controls are included.**
- **All scanned slides are submitted to an expert pathology advisory board before upload to the portal. This board approves the quality, defines the assessment questions, which reflect specific industry training & interpretation guidelines, and assigns the consensus scores used for final marking.**

Results: The portal has been created and tissue sourced and scored. A pilot assessment is underway in early 2018.
Conclusion: The portal will be made openly available to pathologists worldwide by registration via any member EQA scheme. The summary results will be published.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-19 Abstract No. 002 Date & Time 17.10.2018 13:30-14:10	Pathology of infectious diseases	Hamadalnil, Yassir National Center for GIT and Li Dept. of Clinical Microbiology Khartoum Sudan	Oral Presentation	

ABSRACT TITLE:
Hepatitis B virus genotypes in Sudanese patients with liver cirrhosis and hepatocellular carcinoma

ABSTRACT TEXT

Objective: The aim of this study is to determine the frequency of different genotypes of HBV among Sudanese patients with liver cirrhosis and HCC.
Methods: Thirty five patients were included in this study, of them 28 were diagnosed with liver cirrhosis, 4 with HCC, and 3 were in active carrier. Blood serum samples were collected and DNA extracted from sera by using commercial DNA extraction kits, HBV S gene was amplified using primer based PCR. Obtained DNA amplified with 6 genotypes using multiplex PCR. Then, the genotypes present in the sample identified.
Results: Of the 35 patients enrolled in this study. HBV genotype D was detected in 35.7% of the patients with liver cirrhosis. But in patients with HCC the genotype A was detected in 50% of patients, two patients diagnosed as liver cirrhosis of unknown cause discovered to be HBV positive and genotypes identified.
Conclusion: In our study, HBV genotype D associated eAg negative is more common in patients with liver cirrhosis; more over genotype A is predominant in patients with HCC. More studies needed in this area.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-05 Abstract No. 002 Date & Time 15.10.2018 14:00-14:30	Cytopathology	Hang, Jen-Fan Taipei Veterans General Hospital Taipei Taiwan	Oral Presentation	Ali, Syed Z.

ABSTRACT TITLE:
Characterization of atypia of undetermined significance, Hürthle cell type in thyroid fine needle aspiration

ABSTRACT TEXT

Objective: The 2017 Bethesda System for Reporting Thyroid Cytopathology recommends using sub-qualifiers for better risk stratification in the "Atypia of Undetermined Significance (AUS)" category. Most of the studies have focused on either cytologic or architectural atypia, and only few addressing AUS, Hürthle cell type (AUS-H). The aim of this study was to evaluate the cytopathologic characteristics, Afirma Gene Expression Classifier (GEC) results, and histologic outcomes in AUS-H.
Methods: Consecutive thyroid fine-needle aspirations (FNAs) performed and interpreted as AUS-H at a large tertiary care center from 2012 to 2016 were retrospectively retrieved.. The corresponding GEC results and histologic diagnoses were analyzed.
Results: A total of 35 AUS-H cases were identified, accounting for 11% of all AUS diagnoses. Suspicious GEC result was noted in 24 (69%). Thyroidectomy was performed in 21 of 35 cases, including 20 that showed a suspicious GEC result. There were 3 (14%) Hürthle cell carcinomas, 9 (43%) follicular adenomas, and 1 (5%) hyalinizing trabecular tumor. The sensitivity, specificity, positive predictive value, and negative predictive value for malignancy in AUS-H were 100%, 5.56%, 15%, and 100% respectively.
Conclusion: AUS-H is associated with a high rate of suspicious GEC result but a very low rate of malignancy on histologic follow-up.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-16 Abstract No. 002 Date & Time 15.10.2018 14:00-14:50	Hepatopathology and Biliary System	Jain, Aleena Indo-American Cancer Hospital Chandigarh India	Oral Presentation	Karegar, Manjusha Joshi, Amita Aggarwal, Chitresh

ABSTRACT TITLE:
Analysis of iron overload in liver biopsies

Objective: 1.To determine the incidence and etiologies of iron overload in liver biopsies 2. To evaluate the grade, parenchymal localisation and cellular distribution of hepatic iron overload 3. To correlate iron overload with the stage of fibrosis
Methods: Hematoxylin&eosin, masson trichome, reticulin, prussian blue, periodic acid Schiff and orecein stained sections of 472 liver biopsies were studied. Analysis of iron deposited on Prussian blue stained sections was performed in three steps. Firstly, pattern of distribution according to localisation of iron was assessed. Secondly, cellular distribution was noted. Thirdly, a semi-quantitative grading based on lens magnification for visualization of iron granules was performed according to three different methods and compared.
Results: Of the total 472 liver biopsies, 60 showed hepatic iron overload as evident by positive Prussian blue staining. The mean age of the patients was 37.9 years with male to female ratio being 2.5:1. According to modified Scheuer criteria, grade 1 prussian blue staining was commonest (41.7%), followed by grade 2 (28.3%). The commonest pattern of hepatic iron distribution was diffuse (63.3%) followed by zonal (23.3%) and patchy (13.3%). Cellular distribution was commonest in hepatocytes, followed by kupffer cells. All cases with acquired/ secondary iron overload showed high grade of iron deposition, while most cases with underlying liver pathology showed low grade. The commonest distribution pattern in grade 2, 3 and 4 was diffuse; whereas in grade 1 it was sinusoidal. Grading by Scheuer's method was comparable with Brunt's, but not with Sciot's method. The commonest underlying pathology was hepatotropic virus infection, followed by cryptogenic cirrhosis and drug induced liver injury. There was no significant correlation with hepatic iron overload grade and fibrosis stage.
Conclusion: Careful evaluation of special stains in liver biopsies with clinical correlation is crucial to determine hepatic iron overload and its correlation with fibrosis.
[Note: This abstract is along with bursary application]
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-11	Gastrointestinal pathology	Jung, Ioan University of Medicine Tirgu-Mures Romania	Oral Presentation	Banias, Laura Bara, Tivadar jr . Butiurca, Vlad Gurzu, Simona
Abstract No. 002				
Date & Time 16.10.2018 13:30-14:10				

ABSTRACT TITLE:

The immunohistochemical features of epithelial mesenchymal transition in pure adeno-versus mixed adenoneuroendocrine colorectal carcinoma

ABSTRACT TEXT

Objective: To present the immunohistochemical (IHC) features of epithelial mesenchymal transition (EMT) in consecutive series of colorectal adenocarcinomas (CRC) versus a rare histological variant called mixed adenoneuroendocrine carcinoma (MANEC).
Methods: The prospective study, which was approved by the Local Ethical Committee, included 49 consecutive CRCs and 7 MANECs, without preoperative chemoradiotherapy. Tumor budding was quantified based on the International Tumor Budding Consensus Conference (ITBCC) 2016 recommendations. The EMT was evaluated using the markers E-cadherin, β-catenin and vimentin. The stemness molecule CD44 was also quantified. Cases with focally (more than 25% of cells) or complete loss of E-cadherin and cytoplasm-to-nuclear β-catenin translocation were considered to present EMT features.
Results: From the 49 CRCs, 23 were graded as low budding-tumors and 26 showed high budding in the invasion front (≥ 5 buds). The tumor budding intensity was correlated with pT (p<0.0001) and pN stage (p=0.0001). All of the seven MANECs showed low budding intensity but all of the patients died before one year after diagnosis, independently from the pT/pN stage. From the 26 high-grade CRCs, 13 cases showed total and 13 focally loss of E-cadherin in the invasion front. The cases with E-cadherin negativity in the invasion front showed nuclear translocation of β-catenin in the invasion front, CD44 negativity and focal expression of vimentin. All of the MANEC cells diffusely expressed E-cadherin, membrane β-catenin and CD44 but did not show vimentin positivity.
Conclusion: In CRCs with high tumor budding degree, loss of E-cadherin and membrane-to-nuclear translocation of β-catenin may be indicators of aggressiveness but the EMT of MANECs does not occur via Wnt/β-catenin pathway. The role of CD44 in inducing stemness properties of the tumor cells should be further explored.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-II	Hematopathology II	Khodaiji, Shanaz P.D. Hindouja National Hospital Dept. of Hematopathology Mumbai India	Oral Presentation	Mansukhani, Dia Kaur, Ramandeep Dashora, Abhishek
Abstract No. 002				
Date & Time 18.10.2018 13:30-14:10				

ABSRACT TITLE:

Triggers and management of secondary HLH in a tertiary care hospital: A case series of 18 patients

ABSTRACT TEXT

Objective: Hemophagocytic lymphohistiocytosis (HLH) is a rare clinical syndrome characterized by fever, hepatosplenomegaly, cytopenia, and progressive multiple-organ failure. In contrast to familial HLH, secondary HLH is often seen following autoimmune diseases, cancer, or infections. Treatment of secondary HLH is directed against the triggering disease in addition to immunosuppressive therapy, which is administered in accordance with the HLH-2004 protocol.
The aim of our study was to categorize triggering factors causing HLH and assess treatment outcome of secondary HLH patients in our institute.
Methods: Data of patients referred to the lab was collected consecutively over 3 years.
Results: Eleven adult and 7 pediatric patients with secondary HLH were included. Eleven were men, and the median age at diagnosis was 46 years. Seven cases were triggered by malignant disease, 10 by infection and 1 by autoimmune disease. Interestingly, 5 of the 10 patients who had infection associated HLH had either tuberculosis or dengue fever.
Dengue associated HLH was seen only in children, contrary to other studies where it is commonly seen in adults. Majority of patient fulfilled 5 of the 8 HLH-2004 diagnostic criteria. All patients fulfilled the criteria of fever, cytopenia, BM evidence of hemophagocytosis and high ferritin (>500 µg/L), except 1 patient in whom ferritin was not elevated. Seven patients received immunosuppressive therapy according to the HLH-2004 protocol. Thirteen patients achieved remission and are on follow up, 3 patients with severe infection associated HLH, died due to multiorgan failure and 2 were lost to follow up.
Conclusion: HLH should be suspected in patients who present with fever, cytopenia, and a ferritin level of more than 500 µg/L. We observed that secondary HLH had a dismal prognosis when associated with severe infections and not with malignancy as opposed to the observations in the study by Torbjohn Karlsson et al.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-17	History of Pathology and Ocular Pathology	Lanjewar, Dhaneshwar GAIMS Dept. of Pathology Bhuj - Gujarat India	Oral Presentation	
Abstract No. 002				
Date & Time 18.10.2018 13:30-14:00				

ABSTRACT TITLE:

Causes of adult mortality as determined at autopsy in pre-independent (British Rule) era and early post-independent era in The Grant Medical College, Mumbai, India (A retrospective analysis of 13024 autopsies between 1884 and 1966)

ABSTRACT TEXT

Objective: The aims of the present study were i) to know relative causes of hospital deaths in Mumbai and ii) to determine rate of discrepancies between the ante mortem and postmortem diagoses.
Methods: The reports of routine autopsies in the archives of Department of Pathology from January 1884 to December 1966 were reviewed. Data such as gender and age as well as clinical and pathological diagnoses were collected, based on consecutive autopsy records in 13024 patients.
Results: The study comprised of 10197 (78%) males and 2827 (22%) females. Maximum number of deaths (7201, 55%) were in the age range of 21-40 years. Infections were the most common causes of death identified in 7281 (56%) patients. Cardiovascular diseases were identified in 2138 (16%) cases, and the neoplasms in 963 (7%) cases. Disagreement between clinical diagnosis and postmortem findings was observed in 4105 (31%) cases.
Conclusion: Apart from providing reliable data on the occurrence of diseases, the autopsy has an important role in providing information of old time diseases. Medical institutes possessing old autopsy records; should preserve, analyse and publish it.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-14	Head and neck pathology	Liu, Honggang Beijing Tongren Hospital Beijing China	Oral Presentation	Su, caili Zhang, Hong
Abstract No. 002				
Date & Time 16.10.2018 13:30-14:10				

ABSTRACT TITLE:

HMGB1 Promotes Lymphangiogenesis through Activation of Receptor for Advanced Glycation End on Tumor-Associated Macrophages

Objective: The receptor for advanced glycation end (RAGE) has been implicated in tumor biology. Although released high mobility group box protein 1 (HMGB1) ligand binding to RAGE on tumor cells promotes tumor progression, nothing is known about HMGB1-RAGE signaling on tumor-associated macrophages (TAMs) in lymphangiogenesis.
Methods: HMGB1, CD163, D2-40 in Laryngeal carcinoma squamous carcinoma (LSCC, n=123), laryngeal precursor lesions (LPLs, n=102), and vocal polyp (VP, n=55) were analyzed by immunohistochemistry. THP-1 cells expressed RAGE gene was knocked down and then polarized to M0 macrophages and TAMs. Six conditioned media were collected for Human Dermal Lymphatic Endothelial Cells (HDLEC) proliferation, migration, matrigel assay and VEGF concentration analysis.
Results: HMGB1 and CD163+ TAMs were overexpressed along human "VP-LPLs-LSCC" sequence ($p < 0.01$). HMGB1 and CD163+ TAMs were significantly correlated with lymphatic vessel density (LVD) in LSCC ($p < 0.01$). HMGB1 overexpressed and high TAMs density involved in lymph node metastasis ($p < 0.01$) and poor prognosis ($p < 0.05$). In vitro, conditioned medium from HMGB1-stimulated RAGE+ TAMs activated lymphangiogenesis by upregulating the VEGF compared to M0 macrophages ($p < 0.05$). Conditioned medium from M0 macrophages stimulated with HMGB1 also enhanced lymphangiogenesis abilities compared with control ($P < 0.05$). On the contrary, RAGE knockdown obviously decreased the corresponding effects of HMGB1- preconditioned TAMs upon HDLEC.
Conclusion: HMGB1 promote lymphangiogenesis by activation RAGE on TAMs in laryngeal carcinogenesis, which may provide an effective therapeutic strategy of targeting RAGE on TAMs against lymph node metastatic patients with LSCC.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-28	Soft tissue and bone pathology	Llombart Bosch, Antonio University of Valencia Valencia Spain	Oral Presentation	Machado, Isidro Nieto Morales, Gema Navarro, Samuel Lavernia, Javier Cruz, Julia Giner, Francisco Ferrandez, Antonio
Abstract No. 002				
Date & Time 18.10.2018 13:30-14:10				

ABSTRACT TITLE:
Solitary fibrous tumor with adverse/unfavorable histologic features. A clinicopathologic, immunohistochemical and molecular analysis of 27 cases.

ABSTRACT TEXT

Objective: Solitary fibrous tumors (SFT) are a rare type of mesenchymal lesion in which specific clinicopathologic factors have been related to patient outcome.
Methods: We collected clinical, histological, immunohistochemical and molecular data of 27 patients with histologically proven SFT which had at least one pathological factor associated with aggressive behavior (hypercellularity, ≥4 mitoses/10 high-power fields (HPF), pleomorphism, tumor necrosis, infiltrative margins and/or tumor size ≥10cm). We analyzed the pathological factors to predict recurrence/metastasis and clinical outcome. The risk of metastasis was calculated using four previously-described score systems.
Results: The mean age was 52.8 years. 55.5% had tumor size ≥10cm. Ten SFT were located in the thoracic region, 9 in abdominopelvic area, 6 (head and neck) and 2 in gynecological organs . On histopathologic review, all tumors revealed hypercellularity with predominant round/spindle cell proliferation, 17 tumors had ≥4 mitoses/10 HPF, 11 showed necrosis, 10 revealed atypia/pleomorphism and 10 tumors had infiltrative margins. Dedifferentiation was observed in 3 tumors. STAT6 revealed strong nuclear immunoreactivity in all cases. CD99, Bcl2 and CD34 were positive in almost all cases. Ki-67 positivity ≥10 was observed in 8 tumors. The NAB2/STAT6 gene fusion was detected in 15 tumors. With a median follow-up of 27 months, 33% suffered a recurrence, 31% metastasis (lung, liver) and 37% died of disease. 5 tumors had high risk of metastasis according to the Demicco et al. score. The same 5 tumors also had score 4 (high risk of adverse outcome) based upon the Diebold et al. score system. Metastasis and/or recurrence had been detected in these 5 cases during follow-up.
Conclusion: SFT with adverse pathological parameters are not always related with poor outcome, thus indicating that SFT may have unpredictable clinical behavior. A refinement of risk stratification models could help to better evaluate outcome on SFT.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-18	Immunohistochemistry	Memeo, Lorenzo Mediterranean Institute Dept. of Pathology Viagrande Italy	Oral Presentation	Colarossi, Lorenzo Mare, Marzia Aiello, Eleonora Perin, Tiziana Canzonieri, Vincenzo Colarossi, Cristina
Abstract No. 002				
Date & Time 15.10.2018 14:00-14:30				

ABSRACT TITLE:
Tumor heterogeneity and primary vs metastatic evaluation in PD-L1 expression

ABSTRACT TEXT

Objective: Immunotherapy with checkpoint inhibitors, allowing recovery of effector cells function, has demonstrated to be highly effective in many tumor types and represents a true revolution in oncology. However, current assays for the prognostic and/or predictive role of tumor PD-L1 expression are not fully standardized with respect to either quantity or distribution of expression or regarding the concordance of expression in primary tumor with its metastasis.
Methods: To assess tumor heterogeneity, we have evaluated PD-L1 expression, using antibody Ventana SP-263, in 2 FFPE blocks each of 22 lung squamous cell carcinoma (SCC), 6 lung adenocarcinoma (ADC), 53 gastric ADC, 55 colorectal ADC, 60 urothelial bladder carcinoma, 3 pancreatic ductal ADC and 4 head and neck SCC.
In addition, to evaluate the expression of PD-L1 in primary tumor and synchronous metastasis, we evaluated 32 cases of lung neoplasm (10 ADC +22 SCC) and 32 corresponding synchronous metastasis, 30 cases of gastric adenocarcinoma and 30 corresponding synchronous metastasis, 55 cases of colorectal adenocarcinoma and 55 corresponding synchronous metastasis and 16 head and neck SCC and 16 corresponding synchronous metastasis.
The PD-L1 expression was determined by the Tumor Proportion Score (TPS) and classified into TPS <1%, TPS 1 to 49% and TPS ≥50%.
Results: In lung carcinoma, just in 1 case of SCC a change in TPS was noted when 2 blocks of the same tumor were evaluated (0% vs 5%). In gastric ADC we noticed a change in TPS in 2 out of 53 cases (5% vs 0% and 3% vs 30%). In CRC ADC just in 1 of the 55 cases evaluated we found a change in TPS (0% vs 50%). In the 60 cases of bladder carcinoma, in the 4 head and neck SCC and the 3 pancreatic ADC there was no TPS change with a 100% concordance between the 2 blocks from the same tumor.
When we evaluated TPS of primary tumors and synchronous metastasis we noticed difference in TPS in 1 of 32 cases of lung SCC (primary tumor had a TPS of 80% while the lymph node metastasis had a TPS of 3%), 2 of 30 cases of gastric ADC (primary tumors had a TPS respectively of 3% and 25% while the metastasis had a TPS of 0% and 50%), 1 of 55 CRC ADC (primary tumor had a TPS of 50% while the metastatic tissue had a TPS of 0%). No differences were seen in TPS of primary and metastatic tissue in the 16 head and neck SCC evaluated.
Conclusion: Our data suggest that tumor heterogeneity is not a major problem for PD-L1 evaluation and that, in selected cases, where could be difficult to obtain tissue from primary tumor, PD-L1 could be evaluated in metastatic tissue.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-12	Genitourinary pathology	Ogunbiyi, Olufemi University College Hospital Dept. of Pathology Ibadan Nigeria	Oral Presentation	Adebiyi, Akinpelumi Omenai, Sebastian Mashor, David
Abstract No. 002				
Date & Time 18.10.2018 13:30-13:50				

ABSTRACT TITLE:
Update on clinical parameters of prostate cancer at the university college hospital, ibadan, nigeria

ABSTRACT TEXT

Objective: Within a multicenter prospective study of prostate cancer genetics, we sought to analyze some parameters of cases seen in our centre over a 2-year period to see if there are any changes in histological grades and age compared to previous studies in this environment.
Methods: Histological grading and scoring had been done following the revised International Society of urologic pathology (ISUP) system and cases were classified in Grade groups. Gleason grades less than 3 were not assigned and Scores less than 6 not assigned. The prostatic Specific Antigen levels as well as the average tumour volume in the biopsy specimens were captured.
Results: A total of one hundred and seventy-two patients were seen. The majority of patients seen were in Grade group 5 (28%) followed by grade group 4 (25%), and then groups 2, 1, and 3 in that order. Patients' ages ranged from 47 years to 85 years with peak age incidence in the 7th decade. PSA values ranged from 2.7 to 20870, and tumour volumes ranged from 25.5% of biopsy tissue to 59%. The lowest PSA value was seen in a patient in grade group 1 but the highest PSA value was recorded in a patient in Grade group 2. The lowest and highest tumour volumes were seen in patients in grade group 4. The PSA and tumour volumes did not seem to correlate with age nor with Gleason grade.
Conclusion: The results show that the majority of patients in Ibadan present with high grade prostatic cancer even using the new ISUP grading system. Peak incidence is in the 7th decade followed by the 8th decade and very high PSA values are recorded in our patients with prostate cancer.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-08-I	Education in pathology I	Regragui, Meriem Ibn Rochd Pathology Casablanca Morocco	Oral Presentation	Beliamime, Imane Elkhiraoui, Hasna Benayad, Samira Bennani Guebessi, Nisrine Marnissi, Farida Karkouri, Mehdi
Abstract No. 002				
Date & Time 15.10.2018 14:00-14:30				

ABSTRACT TITLE:
Let's communicate to improve patient care

Objective: Collaboration and communication between clinical physician and pathologists is crucial to ensure the best care for patients. In everyday life, both pathologists and clinicians often feel frustrated when dealing with each others.
The aim of this study was to analyze perception of pathologists'role and needs by physicians and medical students.
Methods: Our survey was distributed online to medical students and clinical physicians from five Moroccan schools of medicine in Morocco. We gathered demographic and occupational data. Information was sought about the students and physicians perception about pathologists'role and pathology reports. Our questionnaire also evaluated physicians' satisfaction towards pathology laboratories services.
Results: We recorded 336 respondents from whom 27,9% were medical students and 72,1% were graduate MD (residents, general practitioners, specialists).
When monitoring physicians and pathologists communication, among the 88,8% of the participants who filled a pathology request form at least one time, 84,9% gave informations about identity, age, sex and clinical history and examination. 30,5% did not give informations about other investigations performed (blood tests, endoscopy, imaging…).
When asked about expectation towards pathology results, 90,9% thought that pathology report gives the final diagnosis and 58,3% never criticized it. While 63,8% read the whole pathology report, 36,2% read only the conclusion. Clinicopathological discordance was the main reason 42,7% participants criticized a pathology report. Clinocapthological discordance was also the main reason 48,1% of respondents asked for a second opinion.
When asked about satisfaction with pathology laboratory service, 93,6% of the physicians who had the opportunity to exchange with pathologists were satisfied. 53,6% of physicians found that their usual pathology lab was slow,the optimal delay of response for most of the respondents was 3 days.
Conclusion: Improve communication with physicians by raising awareness about pathologists'role and needs is another other challenge facing pathologists.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-21	Nephropathology	Satoskar, Anjali M015 Starling Loving Dept. of Pathology Columbus USA	Oral Presentation	Hemminger, Jessica Arole, Vidya Nadasdy, Tibor
Abstract No. 002				
Date & Time 16.10.2018 13:30-14:00				

ABSTRACT TITLE:

Acute glomerulonephritis with large confluent IgA-dominant deposits associated with liver cirrhosis

ABSTRACT TEXT

Objective: Small glomerular IgA deposits have been reported in patients with liver cirrhosis, mainly as an incidental finding in autopsy studies. We recently encountered nine cirrhotic patients who presented with acute proliferative glomerulonephritis with unusually large, exuberant glomerular immune complex deposits, in the absence of systemic lupus erythematosus (SLE) or monoclonal gammopathy-related kidney disease. Our aim was to further elucidate the etiology, diagnostic pitfalls, and clinical outcomes.
Methods: We present clinical features and kidney biopsy findings of nine cirrhotic patients with an unusual acute immune complex glomerulonephritis (Fig. 1). We also identified native kidney biopsies from all patients with liver cirrhosis at our institution over a 13-year period (January 2004 to December 2016) to evaluate presence of glomerular IgA deposits in them (n=118).
Results: Six of nine cirrhotic patients with the large immune deposits had a recent/concurrent acute bacterial infection, prompting a diagnosis of infection-associated glomerulonephritis and treatment with antibiotics. In the remaining three patients, no infection was identified and corticosteroids were initiated. Three of nine patients recovered kidney function (one recovered kidney function after liver transplant); three patients developed chronic kidney disease but remained off dialysis; two patients became dialysis-dependent and one patient developed sepsis and expired shortly after biopsy. Within the total cohort of 118 patients with cirrhosis, 67 others also showed IgA deposits, albeit small; and 42 patients had no IgA deposits.
Conclusion: Liver dysfunction may compromise clearance of circulating immune complexes, enabling deposition in the kidney. At least in a subset of cirrhotic patients, a superimposed bacterial infection may serve as a "second-hit" and lead to acute glomerulonephritis with exuberant immune complex deposits. Therefore, a trial of antibiotics is recommended and caution is advised before immunosuppressive treatment is offered.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-25	Pediatric pathology	Shahid, Anum Lahore Pakistan	Oral Presentation	
Abstract No. 002				
Date & Time 17.10.2018 13:30-14:00				

ABSRACT TITLE:

Malignant solid tumors of childhood

ABSTRACT TEXT

ABSTRACT TEXT:
Objective: To evaluate pattern and frequency of malignant solid tumors in pediatric age group (<15 years).
Methods: All cases of pediatric malignant solid tumors which were diagnosed in the section of histopathology at the Children's Hospital and the Institute of Child health during the period of five years (2011-2015) were included in this study.These tumors were initially evaluated on H&E stained sections and special stains were also performed whenever indicated. The undifferentiated tumors were evaluated immunohistochemically by using a panel of antibodies on sections from routinely processed, formalin fixed paraffin embedded tissue blocks.
Results: Among the total 328 cases of pediatric solid tumors there were 195 male and 133 females. Maximum number of patients were between 5 to 9 years of age (43.7%).The most common tumor encountered was lymphoma (29.9%) followed by central
nervous system tumors (21.0%), renal tumors (8.8%), soft tissue tumors (8.2%), ovarian tumors (7.6%), bone tumors (6.0%),
retinoblastoma (4.5%), hepatic tumors (3.6%), nasopharyngeal carcinoma (3.0%) and thyroid tumors (2.4%). In fifteen cases
(4.5%) the nature of lesion remained undetermined even after immunohistochemical staining.
Conclusion: Solid tumors are one of the most frequently encountered malignancies of childhood. Lymphoma was the most frequent pediatric tumor in our set up. The frequency of childhood central nervous system tumors was quite high as reported from other parts of the country and world.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-III	Breast pathology III	Shet, Tanuja Tata Memorial Center Dept. of Pathology Mumbai India	Oral Presentation	Mapari, Ashwin Nair, Nita Desai, Sangeeta Patil, Asawari
Abstract No. 002				
Date & Time 17.10.2018 13:30-14:10				

ABSTRACT TITLE:

Relevance of periductal stromal changes and expression of extracellular matrix proteins CD10/SPARC/ COX2 in DCIS (Ductal carcinoma in situ) of breast

ABSTRACT TEXT

Objective: There is some heterogeneity in analysis of stromal changes and small foci of microinvasion in DCIS
This study sought to evaluate the impact of stromal changes and value of addition of matrix proteins like
SPARC, CD10 and COX2 expression in predicting recurrence in DCIS

Methods: A total of 76 cases with 5 years follow-up were retrieved from the archives. These included 56 cases presenting as palpable DCIS, 18 screen detected cases, 2 cases diagnosed in
microdochectomy. Besides non-invasive DCIS, few cases with small volume microinvasion were included and invasion was quantified as single cell Vs cluster invasion.
Histopathological features especially the stromal changes were scored and SPARC, CD10 and COX2 immunostaining was carried out manually.
Results: Mean tumor size in the study was 3.3 and median was 3cm. There was no low grade DCIS and 64 had high-grade nuclei while 11 had intermediate nuclear grade. Foci of microinvasion were seen in 34(44.7%) tumors. A total absence of staining with CD10 was observed in 11 cases. COX2 staining was seen in 52/ 61(85.2%) tumors and was absent in 9 cases. The most common pattern was COX2 staining of stromal vessels around the DCIS especially in foci of impending microinvasion. Only two cases showed strong but scattered epithelial COX2 staining.
SPARC expression was seen in 59/63 cases with 20 tumors showing only staining of periductal vessels was seen, 6 cases with staining of neoplastic epithelium and in 30 both epithelium and stromal components were stained. Stromal changes were seen commonly in palpable DCIS and SPARC staining highlighting neoangiogenesis helped picked up foci of micro invasion. The 10 year relapse free survival was 77%. None of the stromal changes and immunostains impacted relapse free survival. Only tumors with >/=3 foci of cluster type invasion had propensity for invasive recurrence (p – 0.041)
Conclusion: The spectrum of stromal changes are seen in palpable DCIS and SPARC and COX2 help identification of invasion but do not impact prognosis. However, >/= 3 foci of cluster of cells in a microinvasion indicate a chance of invasive recurrence and this appears to be the only significant cut off for invasion that matters for prognosis.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-13	Gynecological pathology	Zaman, Aliya Jinnah Sindh Medical University Dept. of Pathology Karachi Pakistan	Oral Presentation	Jaffar, Nazish Kehar, Shahnaz
Abstract No. 002				
Date & Time 16.10.2018 13:30-14:20				

ABSTRACT TITLE:

Detection of HPV genotypes in dysplastic cervical lesions and invasive cervical cancer using flow through hybridization

Objective: The objective of the present study was to detect Human Papilloma Virus and its genotypes in cervical dysplastic lesions and in cervical squamous cell carcinoma (SCC) by flow-through hybridization technique
Methods: This study was performed at the department of Pathology, Basic Medical Sciences Institute, Jinnah Postgraduate Medical Center, Karachi, Pakistan It was based on the analysis of cases diagnosed as cervical squamous cell carcinoma , high grade squamous intraepithelial lesions (HSIL) and low grade squamous intraepithelial lesions (LSIL). A total of 48 cases were selected including 23 cervical carcinoma, 5 high grade squamous intraepithelial lesions, 20 low grade squamous intraepithelial lesions and were analyzed using flow-through hybridization technique.
Results: HPV DNA positivity was observed in 21(43.75%) cases. HPV 16 was positive in 40 % cases of HSIL and 13.04% cases of SCC. HPV HR1 (HPV 31,33,45,52,58) were positive in 15% cases of LSIL , 60% cases of HSIL ,and 30.4% cases of SCC respectively. HPV HR2 (HPV 53, 59, 66, 81) were positive in 5% cases of LSIL. HPV HR3 (HPV 35, 39, 51, 59) were positive in 4.2% cases of LSIL. There was significant association between HPV and dysplastic lesions of cervix. HPV 16 & HPV HR1 were most common types. HPV 18 DNA was negative in all cases of LSIL, HSIL and SCC.
Conclusion: Human Papilloma Virus genotypes HPV 16 and HR1 (31, 33, 45, 52, 58) are major causative agents in the local population. Detection of HPV-HR2 & HPV-HR3 in LSIL suggested that the local population is at a high risk of developing invasive carcinoma from these less common high risk types.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-22 Abstract No. 003 Date & Time 18.10.2018 13:30-14:10	Neuropathology	Almuhaisen, Ghadeer Jordan University Hospital Amman Jordan	Oral Presentation	Al-Tarawneh, Bushra Al-Hussaini, Maysa

ABSTRACT TITLE:
Central nervous system tumors in adolescents and young adults: Epidemiological study from jordan

ABSTRACT TEXT

Objective: Adolescents and young adults (AYA) age group lacks targeted epidemiologic studies that assess the prevalence and outcome of tumors. We aim to provide deep analyses of the epidemiology of central nervous system (CNS) tumors in AYA in Jordan.
Methods: This is a retrospective study for all CNS tumors diagnosed in the AYA group patients diagnosed and managed at King Hussein Cancer Center (KHCC) in 2007-2016. Patients list was retrieved from the Center's cancer registry and clinicopathologic data was reviewed individually from the patients' records.
Results: A total of 370 cases of primary CNS tumors were retrieved, with a median age of 28.5 years. Males outnumbered females; 57.6% and 42.4%, respectively (p-value=0.91).
Most tumors occurred in the cerebrum (72 %, n=230), the frontal lobe was most commonly affected (29%). Gliomas were the most common histologic category, comprising 58.9% (n=218). High grade gliomas, including glioblastoma multiforme and anaplastic astrocytomas, were the most common. Embryonal tumors comprised the second most common group (16.8%, n=62). Medulloblastoma was the prototype of embryonal tumors (91.9%; n=57) and these were diagnosed in the cerebellum. Gliomas tended to affect older age group than embryonal tumors (p-value=0.002).
On last available follow up, 29.5% were lost to follow up, 40% were alive, and 34.6% were deceased. The median overall survival (OS) was 47.6 months. Embryonal tumors had a better outcome than gliomas (median OS 76.3 vs. 30.3 months, respectively; p-value=0.001).
Conclusion: High grade gliomas affecting the cerebrum were the most common tumors among AYA group, and were associated with a less favorable outcome compared to embryonal tumors. More research is needed to address this special age group.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-II Abstract No. 003 Date & Time 16.10.2018 13:30-14:40	Molecular pathology II	Chernesky, Max University of Calgary Dept. of Pathology Hamilton Canada	Oral Presentation	Hyrcza, Martin Jang, Dan Smieja, Mark Severini, Alberto Lytwyn, Alice Ecobichon-Morris, Anne Young, J. E. M . Archibald, Stuart Jackson, Bernard Michael, Gupta

ABSRACT TITLE:
HPV testing of fine needle aspirates from neck metastases in patients with oropharyngeal squamous cell carcinoma - comparison of OncoE6, Aptima HPV E6/E7 mRNA, and cobas HPV DNA tests

ABSTRACT TEXT

Objective: To determine if HPV testing of oropharyngeal squamous cell carcinomas (OPSCC) using commercially available tests can be performed in samples other than the primary tumour.
Methods: Three commercial HPV tests: OncoE6 (Arbor Vita Corporation), Aptima HPV E6/E7 mRNA (Gen-Probe), and cobas HPV DNA (Roche), were used in testing cervical lymph node fine needle aspirates (FNA) of metastases from 59 Canadian patients with OPSCC. Testing was also performed on saliva samples and oropharyngeal swabs from the same 59 patients. Results were compared to primary tumor p16 immunohistochemistry (IHC) and HPV status.
Results: P16 IHC was positive in 48 of 59 primary tumours. HPV16 genotype was present in 80% of cases. Tests of neck FNAs with OncoE6 was positive in 39 of 59 samples and showed 81.4% agreement with p16 status (kappa 0.53), with Aptima HPV E6/E7 mRNA test was positive in 48 of 59 cases with 96.6% agreement (k 0.88), and with cobas HPV DNA test was positive in 45 of 56 cases with 91.1% agreement (k 0.73). Testing was also performed on saliva samples and oropharyngeal swabs from the same 59 patients, which yielded lower agreements with p16 IHC status: 25.4% (k 0.03) for OncoE6, 57.6% (k 0.26) for Aptima, and 75.4% (k 0.47) for cobas test.
Conclusion: The positivity for HPV E6 oncoproteins and E6/E7 mRNA suggests that patients with HPV-related OPSCC were experiencing transcriptionally active HPV infections. These results suggest that the three commercial assays can be used to determine HPV status in FNAs from cervical lymph node metastases of OPSCC, which is often the only tumour material available for HPV testing. HPV testing of saliva samples and oropharyngeal swabs is less suitable for clinical use.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-I Abstract No. 003 Date & Time 15.10.2018 14:00-14:30	Molecular pathology I	De Los Reyes, Francia Victoria UERM Memorial Medical Center Quezon City Philippines	Oral Presentation	

ABSTRACT TITLE:
Predicting the RET oncogene mutation in MEN2A probands - A meta-analysis

ABSTRACT TEXT

Objective: Multiple endocrine neoplasia type 2A (MEN2A) is a rare familial cancer syndrome that is characterized by a germline mutation in the RET proto-oncogene and is classically defined as the clinical triad of medullary thyroid carcinoma, pheochromocytoma, and parathyroid hyperplasia. To address the need for an extrapolation of the RET oncogene mutation, this study aims to present a predictive model that presents the likelihood that patients 30 years old and below presenting with medullary thyroid carcinoma and pheochromocytoma may have a high risk RET mutation, thru the meta-analysis of all reports containing the age of diagnosis and the mutation of their respective probands.
Methods: All the reported cases archived in PUBMED and EBSCO under the search string "multiple endocrine neoplasia type 2a"[All Fields] AND "mutation"[All Fields] were reviewed for the required information and adjusted for duplicated entries.
Results: C634R is the most commonly detected mutation in the 30 year old and younger age group, and was observed in 56% of the probands. There is a significant difference between the occurrence of C634R in the younger age group versus all the other mutations in the said group, in comparison to the C634R occurrence versus the other mutations in the older age group (p value= 0.006), and that the higher percentage of C634R in the younger group did not occur by chance. Furthermore, the odds that someone from the younger group would have a C634R mutation is four times more than that of someone from the older group, with the OR = 3.8 (95% CI 1.44- 10.29).
Conclusion: The result of this predictive modelling will allow a basis for clinicians to provide the information regarding the urgency for molecular testing to verify that the proband indeed has a high risk mutation. Moreover, clinical laboratories that would like to establish targeted genomic screening programs for MEN2A may opt to focus on the more prevalent high-risk mutations such as p.Cys634Arg, alongside p.Cys634Gly/Phe/Ser/Trp/Tyr to optimize mutation testing versus constraints that are constantly experiences in a resource limited setting.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-I Abstract No. 003 Date & Time 15.10.2018 14:00-14:40	Breast pathology I	Jasar, Dzengis CH ACIBADEM SISTINA Skopje Macedonia	Oral Presentation	Kubelka-Sabit, Katerina Petrova, Deva Filipovski, Vanja

ABSTRACT TITLE:
The breast cancer immunophenotypes in correlation with classical morphological parameters as a predictive model for recurrence risk

Objective: Breast cancer is the most commonly diagnosed cancer in women worldwide characterized by molecular and clinical heterogeneity that results with multiple intrinsic tumor subtypes. The aim of this study was to evaluate the occurrence of relapses in the different immunophenotypes of breast cancer (BC) associated with different histomorphological parameters.
Methods: The retrospective population study included 173 breast cancer patients diagnosed between 2007 and 2010 in our hospital. Molecular subtype classification was performed on immunohistochemical surrogates for estrogen (ER) and progesterone receptor (PR), as well as for proliferation index determined with Ki-67 antibody and Human Epidermal Growth Factor receptor 2 (HER-2), according to St. Gallen International Expert Consensus recommendations from 2013. During the follow-up period (min.12,2, max. 75,3, mean 46,6+16,6 months), recurrences were observed in 35 (20,2%). BC immunophenotypes and classic histomorphological and clinical parameters were analyzed in terms of disease free survival (DFS) in a multivariate fashion using a Cox regression model.
Results: Our results showed that proportions of breast cancer immunophenotypes were: Luminal A-26,56%; Luminal B-41.67%; HER2+ 18,75% and Triple-negative-13,02%. In the Univariate analyses there was a significant difference in the distribution of age, tumor diameter, mitotic index, lympho-nodal ratio, Nottingham Prognostic Index (NPI), stage of the disease, Ki67 PI and the bcl-2 overexpression at the diagnosis among the four BC immunophenotypes. In the the multivariate analyses, the age of the patients, the tumor diameter and the stage of the disease were represented as independent prognostic factors of recurrent disease in different BC immunophenotypes.
Conclusion: The prognostic value of breast cancer immunophenotypes persists when adjusting the age, the tumor diameter and the stage of the disease, as clinical parameters. This "morphologic-molecular" model was robust in relapse prediction and recurrence risk stratified by traditional prognostic parameters.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-13	Gynecological pathology	Jassar, Aneeta Military Hospital Jalandhar Dept. of Pathology Jalandhar India	Oral Presentation	
Abstract No. 003				
Date & Time 16.10.2018 13:30-14:20				

ABSTRACT TITLE:

Atypical glandular cells on pap smears: Cytomorphological correlation and diagnostic challenges

ABSTRACT TEXT

Objective: To evaluate the underlying pathology in women who had Atypical Glandular Cells (AGCs) on Pap smears.
Methods: Retrospective cross-sectional study. Clinicopathological data of patients with AGC on Pap smears between January 2015 and December 2017 was retrieved from the computerized database of a tertiary care center. Patients with a prior history of cervical intraepithelial neoplasia or gynecological cancer were excluded.
Results: Pap smear of the uterine cervix was carried out in 36,500 patients. 40 patients (0.109%) with AGC were identified and histological follow up was available for all of these. The median age at diagnosis was 49 years (range, 28–79), and 16 women (40%) were postmenopausal, while 28 (70%) had gynecological symptoms. Significant preinvasive or invasive lesions on pathological examination were detected in 13 (32.5%) patients,
including 2 cervical intraepithelial neoplasia III (15.3%), 3 cervical carcinomas (23%), 4 endometrial adenocarcinomas (30.7%), 2 ovarian adenocarcinomas (15.3%), and 2 metastatic tumors (15.3%). Univariate analysis showed that prognostically significant outcome was associated with postmenopausal status (P < 0.001), age >50 years (P < 0.001), symptomatic (P = 0.04) and AGC 'favor neoplasia' smear results (P = 0.04).
Conclusion: Patients with AGCs on Pap smears need a thorough clinical and histological workup, especially if they are older than 50 years, postmenopausal or symptomatic.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-16	Hepatopathology and Biliary System	Kanthan, Rani Saskatoon Canada	Oral Presentation	Kanthan, Selliah
Abstract No. 003				
Date & Time 15.10.2018 14:00-14:50				

ABSRACT TITLE:

A review of 345 consecutive neoplastic liver biopsies with immuno-histochemical diagnostic algorithms

ABSTRACT TEXT

Objective: The commonest indication for a liver biopsy besides evaluation of medical liver disease is for a single/multiple mass occupying lesion in the liver. This study is a pathological review of 345 consecutive liver biopsies with a view to developing cost efficient immuno-histochemical diagnostic algorithms for accurate diagnosis.
Methods: A search was conducted in the laboratory information system [LIS] in Saskatoon, Canada for neoplastic liver biopsies for the past 5 years with the diagnostic search codes of neoplasm, metastases, metastatic , adenocarcinoma, neuroendocrine carcinoma, sarcoma and lymphoma.
Results: A total of 345 consecutive neoplastic liver biopsies were retrieved and subjected to pathological review. As expected the majority of the neoplastic lesions were metastatic lesions -upto 95%. A few biopsies upto 1% represented primary hepatocellular carcinoma, haemangioma and cirrhosis. The commonest metastases [upto 51%] to the liver were colorectal in origin being Hepar -ve, CDX2 positive and CK20+CK7-ve. Other lesions seen in the biopsies included metastases from pancreas [14%], lung [10%] upper gastrointestinal [9%], neuroendocrine lesions [8%], ovarian [2%] and kidney/urothelial [5%]. Uncommon metastases encountered in this review included hepatic metastatic meningioma, endometrial stromal sarcoma and osteosarcoma. Immunohistochemical stains were the most useful test in identifying the primary site of tumor. Though diagnostic algorithms were developed specially in the case of the unknown primary, some biopsies received a differential diagnosis of more than one organ as the primary site for clinicopathological correlation.
Conclusion: Liver metastases are an important feature that leads to pathological material for analysis. Important and pertinent diagnostic immunohistochemical algorithms have been developed for the cost-efficient work-up of liver metastases with a special emphasis on liver mets from an unknown primary. Accurate identification/specifics of the liver metastases is paramount for individualized precision medicine of treatment that may be surgical resection, radiofrequency ablation/embolization or medical adjuvant therapy if so indicated.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-05	Cytopathology	Khader, Samer Montefiore Medical Center Bronx USA	Oral Presentation	Segura, Sheila Ramos Rivera, Gloria Segura, Sheila Maleki, Sara
Abstract No. 003				
Date & Time 15.10.2018 14:00-14:30				

ABSTRACT TITLE:

Extramedullary hematopoiesis presenting as unilateral pleural effusion: A case report and review of literature

ABSTRACT TEXT

Objective: Extramedullary hematopoiesis (EMH) is a compensatory hematopoietic tissue response in various malignant and benign conditions. Pleural effusion (PLE) related-EMH is a rare event with few cases reported.
Methods: CASE PRESENTATION
A 72-year-old man with 2-year history of primary myelofibrosis (PMF) (JAK-2 V617F mutant) and hepatosplenomegaly presented with dyspnea and fatigue. Imaging revealed a new right-sided PLE, and thoracentesis yielded serosanguineous fluid. Analysis of the fluid revealed exudative features and numerous megakaryocytes (CD61 positive), findings consistent with EMH. Microbiology studies were negative and peripheral blood flow cytometry showed no evidence of acute leukemic transformation. He was symptomatically treated and discharged home on hydroxyurea and a right pleural space catheter for drainage. A month later, the patient returned with persistent pleural fluid accumulation.
Results: DISCUSSION
EMH generally involves the reticuloendothelial system; however, it may also occur in other organs. Possible explanations for body cavity EMH include: (1) manifestation of a myeloproliferative disorder, (2) bone marrow replacement by neoplastic or non-neoplastic processes, and (3) leakage of marrow through a defective bony cortex as in Paget's disease of the bone. While most cases of PLE-EMH occur in the setting of myelofibrosis, it has also been noted in other hematologic, non-hematologic and hemolytic disorders. PLE-EMH is usually exudative and unilateral, with few bilateral cases reported. Myeloid elements suggest PMF. Various therapies for PLE-EMH management have been used with limited long-term efficacy. While hydroxyurea successfully treats EMH in other sites, previously reported cases of PLE-EMH were refractory to said treatment, chemotherapy, or surgery, ultimately requiring pleurodesis or low dose radiotherapy.
Conclusion: An early and accurate identification of hematopoietic elements in effusions should be recognized as a potentially life-threatening entity in clinical practice. Although not many cases of PLE-EMH have been reported in the literature, its presence has been associated with progression of underlying disease and poor prognosis.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-19	Pathology of infectious diseases	Khan, Saeed Dow University of Health Science Dept. of Pathology Karachi Pakistan	Oral Presentation	
Abstract No. 003				
Date & Time 17.10.2018 13:30-14:10				

ABSTRACT TITLE:

HPV and Cervical cancer in Pakistan: National and International perspective

Objective: Human papilloma virus is among the most common sexually transmitted virus. The association of HPV with genital lesions, pre-cancerous cervical as well as cervical and genital cancers are well established. Based on genomic variations more than 100 HPV subtypes are identified. However, HPV is broadly classified into High risk and low risk types based on their oncogenic potential. International Agency Research on Cancer (WHO) have declared HPV type 16 and 18 as most important single etiological agents of cervical and Squamous Cell Carcinoma. Cervical cancer is the third commonest cancer among women worldwide. 90% burden of the disease is suffered by Low or middle-income countries due to poor awareness, Lack of proper screening, Late clinical presentation of disease, Poor survival rates from the disease. In 2008, there were an estimated 529,000 new cases and 274,00 deaths due to cervical cancer. More than 85 % of cervical cancer deaths are in developing countries, where it accounts for 13% of all female cancers. To determine the prevalence of high-risk HPV types in healthy women of Sindh Pakistan.
Methods: 360 samples consisting of cervical scrapes were collected from women recruited. Following smearing slides for Pap test, remaining cervical cells were transferred to sterile vials containing phosphate buffered saline, and stored at -200C. DNA was extracted from samples and HPV specific PCR was carried out for subtypes 16, 18, 31, 33, 35, 39, 45, 52, 56, 58, 59 and 66.
Results: Out of 360 normal sexually active women visiting the gynecology clinic evaluated for the presence of HPV 54 (15.42%) were found positive for HPV with general primers which subjected to types specific PCR and 15 (4.2%) of them were found to have high risk oncogenic strains of HPV including genotype 16, 18, 56, 45, 66, 31, 39 and 58. Among the high rich strains three were HPV type 56, three HPV type 18, two each type 45, 66 and 31 and one each was HPV 16, HPV 58 and HPV type 39.
Conclusion: This study was performed to determine the prevalence of high risk HPV among normal Pakistani women. The study will help to evaluate the available vaccine and guide the vaccine production in future that could be effective for the local population.
In our study we found HPV subtypes other than 16 and 18. Therefore, only the use of available vaccine will not be sufficient to protect the spread of the local strains. There is no question that early detection will continue to be a key element even once a vaccine is available.
Since 2007, 52 out of 195 countries worldwide have implemented human papillomavirus (HPV) vaccination programmes, including 41% of high-income countries and 15% of low-income and middle-income countries. Two HPV vaccines are now being marketed. Both vaccines are highly efficacious in preventing infection with virus types 16 and 18, which are together responsible for approximately 70% of cervical cancer cases globally. They are also highly efficacious in preventing precancerous cervical lesions caused by these types. HPV screening and vaccination programmes on cervical cancer and other HPV-related diseases must continue. we need to remain vigilant for coverage in groups at greater risk of HPV-related cancers.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-II Abstract No. 003 Date & Time 18.10.2018 13:30-14:10	Hematopathology II	Leoncini, Lorenzo University of Siena Siena Italy	Oral Presentation	Mundo, Lucia Ambrosio, Maria Raffaella Granai, Massimo Del Porro, Leonardo Tiacci, Enrico Stefano, Lazzi

ABSTRACT TITLE:

Unveiling another missing piece in EBV-driven lymphomagenesis: EBV detection in 'eber-negative' B-cell lymphomas

ABSTRACT TEXT

Objective: Epstein-Barr virus (EBV) infection is a common feature of B cell lymphoproliferative disorders (LPDs), including Burkitt lymphoma (BL) and diffuse large B cell lymphoma (DLBCL), with a frequency ranging from 10% to 100% in endemic BL cases. The possible contribution of EBV to B-cell lymphomas pathogenesis is largely unknown and it is unclear how directly infection and disease are linked. It has been recently demonstrated that EBV might be associated with all of the BL cases, including those diagnosed as EBV negative by routine methods [i.e. immunohistochemistry – IHC and EBV-encoded RNAs (EBER) in situ hybridization – ISH] thanks to a mechanism of hit-and-run. Indeed, to escape the immune system, the viral genome is progressively lost from the host human cell. The aim of this study was to identify the presence of EBV infection in a series of "EBV negative" B-cell lymphomas by applying conventional (IHC and EBER-ISH) and non-conventional methods (i.e. EBV viral load measurement; EBV-encoded miRNAs detection, RNAscope assay).

Methods: We investigated a total of 71 cases, namely 14 BL, 29 DLBCL, 10 FL and 18 HL. First of all we performed EBER-ISH in all samples by which we diagnosed 8 EBER-positive and 6 EBER-negative BL, 5 EBER-positive and 24 EBER-negative DLBCL, 10 EBER-negative FL, 3 EBER-positive and 15 EBER-negative HL. Then all cases were screened by Quantitative reverse transcription PCR targeting two conserved regions of EBV genome: BamH1 W and EBNA-1.

Results: We reported a significant presence of the virus in 100% (6/6) of BL, 46% (11/24) DLBCL, 30% of FL (3/10) and 47% (7/15) of HL cases, thus demonstrating EBV infection also in those samples diagnosed as "EBV negative" by EBER-ISH assay. Of note, our results showed an higher viral loads in the 6 BL-EBER negative compared with the 11 DLBCL, 10 FL and the 7 HL EBER-negative cases. The presence of the virus was further assessed by the expression of EBV-encoded miRNAs. In particular, we confirmed the expression of ebv-miR-BART9-5p, ebv-miR-BART10-3p, and ebv-miR-BART19-3p.

Finally, to validate our results we performed RNAscope assay, a novel RNA in situ hybridization technology that let us to target each RNA dot deriving from a single EBNA1 mRNA molecule and identify which cells were EBV positive. In particular, the positive staining was observed in few tumour cells of all lymphomas found to be EBV-positive by qPCR.

Conclusion: We reported a significant presence of the virus in 100% (6/6) of BL, 46% (11/24) DLBCL, 30% of FL (3/10) and 47% (7/15) of HL cases, thus demonstrating EBV infection also in those samples diagnosed as "EBV negative" by EBER-ISH assay. Of note, our results showed an higher viral loads in the 6 BL-EBER negative compared with the 11 DLBCL, 10 FL and the 7 HL EBER-negative cases. The presence of the virus was further assessed by the expression of EBV-encoded miRNAs. In particular, we confirmed the expression of ebv-miR-BART9-5p, ebv-miR-BART10-3p, and ebv-miR-BART19-3p.

Finally, to validate our results we performed RNAscope assay, a novel RNA in situ hybridization technology that let us to target each RNA dot deriving from a single EBNA1 mRNA molecule and identify which cells were EBV positive. In particular, the positive staining was observed in few tumour cells of all lymphomas found to be EBV-positive by qPCR.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-11 Abstract No. 003 Date & Time 16.10.2018 13:30-14:10	Gastrointestinal pathology	Maraqa, Bayan King Hussein Cancer Center Amman Jordan	Oral Presentation	Al-Shboul, Ghassan Abu-Shawer, Osama Souleiman, Mamoun Alshakhatreh, Osama Al-Omari, Amal Abdel Khaleq, Hadeel Taqash, Ayat Al-Hussaini, Maysa

ABSTRACT TITLE:

Frequency of Mismatch Repair Proteins (MMRPs) deficiency among young Jordanians diagnosed with colorectal carcinoma (CRC)

ABSTRACT TEXT

Objective: Microsatellite instability (MSI) caused by Mismatch Repair Proteins (MMRPs) deficiency is detected in about 15% of sporadic colorectal cancers (CRC). About 25% of (MMRPs) deficiency is caused by inherited predisposition syndrome. Immunohistochemical analysis is an easy and convenient method to test for these proteins. This study provides the prevalence and clinicopathological characteristics of MMRP deficient colorectal carcinoma in young Jordanian patients diagnosed with CRC.

Methods: This study targeted cases of CRC diagnosed and treated at King Hussein Cancer Center from 2004 until 2012 in patients 45 years of age or younger at the time of diagnosis. Clinicopathological data was obtained from 155 patients' records. Immunohistochemistry for MLH1, MSH2, MSH6 and PMS2 proteins were performed on paraffin embedded tissue containing carcinoma.

Results: The median age of patient at diagnosis was 38 years. A total of 29 (19%) cases showed deficient MMR (dMMR) expression. Loss of expression of PMS2 was seen in 17 cases, 12 cases of which showed loss of MLH1 Expression. Loss of expression of MSH6 was seen in 10 cases, 9 of which showed loss of MSH2 expression. One case showed loss of all four MMR proteins and another case showed loss of PMS2/MLH1 and MSH6. There was a significant association between abnormal MMR gene protein expression and tumor location proximal to splenic flexure and pathologic features suggestive of microsatellite instability (mucinous component, intraepithelial lymphocytes and Crohn's like reaction). Patients with deficient MMR (dMMR) CRC appeared to have a significantly better overall survival compared to that in patients with proficient MMR (pMMR).

Conclusion: Our study shows that dMMR often occurs in patients with early onset low-stage CRC, and that dMMR can serve as a biomarker for better prognosis. These results are of value in directing the clinical management of young patients with CRC.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-17 Abstract No. 003 Date & Time 18.10.2018 13:30-14:00	History of Pathology and Ocular Pathology	Mekki, Salwa Soba University Hospital Al-Neelain University Khartoum Sudan	Oral Presentation	Osman, Tagwa Mohamed, Gussai Elagib, Sarrah

ABSTRACT TITLE:

Malignant occular tumors in Sudanese patients; a clinicopathological study, one center experience

ABSTRACT TEXT

Objective: Extramedullary hematopoiesis (EMH) is a compensatory hematopoietic tissue response in various malignant and benign conditions. Pleural effusion (PLE) related-EMH is a rare event with few cases reported.

Methods: CASE PRESENTATION

A 72-year-old man with 2-year history of primary myelofibrosis (PMF) (JAK-2 V617F mutant) and hepatosplenomegaly presented with dyspnea and fatigue. Imaging revealed a new right-sided PLE, and thoracentesis yielded serosanguineous fluid. Analysis of the fluid revealed exudative features and numerous megakaryocytes (CD61 positive), findings consistent with EMH. Microbiology studies were negative and peripheral blood flow cytometry showed no evidence of acute leukemic transformation. He was symptomatically treated and discharged home on hydroxyurea and a right pleural space catheter for drainage. A month later, the patient returned with persistent pleural fluid accumulation.

Results: DISCUSSION

EMH generally involves the reticuloendothelial system; however, it may also occur in other organs. Possible explanations for body cavity EMH include: (1) manifestation of a myeloproliferative disorder, (2) bone marrow replacement by neoplastic or non-neoplastic processes, and (3) leakage of marrow through a defective bony cortex as in Paget's disease of the bone. While most cases of PLE-EMH occur in the setting of myelofibrosis, it has also been noted in other hematologic, non-hematologic and hemolytic disorders. PLE-EMH is usually exudative and unilateral, with few bilateral cases reported. Myeloid elements suggest PMF. Various therapies for PLE-EMH management have been used with limited long-term efficacy. While hydroxyurea successfully treats EMH in other sites, previously reported cases of PLE-EMH were refractory to said treatment, chemotherapy, or surgery, ultimately requiring pleurodesis or low dose radiotherapy.

Conclusion: An early and accurate identification of hematopoietic elements in effusions should be recognized as a potentially life-threatening entity in clinical practice. Although not many cases of PLE-EMH have been reported in the literature, its presence has been associated with progression of underlying disease and poor prognosis.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-II Abstract No. 003 Date & Time 16.10.2018 13:30-14:10	Breast pathology II	Miskad, Upik Andriani Hasanuddin University Dept. of Pathology Makassar Indonesia	Oral Presentation	Rifai, Rizki Amalia Wahid, Syarifuddin

ABSTRACT TITLE:

The Value of Tumor-Infiltrating Lymphocytes (CD8 T Cells) as a Predictor of Response to Anthracycline-Based Neoadjuvant Chemotherapy in Invasive Ductal Carcinoma Mammae

Objective: There is an accumulating evidence showed that the presence of tumor-infiltrating lymphocytes (TILs) assessed in hematoxylin and eosin (H&E)-stained tumor section can provide prognostic and predictive value in breast cancer. The objective of this study is to evaluate the value of tumor-infiltrating lymphocytes (TILs) as a predictor of response of anthracycline-based neoadjuvant chemotherapy in Invasive Ductal Carcinoma Mammae.

Methods: This was a case-control study, the pre-treatment biopsy samples were diagnosed as Invasive Ductal Carcinoma Mammae and given anthracycline–based neoadjuvant chemotherapy. The TILs were evaluated using recommendations of International TILs Working Group 2014 and confirmed by immunostaining of CD8 antibody. The chemotherapy response were evaluated using RECIST criteria, complete and partial response were categorized as chemosensitive samples, stable and progressive disease were categorized as chemoresistance samples.

Results: Of the 76 samples, group TILs ≤10% were 39 (51.3%), group TILs > 10% were 37 (48.7%), chemoresistance samples were 43 (56.6%), and chemosensitive samples were 33 (43.4%). Group TILs ≤ 10%, 24 samples (61.5%) were chemoresistance and 15 (38.5%) were chemosensitive. Group TILs > 10%, 9 samples (24.3%) were chemoresistance and 28 (75.7%) were chemosensitive. The detection of higher TILs number in pretreatment biopsy is associated with better response to anthracycline-based neoadjuvant chemotherapy (OR=4.98, 95% CI : 1.85-13.39; p = 0.001).

Conclusion: TILs number in H&E-stained tumor section might be used to predict response to anthracycline-based neoadjuvant chemotherapy in Invasive Carcinoma Mammae NST.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-14	Head and neck pathology	Nadal, Alfons Hospital Clinic Barcelona Dept. of Pathology Barcelona Spain	Oral Presentation	Acuña, Gabriela Gomà, Montserrat Temprana, Jordi Garcia Bragado, Federico Alos, Llucia Ordi, Jaume Cardesa, Antonio
Abstract No. 003				
Date & Time 16.10.2018 13:30-14:10				

ABSTRACT TITLE:

HPV in laryngeal and hypopharyngeal lymphoepithelial carcinoma

ABSTRACT TEXT

Objective: To investigate the role of HPV in laryngeal and hypopharyngeal lymphoepithelial carcinomas (L&HLEC)
Methods: Cases were retrieved from the files of three tertiary hospitals attending a population of 1,319,723 in a period of 18 years. EBV was investigated through EBER in situ hybridization. HPV was investigated through a PCR and hybridization of the amplified fragment method (Inno-lippa). p16 and p53 protein expression were investigated through immunohistochemistry. Clinical data were retrieved from hospital charts
Results: Ten cases (7 laryngeal and 3 hypopharyngeal) were retrieved among 4952 laryngeal and hypopharyngeal carcinomas. Three cases came from the population of reference, the others were referred from other centers. Calculated incidence was 0.01 cases/year and 100,000 inhabitants and prevalence was 0.2% of laryngeal and hypopharyngeal carcinomas. All cases were EBV-negative. HPV DNA was detected in 5 cases (4 type 16 and 1 type 58). p16 overexpression was detected in 4 cases, three in three of the HPV-positive cases, all of them laryngeal. The type 58 positive case was negative in a second sample of the tumor.
Conclusion: L&HLEC is a rare neoplasia. The causative role of EBV in L&HLECs results unlikely. HPV+p16-positive cases indicate a causative role for HPV in a fraction of laryngeal lymphoepithelial carcinomas
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-28	Soft tissue and bone pathology	Nader, Farah King Hussein Cancer Center Amman Jordan	Oral Presentation	Mahasneh, Tamadur Barakat, Farid Jaber, Omar
Abstract No. 003				
Date & Time 18.10.2018 13:30-14:10				

ABSRACT TITLE:

Malignant neuroectodermal tumor with melanocytic differentiation

ABSTRACT TEXT

Objective: We present a 47 year old male patient, who is a known case of NF-1.
Methods: We review the english literature and compared to it to our case.
Results: Clinical features:
The patient is a 47 year old gentle man, who is a known case of neurofibromatosis type 1 (NF1). He presented with a large mass in the axilla.
Magnetic resonanase imaging (MRI) of the chest and axilla showed a lobulated enhancing soft tissue mass depicted in the left axillary region. No definite local invasion was seen. The possibility of this mass arising from the brachial plexus cannot be excluded. In addition, multiple subcutaneous and one left exit foramen enhancing soft tissue nodules are also present.
Pathological features: Grossly 5 tru-cut core biopsies were received. Histologically, sections show a tumour characterized by a proliferation of spindle cells with enlarged hyperchromatic nuclei and faintly eosinophilic cytoplasm, arranged in intersecting fascicles. In other areas, the cells are more epithelioid, with enlarged vesicular nuclei, prominent nucleoli and moderate abundant eosinophilic cytoplasm. Brisk mitotic activity and focal necrosis are also evident. No rhabdomyoblastic differentiation is seen.
S-100 is only focally positive in the fascicles of spindle cells, but It is strongly and diffusely positive in the epithelioid areas. HMB45 is also focally positive in the epithelioid component. The tumor cells are negative for Melan-A, GFAP, BRAF, LCA, DESMIN, Myogenin, EMA and Pan-CK immunostains. INI1 showed retained nuclear staining.
The top differential diagnoses in this case are malignant peripheral nerve sheath tumor (MPNST) with a conventional spindle cell morphology and an epithelioid component (reminiscent of epithelioid MPNST) and malignant melanoma.
Another possibility is that this tumor represents an MPNST with a conventional spindle cell component and an epithelioid component (reminiscent of epithelioid MPNST) that happens to show evidence of melanocytic differentiation.
The neural crest, derived from embryonic neuroectoderm, is thought to give rise to several cell types within the human body including melanocytes and Schwann cells.* The prototypic malignant neoplasms arising from or showing differentiation toward these cell types are malignant melanoma and malignant peripheral nerve sheath tumor (MPNST), respectively. Therefore, it is not surprising that rare cases of MPNST might demonstrate melanocytic differentiation. Given the difficulty definitively classifying this neoplasm as either a melanoma or MPNST, we are proposing a more encompassing nomenclature to be used, such as malignant neuroectodermal tumour with divergent melanocytic differentiation.
Conclusion: Conclusion:
Both MPNST and melanoma are thought to arise from neural crest- derived cells. Therefore, It is expected that MPNST might demonstrate melanocytic differentiation. In conclusion, this case highlights the potential relationship between these two entities, and emphasizes on the need to reevaluate our diagnostic criteria.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-08-II	Education in pathology II	Regragui, Meriem Ibn Rochd Pathology Casablanca Morocco	Oral Presentation	Beliamime, Imane El Kebir, Asmaa Benayad, Samira Bennani Guebessi, Nisrine Marnissi, Farida Karkouri, Mehdi
Abstract No. 003				
Date & Time 16.10.2018 13:30-14:00				

ABSTRACT TITLE:

Analyzing perception and expectations about pathology among medical students and clinical physicians: A step forward to improve recruitment

ABSTRACT TEXT

Objective: As a medical discipline, Pathology is less known than other clinical disciplines by the public and medical students and residents may be sometimes reluctant to engage into Pathology. The last decades, Pathology has known a tremendous progress and pathology practice has shifted from a solitary laboratory- based practice to a central multidisciplinary-activity, however it may be still perceived as unpopular by med students.
The aims of this study were to analyze perceptionand expectations of pathologyby physicians and medical students in one hand, and to determine why pathology is seen as less attractive than other specialties by medical students.

Methods: Our survey was distributed online to medical students and clinical physicians from five Moroccan schools of medicine in Morocco. We gathered demographic and occupational data. Information was sought about the students and physicians opinion about pathology courses, students' affinity for pathology, knowledge about pathologists' role and pathology techniques.
Results: We recorded 336 respondents from whom 27,9% were medical students and 72,1% were graduate MD (residents, general practitioners, specialists). We noted that 4,7% didn't know that pathology was a medical specialty or didn't hear about it (students of first and second year of Medical studies who never had a pathology course). 19,1 % did a rotation in a pathology department. 80% of the respondents attended pathology lectures; they all agreed that lectures weren't enough to assimilate the course. While 49,3 % of the medical students and physicians who attended the pathology lectures appreciated the discipline,24,5% didn't like it, the main reason invoked being that lectures were perceived as "dull" and disconnected from the practical practice.91,4% of medical students asked about considering pathology in residency were not interested, most of them perceiving that pathology does not offer patients contact.
Concerning techniques used in pathology laboratories, microscopic examination was the most well-know technique (93,2%), followed by gross examination (91,2%). Physicians and medical students were less familiar with ancillary techniques: 74,7%reported to know about immunochemistry and only 41,9% about molecular pathology.

Conclusion: Efforts should be done in delivering more attractive pathology courses to medical students and pathologists should intensify their communicate efforts about the role of pathology to improve attractiveness of this discipline in order to improve recruitment among them.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-I	Hematopathology I	Rjoop, Anwar University of Arkansas for Med Little Rock USA	Oral Presentation	Pandey, Soumya Alapat, Daisy Ramos, Jeanette Post, Ginell
Abstract No. 003				
Date & Time 17.10.2018 13:30-14:10				

ABSTRACT TITLE:

Chronic Myeloid Leukemia (CML) in Pediatric Population: Two Cases with Unusual Presentations

Objective: : Chronic myeloid leukemia (CML) is a rare disease in the pediatric population with an incidence of <0.1 cases per 100,000 children and constitutes 2% of all leukemias in children younger than 15 years. Few data exist on presentation and outcome in adolescents with CML, possibly due to the low incidence of CML in this age group.
Methods: We describe distinct clinical and pathologic findings in two pediatric patients with CML.
Results: The first patient is a 14-year-old male with history epilepsy, followed by a neurologist for the past year, who presented with frontal headache and abdominal distention. On physical exam, he was noted to have splenomegaly. The CBC was remarkable for normocytic normochromic anemia and a markedly increased WBC (856 k/uL) with eosinophilia, basophilia and 6% blasts. The bone marrow showed myeloid predominance with <5% blasts [figure 1]. The second patient is a 12-year-old female with no significant past medical history, who presented with night sweats and weight loss (2 kg in four weeks). The CBC revealed an increased WBC (200 k/uL) with 17% blasts. By flow cytometry, the blasts marked as B-lymphoid. The bone marrow showed myeloid predominance and 60% blasts [Figure 2]. In both cases, FISH detected t(9;22) (q34; q11.2) and PCR was positive for the major (p210) BCR-ABL1 mutation.
Conclusion: Pediatric CML is an uncommon disease with variable clinical presentation, ranging from symptoms associated with hyperleukocytosis and splenomegaly in chronic phase to B symptomology associated with blast phase. Despite distinct presentations, both patients had the same molecular mutation in BCR-ABL1.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-21	Nephropathology	Satoskar, Anjali M015 Starling Loving Dept. of Pathology Columbus USA	Oral Presentation	Shah, Robin Nadasdy, Tibor
Abstract No.				
003				
Date & Time				
16.10.2018 13:30-14:00				

ABSTRACT TITLE:

Zonal cortical scarring and tubular thyroidization in kidney biopsies of patients with SLE - histologic indicator for anti-phospholipid antibodies

ABSTRACT TEXT

Objective: Anti-phospholipid antibody syndrome (APS) is an acquired pro-thrombotic autoimmune disease caused by the presence of antibodies against anionic phospholipids or plasma proteins bound to phospholipids on cell membranes. It can be a primary disease or secondary to other autoimmune diseases, most commonly systemic lupus erythematosus (SLE). Laboratory testing for APS may only be transiently positive, so it could be missed until a catastrophic vascular episode or pregnancy morbidity occurs. In the kidneys, this manifests as thrombotic microangiopathy (TMA), and patients present with hypertensive urgency and acute kidney injury. However, APS may not always have a catastrophic presentation but instead a more smoldering course. Kidney biopsy may not show obvious active TMA lesions but rather only chronic injury in the form of zonal cortical scarring and tubular thyroidization. Still, it may warrant anticoagulation therapy. So it is important to recognize this pattern of injury in the biopsy.
Methods: We retrospectively studied the correlation between presence of this histologic feature in kidney biopsies of SLE patients and positive antiphospholipid antibody (aPL) testing results (using anticardiolipin antibodies and lupus anticoagulant). Kidney biopsies of SLE patients from 2004 to 2015 (n=157) were screened for presence or absence of zonal cortical scarring. Their electronic medical records were reviewed for aPL results.
Results: Our study showed low sensitivity (31%) and positive predictive value (54%) but high specificity (88%) and negative predictive value (74%). The distribution of the histologic lupus classes among these biopsies showed that the percentage of biopsies with zonal scarring and tubular thyroidization were found to be highest among the unclassified group, that is the group of lupus patients with biopsy showing predominant glomerular sclerosis and few to absent (resorbed) immune complexes, therefore no active lupus nephritis.
Conclusion: If this histologic feature is present in the biopsy, it is strongly suggestive of a positive aPL which could lead to APS but if absent, does not satisfactorily exclude it. It is not a sensitive screening tool, but if present, then the likelihood of underlying aPL is quite high. Immunosuppressive therapy alone in the absence of anticoagulation treatment may slow down the inflammatory process and immune complex formation, but not the smoldering vaso-occlusive lesions and chronic ischemia as a result of which the cortical scarring may still continue. We want to emphasize that recognition of this histologic feature in the biopsies of SLE patients is important so as not to miss the opportunity to treat with anticoagulation therapy and possibly slow down the chronic renal damage.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-25	Pediatric pathology	Stanek, Jerzy Cincinnati Children´s Hospital Dept. of Pathology Cinacinnati USA	Oral Presentation	Abdaljaleel, Maram
Abstract No.				
003				
Date & Time				
17.10.2018 13:30-14:00				

ABSTRACT TITLE:

CD34 immunostain increases the sensitivity of fetal vascular malperfusion diagnosis in placentas of stillbirths

ABSTRACT TEXT

Objective: Fetal vascular malperfusion (FVM) is most commonly caused by umbilical cord compromise. However, stillbirth-related postmortem regressive placental changes may obscure the pre-existing histomorphology. Our objective was to analyze whether the use of double E cadherin/CD34 immunostain (ECCD34) could increase the sensitivity of placental examination in this respect.
Methods: 26 independent clinical and 46 placental variables of 46 stillbirths were statistically compared to those of 92 livebirths. The most histologically unremarkable section per case was stained with ECCD34 to better assess villous vascularity. Clusters of avascular/hypovascular chorionic villi on H&E and/or ECCD34, the latter including CD34 positive endothelial debris in villous stroma, were regarded as evidence of FVM.
Results: The gestational age and caesarean section rate were statistically significantly lower, and induction of labor and mild erythroblastosis of fetal blood were higher in stillbirths than livebirths (p Bonferroni <0.00069). The frequencies of clinical and standard placental features of umbilical cord compromise were not statistically significant. By H&E, 9 (19.6%) stillbirths and 30 (32.6%) livebirths showed clusters of avascular chorionic villi. By ECCD34, the rates of FVM increased to 23 (50%) and 34 (40%), respectively. The increase was statistically significant for stillbirths only (Chi square= 9.4, p=0.002). ECCD34 upstaged the FVM (from none to low grade, or from low grade to high grade) for 23 (50%) and 29 (31.5%) cases of stillbirths and livebirths, respectively.
Conclusion: 50% of stillbirths and 31.5 % of livebirths showed evidence of FVM (previously called fetal thrombotic vasculopathy) when ECCD34 double immunostain was used, thus indicating a 30% and 7.4% increase in sensitivity as compared with H&E stain alone, for stillbirths and livebirths, respectively. We believe that ECCD34 immunostaining is a useful adjunct to clinical and conventional placental examination in investigating the differential diagnosis of stillbirth etiology, particularly in potential umbilical cord compromise.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-18	Immunohistochemistry	Shawash, Sarah King Hussein Cancer Center Dept. of Pathology and Amman Jordan	Oral Presentation	Al-Hussaini, Maysa
Abstract No.				
003				
Date & Time				
15.10.2018 14:00-14:30				

ABSTRACT TITLE:

cd99 / fli-1 double-positive anaplastic large cell lymphoma (alcl): a potential diagnostic pitfall

ABSTRACT TEXT

Objective: ALK positive anaplatic large cell lymphoma (ALCL) comprises 10-20% of childhood lymphomas. It may involve lymph nodes and, more commonly, extranodal sites such as skin, bone and soft tissues. Histopathologically, it shows a wide spectrum of variable morphologies ranging from small cell variant to the classical variant with large anaplastic hallmark cells. CD99 expression in ALCL has been reported in the literature. Although FLI-1 positivity is well known in different types of lymphomas, namely, acute lymphoblastic lymphoma/ leukemia (ALL) and diffuse large B-cell lymphoma (DLBL), only 4 cases of FLI-1 positive ALCL has been described.
Methods: An 11 year old male patient presented with a retroperitoneal mass. Light microscopic examination revealed sheets of monotonous malignant medium to large-sized cells with no specific morphologic findings. So, the differential diagnosis included Ewing sarcoma, rhabdomyosarcoma, neuroblastoma, dedifferentiated liposarcoma, Wilm's tumor, germ cell tumor and lymphoma.
Results: On initial panel, the tumor cells were positive for LCA, CD43, and CD99. They were negative for desmin, myogenin, synaptophysin, S100, MDM2, WT-1 and SALL-4. Accordingly, additional stains were performed and the tumor cells were positive for FLI-1, CD3, CD30, ALK and FLI-1, while negative for CD20 and TdT. PAS special stain highlighted occasional diastase digestible cytoplasmic glycogen.
Conclusion: In conclusion, we report a case of an 11 year old male with a retroperitoneal ALCL co-expressing CD99 and FLI-1. To the best of our knowledge, our case report is the first to describe double positivity for CD99 and FLI-1 in ALCL. Pathologists should be aware of this pitfall. The differential diagnosis of CD99/ FLI-1 double positive small round blue cell tumors should include ALCL in addition to Ewing sarcoma and ALL.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-I	Hematopathology I	Suliman, Nada University of Gezira Faculty of Medicine Medani Sudan	Oral Presentation	
Abstract No.				
003				
Date & Time				
17.10.2018 13:30-14:10				

ABSTRACT TITLE:

Clinicopathological parameters of Sudanese breast cancer patients, Central Sudan

Objective: The general objective of the current study was to explore distribution of molecularly defined breast cancer subtypes in Sudanese population.
Methods: Pathological characterizations that were done included tumor size, nodal status, tumor's grade, presence of lymphovascular invasion and status of surgical margins. Immunohistochemistry studies for ER, PR, Her2, Ki67 and ck 5/6 were performed. A total number of 165 cases of invasive breast cancer were identified – 141 cases had adequate tumour blocks for review and immunohistochemical studies.
Results: Majority of the study population is in the age group 45 to 55 with fewer cases diagnosed at ages above 55 years indicating young age at diagnosis. Established risk factors for breast cancer were found to have little contribution to incidence of breast cancer among our study group. After histological review and analysis, the tumor average size was 3.7 ± 2.6 cm (ranging from 0.2 to 16 cm) which indicate advanced tumour size at presentation. Most of these tumors were diagnosed as invasive ductal carcinoma (IDC) which is similar to other published data on the same subject. The majority of tumors were Luminal A (34.6%), (27.7%) were Luminal B, basal-like (16.9%), Her2-overexpressed (15.4%) and unclassified (5.4%). It is obviously that the incidence of BCL in our study group is far less than that reported for young African Americans, and it more near to percentage reported from Saudi Arabia and Nigeria. The statistically significant difference between molecular subtypes and different variables was detected with menopausal status, tumour grade, insitu component, clinical behavior at diagnosis and the proliferative index.
Conclusion: Majority of the study population is in the age group 45 to 55 with fewer cases diagnosed at ages above 55 years indicating young age at diagnosis. Established risk factors for breast cancer were found to have little contribution to incidence of breast cancer among our study group. After histological review and analysis, the tumor average size was 3.7 ± 2.6 cm (ranging from 0.2 to 16 cm) which indicate advanced tumour size at presentation. Most of these tumors were diagnosed as invasive ductal carcinoma (IDC) which is similar to other published data on the same subject. The majority of tumors were Luminal A (34.6%), (27.7%) were Luminal B, basal-like (16.9%), Her2-overexpressed (15.4%) and unclassified (5.4%). It is obviously that the incidence of BCL in our study group is far less than that reported for young African Americans, and it more near to percentage reported from Saudi Arabia and Nigeria. The statistically significant difference between molecular subtypes and different variables was detected with menopausal status, tumour grade, insitu component, clinical behavior at diagnosis and the proliferative index. Further prospective study with more patients that strictly following fixation guidelines is recommended to consolidate the findings of my current study.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-08-I	Education in pathology –	Vranic, Semir Doha Qata	Oral Presentation	AlAhmad, Yaman Farid M . Abdelhafez, Ibrahim Hamdy Ezzat Cyprian, Farhan S . Skenderi, Faruk Akhtar, Saghir
Abstract No. 003				
Date & Time 15.10.2018 14:00-14:30				

ABSTRACT TITLE:
Predatory journals in pathology: A comprehensive assessment

ABSTRACT TEXT

Objective: Predatory journals have recently come into focus due to their massive internet expansion and extensive spam email soliciting. Recent papers have highlighted this urgent problem in neuroscience/neurology and physical medicine. In the present study, we analyzed the presence and role of predatory journals in pathology.
Methods: We explored the major bibliographic databases (PubMed/MEDLINE, Web of Science/SCI/SCIE/JCR/, Scopus, Google Scholar) to identify potential predatory pathology journals. The Beall's list served as an initial database while previously established criteria (BMC Medicine 2017;15:28) were used for the assessment.
Results: We identified 93 legitimate pathology journals from the major bibliographic databases and 79 potential predatory pathology journals out of 350 journals from the Beall's List. All potential predatory pathology journals shared at least one common poor-quality feature that included a lack of web-site integrity, missing/pending ISSN number, unreal number of issues per year, emphasis on open-access policy, anonymous and/or misused names of editorial board members, ambiguous/unclear peer-review process, and considerably variable article-processing fees (ranging from 50$ to 2500$). In addition, we identified 24 potential predatory pathology journals having misleading titles, similar or identical to those of legitimate journals. 31% of these journals were indexed in the databases that generate bogus impact factors (e.g. Index Copernicus, Cosmos Impact Factor, J-Gate). Only one of the identified journals was listed in DOAJ whereas none (0%) was indexed in PubMed/MEDLINE and Web of Science nor have they had a legitimate impact factor in the JCR ("white list" journal). In contrast, none legitimate pathology journal was listed in the Beall's list ("black list" journal).
Conclusion: This study highlights the large number (79/350) of potential predatory pathology journals that could pose a significant challenge and threat to the academic community within this medical discipline. This study may aid pathology researchers in their decision-making process when submitting manuscripts for publication.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-I	Breast pathology I	Balkenhol, Maschenka Radboudumc Pathology Nijmegen Netherlands	Oral Presentation	van der Laak, Jeroen Wauters, Carla Vreuls, Willem Mol, Suzanne Bult, Peter
Abstract No. 004				
Date & Time 15.10.2018 14:30-14:40				

ABSRACT TITLE:
Prognostic histological and clinicopathological features of triple negative breast cancer based on a large Dutch multicentre cohort

ABSTRACT TEXT

Objective: Much research has been focussed on novel prognostic biomarkers for triple negative breast cancer (TNBC), whereas only scattered information about the prognostic value of histological and clinical parameters in TNBC is available. This study aims to assess the prognostic value of clinicopathological features of TNBC.
Methods: A multicentre retrospective TNBC cohort was established using the Netherlands Comprehensive Cancer Registry. From 5 hospitals from Eastern Netherlands, all patients with oestrogen receptor, progesterone receptor and HER2 negative breast cancer diagnosed between 2006 and 2014 were selected. Neoadjuvant treatment and stage IV disease at initial presentation were exclusion criteria. Clinical and follow-up data (overall survival (OS) and disease free survival (DFS)) were retrieved and central review of histological type and grade was performed.
Results: Of 597 patients included (median follow up 61.1 months, median age at diagnosis 56.0 years), 19.4% developed a recurrence, after which 61.2% died from metastatic TNBC. The most common histological subtypes were carcinoma of no special type (NST) (88.3%), metaplastic carcinoma (4.4%) and lobular carcinoma (3.4%). Special histological subtypes were independently associated with a worse DFS compared to carcinoma NST (HR 1.89; 95% CI 1.11 - 3.20; p = 0.019). Other independent risk factors for a worse DFS were higher tumour and lymph node stage and not receiving adjuvant therapy, the latter yielding the highest risk (HR 3.49; 95% CI 2.08 - 5.87; p = < 0.001). A higher tumour and lymph node stage and not receiving adjuvant therapy were also correlated with a worse OS.
Conclusion: Almost 1 in 5 patients developed a TNBC recurrence with a subsequent high risk of dying from metastatic disease. Histological subtype was found to be an independent prognosticator for DFS. Careful histological examination can provide specific prognostic information and enables more personalized treatment and surveillance regimes for TNBC.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-22	Neuropathology	Husain, Nuzhat Dr. Ram Manohar Lohia Institute Dept. of Pathology Lucknow India	Oral Presentation	Shukla, Saumya Awale, Rupali Kaif, Mohammad Mishra, Sridhar Malhotra, Kiran Preet
Abstract No. 004				
Date & Time 18.10.2018 13:30-14:10				

ABSTRACT TITLE:
Histological and molecular correlates of PDL-1 in gliomas

ABSTRACT TEXT

Objective: Gliomas constitute 51.4% of all brain tumours. The treatment options include surgery followed by chemo-radiotherapy. The overall prognosis and survival is poor. Programmed death 1 (PD-1) and its ligand (PD-L1) belong to the CD 28 family of proteins is a T cell surface receptor that regulates T cell activation and proliferation. Blockage of immune check points with monoclonal antibodies has recently emerged as a promising new approach for the treatment of glial neoplasms. The objectives of this study were to analyse the expression of PD-L1 in adult diffuse gliomas in World Health Organization (WHO) grade II, III and IV and to co-relate its expression with clinico-pathological features, IDH-1 and p-53 mutation status.
Methods: This was a retrospective case series that included 30 cases, 10 cases each of adult diffuse glioma grade II and III and glioblastoma. PD-L1 expression was assessed in 30 cases by immunohistochemistry on formalin fixed paraffin embedded tissue blocks using pre-diluted Ventana PD-L1 (SP-263) Rabbit monoclonal primary antibody (Ventana Medical Systems, Tuscon, AZ) on the benchmark XT system using the Optiview DAB IHC detection kit and Optiview Amplification kit.
Results: PD-L1 expression was identified in 30% cases (n=10/30) which included 7 females and 3 males. Based on the WHO grade PD-L1 expression was identified in 20% grade II tumours (n=2/10), 30% grade III tumours (n=3/10) and 50% grade IV tumours (n=5/10). All neoplasms with PD-L1 expression were phenotypically astrocytic tumours. Tumours with oligodendroglial phenotype (n=6/30) were all negative for PD-L1. Tumours with PD-L1 expression were IDH-1 wild type which was statistically significant when compared with the PD-L1 negative group (p=0.013). p-53 mutation was associated with PD-L1 expression in 55.56% (n=5/9), however, this was not statistically significant when compare with the PD-L1 negative group. (p=1.00).
Conclusion: Immunotherapy using PD-L1 blocking agents may be investigated as a treatment option in high grade glial tumours (grade III and IV) as an adjunct to conventional chemoradiation.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-13	Gynecological pathology	Kanthan, Rani Saskatoon Canada	Oral Presentation	Baniak, Nick Adams, Scott Lee, Cheng-Han Chibbar, Rajni
Abstract No. 004				
Date & Time 16.10.2018 13:30-14:20				

ABSTRACT TITLE:
Immunohistochemical and molecular characterization of extra-pelvic endometrial stromal sarcomas

Objective: Endometrial stromal sarcomas [ESS] are rare uterine tumors that can recur/metastasize years after initial presentation. Though most recurrences are within the pelvis, distant metastases outside the pelvis can occur. This study reviews the clinicopathological features of extrapelvic metastatic ESS and characterizes their immunohistochemical and conformational molecular analysis.
Methods: A review of the Saskatoon/Regina laboratory databases in Saskatchewan, Canada over the last 20-years identified 32 cases of ESS. Upon review 10 had extra-pelvic metastases. Immunohistochemistry (IHC) analysis included CD10, Cyclin D1, ER (estrogen receptor), PR (progesterone receptor), Ki67, and p53. Molecular characterization for genetic analysis used a RNA-based assay for detecting the presence of fusion transcripts using Nanostring Element based technology.
Results: Ten patients with Extrapelvic metastases were identified with the primary site being uterine (n=9) and ovarian (n=1). The most common sites of metastases were lung (n=9), small or large bowel (n=4), liver (n=3), and abdomen not otherwise specified (n=1). Two cases of ESS presented initially with an extrapelvic metastasis with no prior history of uterine/ovarian ESS. Of the remaining cases, the mean time from initial diagnosis of ESS to first presentation of extrapelvic metastases was 10.4 years (range 0.75-20 years). Multiple recurrences of extrapelvic metastatic ESS were noted in four patients. 5 of the 10 cases had a confirmed mutation in either the primary, recurrence, or both (two high-grade-ESS with - YWHAE-NUTM2 and three low-grade-ESS with JAZF1-SUZ12). IHC of Cyclin D1 overexpression in the two high-grade cases was concordant with the molecular findings.
Conclusion: Extrapelvic metastases of ESS can occur as a delayed event, necessitating awareness of this unusual neoplasm for accurate diagnosis. In cases with no documented primary lesion, the possibility of de novo ESS arising within unusual endometriotic foci must be considered. IHC and genetic analysis are useful tools in the diagnosis of challenging cases.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-II Abstract No. 004 Date & Time 16.10.2018 13:30-14:40	Molecular pathology II	Khan, Saeed Dow University of Health Science Dept. of Pathology Karachi Pakistan	Oral Presentation	Zahid, Maria

ABSTRACT TITLE:

Evolving HIV epidemic with emergence of diverse HIV subtypes in Karachi, Pakistan

ABSTRACT TEXT

Objective: HIV-1 prevalence is at horizon of incline in general population because of people engaged in high-risk practices such as drug abuse, sexual activities, shared needles, healthcare exposure, or through unsafe blood transfusion and transmission from mother to child are frequently being observed in Pakistan, which accounted Pakistan a low-resource country where increase in prevalence is observed among high risk groups. So, it is important to identify circulating HIV-1 strains in Pakistan for the better understanding of the origin of emerging HIV-1 subtypes, recombinant forms and their transmission dynamics. In this study, we analyzed HIV epidemic in Karachi using gene sequencing and bioinformatics tool.

Methods: Total 50 infected patients (drug naive) were recruited in this study. Whole blood samples were collected from all patients. After DNA extraction, all positive samples were subjected to nested PCR using specific primers. The amplified products were sequenced and compared to reference sequences available at the LOS Alamos HIV Data base. The sequences of HIV infected patients were aligned and phylogenetic trees was constructed via the Maximum Likelihood method using MEGA 7.0 software. From the results of the test, statistics analysis was done on SPSS 20.

Results: Our results indicated that 81.25% of all the sequences were clustering with subtype A1. However, we also observed that few of the sequences were clustering with subtype C (6.26%), G (6.25%) and emerging recombinant subtype CRF11 (6.25%). Our data for geographic linkages are closely clustering with reference sequences of African countries.

Conclusion: We observed that majority of the sequences were clustering with previously reported circulating subtype A1, C and G. Furthermore, we also detected emerging subtype CRF11, that had never been reported from Pakistan and my study is first to report this subtype from the region. Our results are alarming and suggesting that these circulating viruses and those newly generated recombinants may become predominant strains in Pakistan.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-II Abstract No. 004 Date & Time 18.10.2018 13:30-14:10	Hematopathology II	Leoncini, Lorenzo University of Siena Siena Italy	Oral Presentation	Nesi, Gabbriella Ambrosio, Maria raffaella Santi, Raffaella Lo Bello, Giuseppe Vergoni, Federica Mundo, Lucia Granai, Massimo Dirnhofer, Stephan Tzankov, Alexander

ABSTRACT TITLE:

Evaluation of PD-1, PD-L1, PD-L2, FOXP3 and CCR7 expression as prognostic factors in patients with primary testicular lymphoma

ABSTRACT TEXT

Objective: Primary testicular lymphomas (PTLs) are extranodal large B-cell lymphomas with poor response to current therapies. This might reflect their sites of origin considered to be an immune privileged sanctuary.The aim of the present study is to determine the clinico-pathological impact of immune invasion in PTL by evaluating the expression of the programmed cell death 1 (PD-1)/PD-1 ligands (PD-L1/PD-L2) pathway (key check-point for the regulation of T-cell mediated immune response), FOXP3 (CD4-positive/CTLA4-positive regulatory T-cells) and CCR7 (CD8-positive central memory T cells). Growing knowledge about immune pathology in PTL along with the implementation of immunotherapy occurred in the last years may open new way for the treatment of these unfavorable prognosis diseases

Methods: Formalin-fixed paraffin embedded (FFPE) tumor samples and clinical data from 52 patients with PTL was obtained from the Section of Pathology and the Oncology Unit of Siena University Hospital and Firenze University. The pathology of all cases (already collected) has been reviewed and diagnosed according to the updated WHO classification of tumours of hematopoieic and lymphoid tissue. Moreover, all the cases was classified as germinal center or activated B-cells lymphoma. Immunohistochemistry staining was performed by an automated staining system (Ventana BenchMark ULTRA, Roche diagnostic, Monza-Italy) with appropriate positive and negative controls included in each staining run. To classify lymphomas as germinal center or activated B-cell, CD10, Bcl-6 and MUM-1 stainings were employed. The following antibodies were tested: PD-1 and PD-L1, both provided by Ventana/Roche diagnostic; PD-L2, FOXP3 and CCR7. To study neoplastic population, double staining for PD-1 and PAX-5, PD-L1/PD-L2 and PAX-5 was evaluated. To analyze tumor cell microenvironment, double staining for PD-1 and CD68, PD-L1/PD-L2 and CD68 was carried out. Tumor infiltrating small lymphocytes (TILs) have been also estimated by means of FOXP3/CD4 and CCR7/CD8 double stainings. LCA and CD3 were also evaluated as well as the pattern of expression of MYC protein. Stained slides were scored separately by two pathologists.

Results: The Activated B-cell phenotype was observed in 50% of cases, thus confirming previous data from literature, and partially accounting for the historically poor outcome of PTL. MYC protein expression was detected in 25% of cases, in a percentage of neoplastic cells ranging from 40% to 60%. As far as the tumor and its microenvironment is concerned, we detected PD-L1 expression only in neoplastic cells, whereas PD-1, FOXP3 and CCR7 only in the tumor microenvironment (reactive lymphocytes and macrophages). The TILs were represented mainly by CD4-positive T-cell. Specifically, cases with high CD4-positive T-cell numbers tended to have higher numbers of both PD-1 and FOXP3 expressing cells. However, immunohistochemical evaluation needs to be completed on all the cases. Although preliminary, an important finding suggested by our study is that the PD-1/PD-L1 pathway may preferentially mediate its immunosuppressive effects during direct presentation of tumor antigens. The pilot statistical evaluation seems to suggest an adverse prognostic impact of PD-L1 on patient's outcome and an inverse correlation with PD-1 and FOXP-3 expression. Nonetheless, statistical analysis is working.

Conclusion: Understanding what factors determine if a patient will respond is a crucial step in selectingh the more appropriate therapeutic approach. Therefore it is important to address what these marker are and their relative importance. If our preliminary results will be confirmed, the present study will open new avenues for identifying predictive biomarkers that may guide therapeutic choices and eventually improve the prognosis of these diseases.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-11 Abstract No. 004 Date & Time 16.10.2018 13:30-14:10	Gastrointestinal pathology	Mekki, Salwa Soba University Hospital Al-Neeilan University Khartoum Sudan	Oral Presentation	

ABSTRACT TITLE:

Hitopathological findings of whipple resected specimens of Sudanese patients: A clinicopathological review in Khartoum state

ABSTRACT TEXT

Objective: The aim of this study was to analyse the histopathological parameters of Whipple specimens in relation to clinical presentaion, and demographic data.

Methods: This is a descriptive retrospective case series study conducted in 3 centers in Khartoum state from Jan 2016 - March 2018. Paraffin blocks, slides, and clinical data of cases were reviewed.

Results: The study included 41cases, 28 were males and 13 were females. Their age ranged 20-90 years, with a mean age of 56.08 ±12.98. The commonest presenting symptom was obstructive jaundice (78%). Thirty five (85.4%) cases had malignant tumor, commonly in the head of pancreas (51.2%), followed by ampulla (17.1%), duodenum (12.2%), distal common bile duct (9.8%) and pylorus, retroperitonium and tail of pancreas in 2.4% respectively. Moderately differentiated adenocarcinoma was the commonest histoloic type (77.1%). Less common tumors include, neuroendocrine tumor (9.8%), papaillary pseudotumor and IgG4 autoimmune pancreatitis (2.4%). Perineural invasion was detected in 36.6% and vascular invasion in 12.2%. Tumor size correlated with vascular invasion (p.value 0.003). Surgical margin involvement was seen in 6 cases (14.6%), mostly pancreatic margin. The average number of lymph nodes disected was 3-30. About half of cases had lymph node metastasis, commonly in the anterior and posterior pancreatic regions. The majority of cases (63.4%) were pathologically stage T3 and T4. Lymph node involvement was significantly correlated with TNM staging (p.value 0.000).

Conclusion: The present study demonstrated that most of the cases were diagnosed with moderately differntiated adenocarcinoma of the pancreas. The majority had advanced histologic stage T3and T4 and half had lymph node metastasis.

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-II Abstract No. 004 Date & Time 16.10.2018 13:30-14:10	Breast pathology II	Mtshali, Nompumelelo University of Witwatersrand Johannesburg South Africa	Oral Presentation	

ABSTRACT TITLE:

Adenomyoepithelioma (AME) with carcinoma of the breast

Objective: To present an unusual AME with carcinoma of the breast

Methods: A 69 year-old female presented with a left breast mass. A mastectomy and sentinel lymph node biopsy were performed. A lobulated circumscribed tumour at the lower outer quadrant measuring 50x45x35mm was identified. The specimen was processed and immunohistochemical stains performed. Histology showed, a well circumscribed, unencapsulated, multilobulated tumour with central necrosis. A proliferation of neoplastic myoepithelial cells around luminal epithelial cells. The epithelial cells were not atypical. Neoplastic myoepithelial cells showed epithelioid cytomorpholgy with marked nuclear pleomorphism, irregular nuclear contours, vesicular chromatin,clear cytoplasm, with microscopic satellite tumour deposits at the periphery of the tumour.

Results: Immunohistochemical stains showed positivity with p63, CK5/6, SMA, MSA, H-caldesmon and S100. Desmin, ER, PR, HER2 were negative.

Conclusion: AME with carcinoma is an infrequent tumour that poses difficulty in diagnosis and can be easily dismissed or confused with triple negative invasive carcinoma of no special type. The role of immunohistochemical stains is critical in making a definitive diagnosis of this tumour.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-19	Pathology of infectious diseases	Quaresma, Juarez Tropical Medicine Center Belem Brazil	Oral Presentation	
Abstract No. 004				
Date & Time 17.10.2018 13:30-14:10				

ABSRACT TITLE:

IL-1 and endoplasmic reticulum stress markers in leprosy skin lesions

ABSTRACT TEXT

Objective: The primary objective of this work is to evaluate the local expression of the proteins that characterize ERE and its relationship with the expression of IL-1β, which is the main biologically active form of IL-1, in the context of leprosy correlating with clinical-evolutionary aspects of the disease.

Methods: In this study we analyzed, by immunohistochemistry, the tissue expression of inflammasome markers (IL-1β, GRP78/BiP, PERK, IRE1α, and ATF6) in 43 leprosy skin lesion samples, 13 were indeterminate, 15 were tuberculoid, and 15 lepromatous leprosy. Results: Cell expression of GRP78/BiP was higher in TT lesions (13.84 ± 3.9 cell/field) than in LL lesions (10.41 ± 2.57 cell/field) or IL lesions (8.96 ± 3.15 cell/field). PERK expression was also higher in TT lesions (13.33 ± 3.68 cell/field) then in LL (12.48 ± 3.77 cell/field) or IL (7.49 ± 2.61 cell/field) lesions; with difference statistically significant between TT and IL, and LL and IL clinical forms, but not TT and LL lesions. IRE1α was highly expressed in TT (12.21 ± 2.35 cell/field), followed by LL (7.84 ± 1.14 cell/field), and IL (7.34 ± 2.17 cell/field) lesions, with a statistically significant difference between TT and the other clinical forms. ATF6 was more expressed in TT (10.11 ± 2.38 cell/field), followed by IL (7.48 ± 1.77 cell/field), and LL (6.93 ± 1.77 cell/field) clinical forms, with statistical difference between TT and the others clinical presentations of leprosy. IL-1β was higher in LL (19.36 ± 6.50), followed by that in TT (13.24 ± 9.38 cell/field) and IL (7.17 ± 5.45 cell/field).

Conclusion: These results represent the first evidence of relationship between ERE and IL-1β in samples of skin lesions from leprosy patients. We believe they will provide better understanding of the complex pathogenesis of the disease and facilitate further characterization of the cascade of molecular events elicited during infection.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-16	Hepatopathology and Biliary System	Qureshi, Muhammad Asif Karachi Pakistan	Oral Presentation	Ashfaq-Khan, Muhammad Aslam, Misbah Hessel, Christian Gasteiger, Georg Schuppan, Detlef
Abstract No. 004				
Date & Time 15.10.2018 14:00-14:50				

ABSRACT TITLE:

Differential Expansion of Innate Lymphoid Cells-1 and 2 in Pre-neoplastic Stages of Hepatocellular Carcinoma

ABSTRACT TEXT

Objective: To characterizethe innate lymphoid cells (ILCs) infiltration in our recently developed novel HCC model using Mdr2(Abcb4)-/- mice that were treated with diethynitrosamine (DEN) and Phenobarbital (PB).

Methods: In order to develop in vivo HCC model, 3-5 days old Mdr2(Abcb4)-/- mice were injected intra-peritonealy with a mutagen, DEN(10μg/g bw). This was subsequantly followed by administration of 0.05%phenobarbital (PB) (in drinking water) starting from 3weeks of age. Mdr2(Abcb4)-/- mice that were neither given DEN nor DEN, and wild-type mice with/without DEN and PB administration were used as controls. All mice under investigation (transgenics and controls) were culled at 6,12,24 and 36 weeks and liver samples were fixed in formalin to be analyzed by histopathology. Tissues were analyzed using standard flowcytometric panels for ILC1, ILC2 and ILC3.

Results: In comparison to all types of controls used in the study, the Mdr2-/- mice that were injected with intraperitoneal DEN and given PB in drinking water demonstrated a significantly different pathology with high proliferative index, increased neoplastic progression, increased lymphocyte infiltration and increased degree of fibrosis. Livers of these (transgenic) mice showed increased preneoplastic/neoplastic hepatoma cells frequently surrounded by congested sinusoids as early as 6 weeks onwards. At microscropic level, tumour phenotype in livers of these mice ranged from being pseudo tubular to trabecular-type tumour morphology. Importantly, alternatively activated macrophages (M2 phenotype) were heavily infiltrated in tumour microenvironment (particularly in the intra-tumoural compartment) as early as 6 weeks. Amongst the recently identified innate lymphoid cells, ILC1 and ILC2 were expanded (and ILC3 were almost absent) during preneoplastic stages of HCC in Mdr2 (Abcb4)-/- DEN and PB treated mice.

Conclusion: We report proliferative, necro-inflammatory, tumorgenic, and fibrotic changes during preneoplastic stages of HCC in a novel murine model. Moreover, we show that ILC1 and ILC2 are expanded in preneoplastic stages of HCC. These differentially regulated cells may represent novel targets for HCC immunotherapy.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-03-III	Breast pathology III	Tejada, Kethly Yolo, Rowen University of Santo Tomas Hospital Dept. of Anatomic Pathology Manila Philippines	Oral Presentation	Bautista, Maria Diana Aileen
Abstract No. 004				
Date & Time 17.10.2018 13:30-14:10				

ABSRACT TITLE:

Correlation of clinical and histopathologic findings in patients with primary breast carcinoma who underwent neoadjuvant chemotherapy in a tertiary hospital in manila from january 2012 to december 2016

ABSTRACT TEXT

Objective: General Objective: Determine the correlation of clinical and histologic parameters with pathologic response among patients with breast carcinoma who received neoadjuvant chemotherapy and surgery. Specific Objectives: Determine if there is a correlation between age and pathologic response; if there is a correlation between histologic type of breast cancer and pathologic response; if there is a correlation between tumour grade and pathologic response; and if there is a correlation between hormone receptor status and pathologic response.

Methods: This is a retrospective correlation study to analyze histopathologic reports and chemotherapy. The inclusion criteria include patients with established diagnosis of breast carcinoma on biopsy with pre-chemotherapy assessment of tumour size; who received chemotherapy prior to surgical intervention; with assessment of tumour size after neoadjuvant chemotherapy prior to the definitive surgical intervention; and received definitive surgical intervention after chemotherapy. The clinical responses were graded using AJCC criteria to define objective clinical response using bi-dimensional tumour measurements. Pathologic response grading was evaluated using the MDACC RCB score. The data was tabulated using Microsoft Excel and analyzed using Statistical Package for Social Sciences. Baseline demographics of the patients' mastectomy specimens i.e. tumour size, histologic type, nodal involvement, hormonal receptor status were compared between the clinical response and pathologic response using the chi-square test for independence. Spearman correlation was used to correlate pathologic response with the clinical stage, tumour grade, and pathologic stage. Point-Biserial was used to correlate pathologic response with the histologic type. Logistic regression analysis was performed to investigate the association between the pre-treatment clinical and pathologic parameters with treatment outcome. p <0.05 are considered statistically significant.

Results: 52 patients underwent neoadjuvant chemotherapy for primary breast carcinoma from January 2012 to December 2016. Three (3) patients have not yet undergone definitive surgery and five (5) have no data prior to surgical management. A total of 41 patients were included in the study. Majority of the patients are female (98%) and one male (2%). The average age of patients is 52.9 years (30-80 years old). Invasive ductal carcinoma is the most common histologic type (91.3%). Most of the tumour histology are poorly differentiated (26.83%) and most of the patients have stage III disease (21.95%). The most common neoadjuvant chemotherapy regimen given was Doxorubicin + 5-Fluorouracil + Cyclophosphamide followed by Doxorubicin + Docetaxel. Patients have received an average of five chemotherapy cycles (2 to 11 cycles) prior to definitive surgery. Post chemotherapy, most of the patients have clinical and pathologic stage III disease, 41.1% and 46.34% respectively. Lymph node metastasis is present on the mastectomy specimen in 31 (75.62%) patients. A large percentage of patients (34.15%) and only 1 (2.44%) patient had complete pathologic response.

Conclusion: Tumour grade and nodal status are correlated with pathologic response in this study. Hormone receptor, age of patients, histologic type of tumour, and clinical stage are not correlated with pathologic response. RCB is seldom used in clinical studies and this study adapted the RCB scoring for assessment of pathologic response and provides insight on the institutions' experience on using this methodology. Follow-up of patients is recommended to determine the ability of RCB scoring index to predict outcomes, disease-free survival, and overall survival, and to compare RCB scoring with other scoring methodologies to determine their concordance and correlation with the clinical outcomes. A limitation of this study is the small number of patients who underwent neoadjuvant chemotherapy which limits the statistical power and the relevance of the results in the general population.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-28	Soft tissue and bone pathology	Vaiphei, Kim Postgraduate Institute of Chandigarh India	Oral Presentation	Beniwal, Karmesh Kumar Kanojia, Rajendra Kumar
Abstract No. 004				
Date & Time 18.10.2018 13:30-14:10				

ABSRACT TITLE:

Clinicopathological spectrum of fragility hip fracture observed in a developing country

Objective: to assess incidence and extend of osteopenia in fragile hip fracture patients, and to correlate with the radiological features and the biochemical parameters.

Methods: the study included 45 patients, who were more than 50 years of age, who had fragile fractures involving neck of femur and inter-trochanteric region over one year. Detail clinical history including history of sun exposure and clinical examination were carried out. All patients were evaluated by radiology before the surgery and also for serum 25-OHD, parathyroid hormone, calcium, phosphorous and alkaline phosphatase (ALP). DEXA Scan was done to assess bone mineral density (BMD). Multiple small fragment of the bone biopsied at fracture site were submitted for routine histopathological examination. Undecalcified 3 micron thick paraffin sections were stained with H&E, toluidine blue at ph 2.8, elastic von Gieson, Masson's trichrome and solochrome cyanine R. Morphological assessment of the biopsies were carried out as follows – i) overall appearances of the bony trabeculae, ii) extend of the trabecular thinning into mild, moderate or severe, iii) distribution of the involved trabeculae as focal, patchy or diffuse, iv) intertrabecular changes i.e. presence of reactive new bone formation, osteoblastic and osteoclastic reactions, fibrosis and inflammatory cells and their extend and amount. The final impressions for osteopenia were graded into mild, moderate or severe. These were interpreted in context to normal bone.

Results: there were 25 male and 20 female, 31 [68.9%] with inter-trochanteric fracture and 14 with fracture neck femur [31.1%]. Serum calcium level was reduced in 20, 10 [22.2%] had reduced phosphate, 24 [53.3%] had increased ALP level; Serum Vitamin D was low in 22. Histopathology- 30 [66.7%] showed osteopenia, mild in 3, moderate in 8 and severe in 19. In 4 patients, the biopsy specimens showed dead bone fragments and fibrosis. All 30 patients with features of osteopenia showed low values for serum Vitamin D, calcium and phosphate, and high serum alkaline phosphatase. Extend of the osteopenia was assessed better by histomorphological examinaiton than by DEXA scanning.

Conclusion: Low serum vitamin D level associates with fragility hip fracture. Underlying etiology appears to be related to inadequate sunlight exposure and reduced calcium intake. Our study re-emphasized importance of histopathological examination of the affected bone to document osteopenia in these group of adult patients.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-I	Hematopathology I	Wang, Jinfen Shanxi Cancer Hospital Taiyuan China	Oral Presentation	Su, Hong
Abstract No. 004				
Date & Time 17.10.2018 13:30-14:10				

ABSTRACT TITLE:
MicroRNA-320d is frequently downregulated in diffuse large B cell lymphoma and inhibits cell proliferation by directly targeting CDK6

ABSTRACT TEXT

Objective: to investigate the role of CDK6 and microRNA-320d in diffuse large B cell lymphoma (DLBCL) and their relationship between CDK6 and miRNA-320d.
Methods: Eighty-five cases of DLBCL with follow-up data were analyzed. Immunohistochemical EnVision method was used to detect CDK6 expression in tissue sections. Bioinformatics software and dual-luciferase reporter assay were used to predict and validate the potential target of microRNA (miR)-320d, respectively. Overexpression and small-hairpin RNA knockdown of CDK6 were performed by lentiviral transduction. Cell proliferation was assessed using the CCK-8 assay. Western blotting and qRT-PCR was respectively used to detect the expression of the CDK6 protein and mRNA in DLBCL cells transfected with miR-320d lentiviral vector.
Results: CDK6 is upregulated in DLBCL patients with poor prognosis; Over-expression of miR-320d or knock-down of CDK6 inhibit proliferation in GCB type of DLBCL cell; CDK6 is a direct target of miR-320d.
Conclusion: The CDK6 protein was highly expressed in DLBCL tissues and was correlated with inferior outcome of DLBCL patients. The overexpression of miR-320d could suppress DLBCL cell proliferation through targeting CDK6, suggesting that miRNA-320d might be a potential therapeutic target for the treatment of DLBCL with high CDK6 expression.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-15-II	Hematopathology II	Leoncini, Lorenzo University of Siena Medical Biotechnology Siena Italy	Oral Presentation	
Abstract No. 005				
Date & Time 18.10.2018 13:30-14:10				

ABSRACT TITLE:
Burkitt lymphoma update of WHO classification

ABSTRACT TEXT

Objective: Burkitt lymphoma (BL) is a highly aggressive but curable lymphoma that often presents in extranodal sites or as an acute leukaemia. Three epidemiological variants of BL are recognized: endemic-eBL (associated to EBV infection in almost all cases), sporadic-sBL (linked to EBV infection in 30 % of cases), immunodeficiency associated-iBL (EBV is identified in 25–40 % of the patients).
Methods: . However, some differences exist among the three variants; specifically an enhancement of the BCR signaling pathway and tumor necrosis factor α (TNFα)/nuclear factor κB (NF-κB) in eBL, suggest an active role for chronic antigenic stimulation and infectious agents in the pathogenesis.
Results: Next generation sequencing (NGS) analysis has revealed the importance of the BCR signaling pathway in the pathogenesis of BL. Mutations of the transcription factor TCF3 (E2A) or its negative regulator ID3 have been reported in about 70% of sporadic BL case. These mutations activate BCR signaling, which sustains BL cell survival by engaging the PI3 kinase pathway. CCND3, TP53, RHOA, SMARCA4 and ARID1A are other recurrent mutations occurring in 5% to 40% of BL. The global number of mutations and mutations in TCF3/ID3 is lower in endemic than sporadic BL
Conclusion: An inverse correlation between EBV infection and the number of mutations has been observed, suggesting that these mutations may substitute the virus for the activation of the BCR signaling.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-II	Molecular pathology II	Roome, Talat Dow Univ. of Health Science Dow International Medical Coll Dow International Karachi Pakistan	Oral Presentation	Rao, Komal Aziz, Sabahat Razzak, Anam Sikandar, Bushra Imran, Muhammad Jabri, Tooba Shah, Muhammad Raza
Abstract No. 005				
Date & Time 16.10.2018 13:30-14:40				

ABSTRACT TITLE:
Anti-arthritic potentials of gum acacia stabilized hesperidin silver nanoparticles: A novel suppressor of TLR-2 & -4

ABSTRACT TEXT

Objective: Rheumatoid arthritis (RA) is an autoimmune disease with constant prevalence rate of about 0.5-1.0 % worldwide. Various immune components of innate immunity including B & T cells, synoviocytes and humoral factors (cytokines) play critical role in the pathogenesis of RA. The current study is aimed at designing of gum acacia (GA) stabilized green silver nanoparticles (AgNPs) for enhanced loading and delivering of hesperidin (HP) in RA model and to explore its anti-arthritic mechanisms targeting Toll-like Receptors (TLRs).
Methods: Synthesized GA-AgNPs were characterized through UV–vis spectrophotometer, zeta sizer and atomic force microscope (AFM). Complete Freund's adjuvant (0.1 ml) was injected into the rat hind paw followed by 14 days oral treatment with HP (25mg/kg), GA-AgNPs-HP and GA-AgNPs (1mg/kg). Histological evaluation of knee joints was performed using (H & E) staining and mRNA expressions of TLR2 & 4 in spleen tissues were analyzed by RT-PCR. Moreover, radiographic examination of knee joints was performed to extend the articular damage and bone destruction.
Results: HP loaded GA-AgNPs treatment at 1mg/kg showed minimal arthritic score and mild degenerative changes which was relatively comparable to HP at 25mg/kg revealed by radiographic images. Histopathological analysis indicated comparatively lesser influx of inflammatory cells and diminished granulomatous inflammation in ankle joints tissues in the presence of HP loaded GA-AgNPs. TLRs expressions were also reduced by ~80% in spleen of arthritic rat.
Conclusion: HP is naturally occurring flavonoid with good anti-arthritic potentials, but its lower aqueous solubility and instability reduce its clinical efficacy. The results conclude that HP loaded GA stabilized green AgNPs showed higher release and potency at lower dose than that of pure compound with down regulating TLRs, hence it can be a promising future therapeutic agent in restoring the progression of RA.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-13	Gynecological pathology	Saglam, Ozlen Moffitt Cancer Center Dept. of Anatomic Pathology Tampa, FL USA	Oral Presentation	Zhou, Jun-Min Welsh, Eric Wang, Xuefeng Conejo-Garcia, Jose
Abstract No. 005				
Date & Time 16.10.2018 13:30-14:20				

ABSTRACT TITLE:
PD-L1 expression in cervical squamous cell carcinoma

Objective: Programmed cell death-1 and programmed cell death ligand-1 (PD-1/PD-L1) blockage has become an important treatment modality after approval of pembrolizumab and nivolumab by Food Drug Administration in advanced cancers. Patients with metastatic and recurrent Cervical Squamous Cell Carcinoma (C-SCC) have limited treatment options and immunotherapy is emphasized for only high-risk patients. Recent studies also confirmed suppressive role of TGF-β signaling pathway in adaptive anti-tumor immunity.
Methods: We studied PD-L1 and TGF-β1 expression by immunochemistry on a tissue microarray (TMA) composed of 45 C-SCC and 48 benign control tissue. We also explored archival Total Cancer Care (TCC) data for mRNA expression levels (Affymetrix HuRSTA-2a520709 custom chip) of the genes involved in PD-L1 and TGF- β1 pathways (n=18). Immunohistochemical results were scored as positive/negative applying 10% expression as cut-off rate for both markers. PD-L1 levels were evaluated in neoplastic tissue and tumor infiltrating inflammatory cells separately. The expression levels were compared by chi-square and spearman correlation tests.
Results: In TMA samples PD-L1 expression was higher in neoplastic tissue compared to benign epithelium. Poorly differentiated tumor samples expressed PD-L1 in significantly higher levels (p=0.043). In TCC data PD-L1 and PD-1 expression was positively correlated with each other and STAT1. In addition there was positive PD-L1 correlation with PDCD1, CASP7 and negative with IGFBP2 and SMAD2.
TGF- β1 gene expression levels were positively correlated with IGFBP2, PTEN and negatively correlated with APC and SMAD2. In univariate analyses patients with higher expression levels of MLH1, CDH1 and IL12B had significantly better overall survival (OS) rates compared to patients with lower expression levels. Higher ITGA2 expression was correlated with worse OS.
Conclusion: PD-1/PD-L1 blockage is a potential treatment modality for poorly differentiated C-SCC. PD-L1 can be upregulated by JAK/STAT pathway in C-SCC as previously reported in non-small cell lung cancer. Our results should be validated in a larger cohort.
Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-16	Hepatopathology and Biliary System	Vaiphei, Kim Postgraduate Institute of Medical Histopathology Chandigarh India	Oral Presentation	Kumar, Rajesh
Abstract No. 005				
Date & Time 15.10.2018 14:00-14:50				

ABSTRACT TITLE:

Liver tissue: The ultimate sample to document infection by an oncogenic hepatitis B virus in serology negative individual in a developing country

ABSTRACT TEXT

Objective: to document and characterize HBV DNA in liver tissue in occult HBV infection with follow-up serology study

Methods: Patients included in the study were those who were HBV serology negative and underwent major abdominal surgery for conditions that were unrelated to primary liver disease. All had normal liver transaminases. Tissue available were wedge biopsy of liver, segmental resection for metastatic tumor and liver along the gall bladder bed. Due to the presence of morphological evidence of chronic hepatitis in liver histology, the selected cases were documented to show on immunohistochemistry (IHC) staining positivity for HBV surface and or core antigens. Paraffin sections of the liver were used for nested PCR for HBV DNA.

Results: 100 cases were enrolled, M:F=1:1, median age of 42 years, 96 biopsies showed strong HBcAg cytoplasmic +ive with nuclear in 20, 44 biopsies had HBsAg positive, 94 PCR positive. Half of the patients were followed-up for 6 to 12 months, none had developed hepatitis, however 2 patients became positive for anti HBc IgG.

Conclusion: occult hepatitis B is a common clinically underdiagnosed condition, warranting a high load of HBV infection amongst serology negative population in a middle income group developing country. Liver tissue proves to be an ideal sample to document HBV infection.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-II	Molecular pathology II	Zahid, Maria Dow University of Health Science Dept. of Molecular Pathology Karachi Pakistan	Oral Presentation	Khan, Saeed Qureshi, Asif
Abstract No. 006				
Date & Time 16.10.2018 13:30-14:40				

ABSTRACT TITLE:

Drug Resistance Mutations in HIV-1-Infected Drug-Naive Patients of Karachi, Pakistan

ABSTRACT TEXT

Objective: From last two decades Pakistan has witnessed a change from low prevalence to a country with concentrated HIV epidemic in high risk groups. This change in epidemic is due to the general population is engaging in high-risk practices. These high-risk practices such as drug abuse, promiscuity among heterosexuals and homosexuals are now common in Pakistan. With this, prescribed antiretroviral drug are also causing resistance and theses resistant strains are now been circulating. Previously random mutations such as major and minor are continuously accruing in HIV genome due to high mutation rate. Previous researches from Pakistan showed a very high sensitive pattern towards antiretroviral drugs. In this study we determined drug resistance of antiretroviral drug among HIV infected patients in Pakistan. In this study, we have analyzed mutation in pol gene of HIV, to investigate HIV drug resistance in Karachi, Pakistan using Bioinformatics tools.

Methods: Total 50 drug naive patients were recruited in this study. Whole blood samples were collected from all patients. After DNA extraction, all positive samples were subjected to nested PCR using specific primers. The amplified products were sequenced. The mutations in HIV sequences were analyzed, and pattern of drug résistance was determined through the online available HIV drug resistance database Stanford University. Shannon entropy analysis was performed to determine variability in amino acid sequence of HIV-1 RT region in drug naive patients.

Results: Our results were analysed for NRTI and NNRT drugs. Drug resistance analyses showed that patients were showing high level resistance to prescribed drugs. Patients were more (62.50%) resistant to NNRTI drugs and 80% and 60% of the mutation at E138A and K103N respectively against NNRTI drugs. 75% of the sequences showed resistance mutation at M184V against NRTI drugs. Shannon entropy analysis revealed that certain regions of RT exhibited high sequence variability, especially at Amino Acids positions p.119, p.130, p.157, p.164.

Conclusion: According to our results majority of the drug naive patients have shown major or minor mutations resulting in a drug resistant virus in our community. Our results are showing High level to Potential low level resistance which indicates that HIV drug resistance is on rise on our part of the world. These results are alarming on contrary to the previous reported data in which hardly any drug resistance has been reported from this area.

Policy of full disclosure: /

SESSION No.	SESSION TITLE	AUTHOR	ABSTRACT TYPE	Co-Author (s)
FOP-10-II	Molecular pathology II	Capelozzi Vera Brazil	Oral Presentation	
Abstract No. 0007				
Date & Time 16.10.2018 13:30-14:40				

ABSRACT TITLE:

Complementary utility of next-generation sequencing and multiplex immunofluorescence immune signature to predict metastases and target therapy in non-small cell lung carcinomas

ABSTRACT TEXT

The XXXII Congress of the International Academy of Pathology

The 30th Congress of the Arab Division of IAP

The XXXII Congress of the International Academy of Pathology

Welcome Notes

By the President of the Congress
Past President,
Arab Division of the International Academy of Pathology

On behalf of the Arab Division of the International Academy of Pathology (ADIAP) in collaboration with the Jordanian Society of Pathology (JSP), I would like to welcome you to the XXXII Congress of the International Academy of Pathology (IAP), and the 30th Congress of the Arab Division of IAP, that is hosted at King Hussein Bin Talal Convention Centre – Dead Sea, near Amman-Jordan (14 - 18 October 2018).

This would be an unbeatable chance to update your knowledge on all aspects of diagnostic and molecular pathology, along with getting the chance to visit and enjoy science at the lowest point on Earth, the Dead Sea.

Throughout its relatively short journey of 30 years, the Arab Division has become an active member in pathology education and continuing professional development both for practicing and trainee pathologists in the Arab world and the region.

By thriving to create a safe environment for optimal patient care, the congress will highlight recent updates in the various pathology disciplines.

This will be achieved by mixing the traditional pathology approaches in the various pathology systems along with the more modern approaches including molecular pathology, genomics and bioinformatics as well as digital pathology and tele pathology.

In addition, teaching and education in pathology and quality in surgical pathology will have an ample share and representation.

The scientific committee has worked hard to deliver a rich program that includes keynote lectures and more than 188 sessions which will integrate presentations by eminent international experts from all around the world.

Jordan remains one of the most politically and economically stable countries in the region and is a safe destination with a strategic location in the middle of the globe. It is very well connected internationally with easy accessibility and with no visa limitations. We are pleased to welcome you in Jordan - your presence and participation is make all the difference.

Prof. Ismail I. Matalka, FRCPath