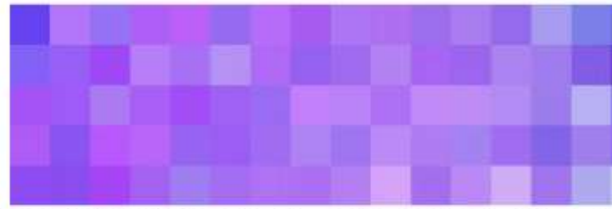




SOCIETAT CATALANA



D'ANATOMIA PATOLÒGICA

# Tumores del Sistema Nervioso Central

Sesión de Residentes

Iban Aldecoa Anzorregui

*Hospital Clínic de Barcelona*

19/12/2013



# Historia Clínica

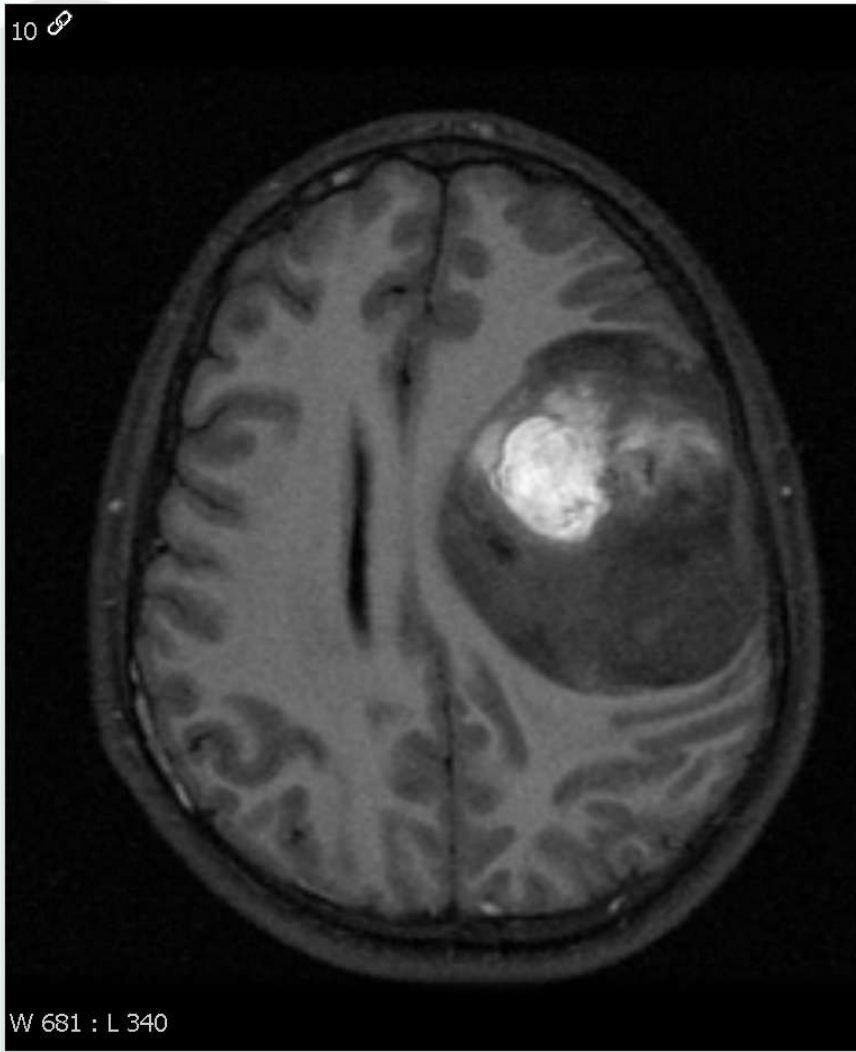
- Varón de 14a / 8m
- Antecedentes: Trastorno de conducta

# Episodio actual

- Otro centro:
  - Cefalea y vómitos de 12h de evolución
  - *TC craneal*: masa en región parietal izquierda
- Al ingreso: focalidad neurológica, diplopia...
- UCI: 2º día: disminución del nivel de consciencia

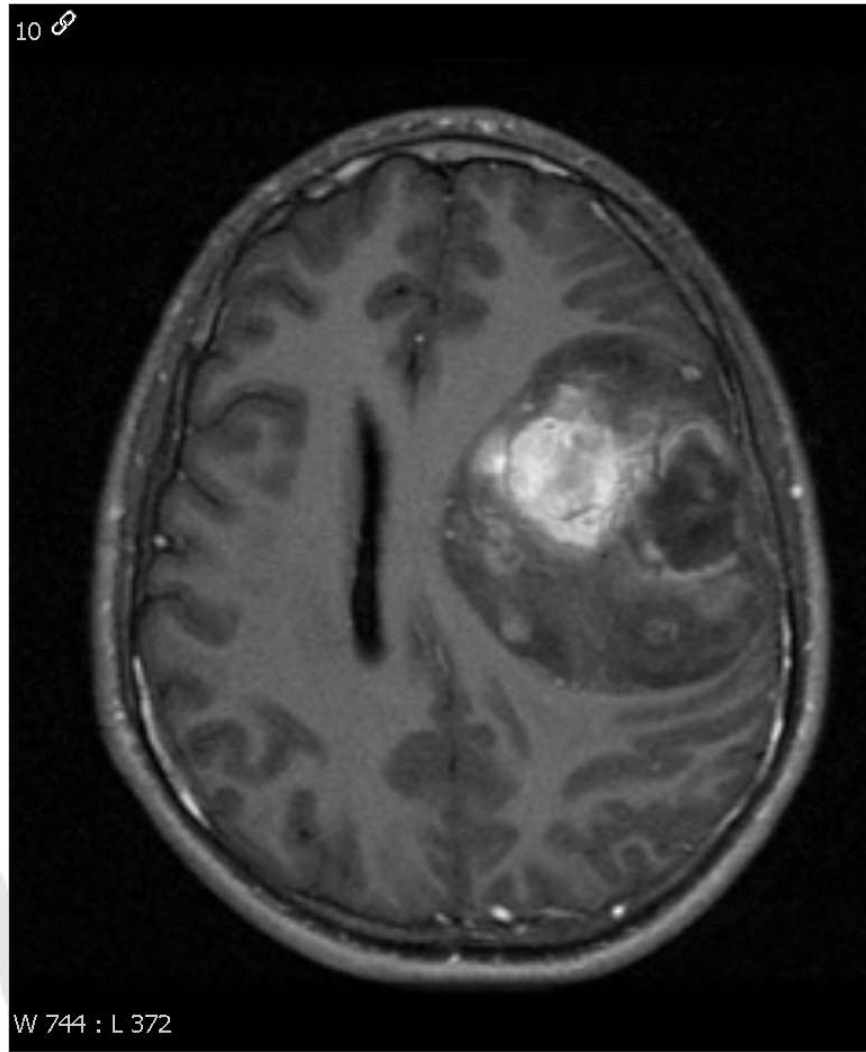


10



Axial FLAIR T1 fatsat

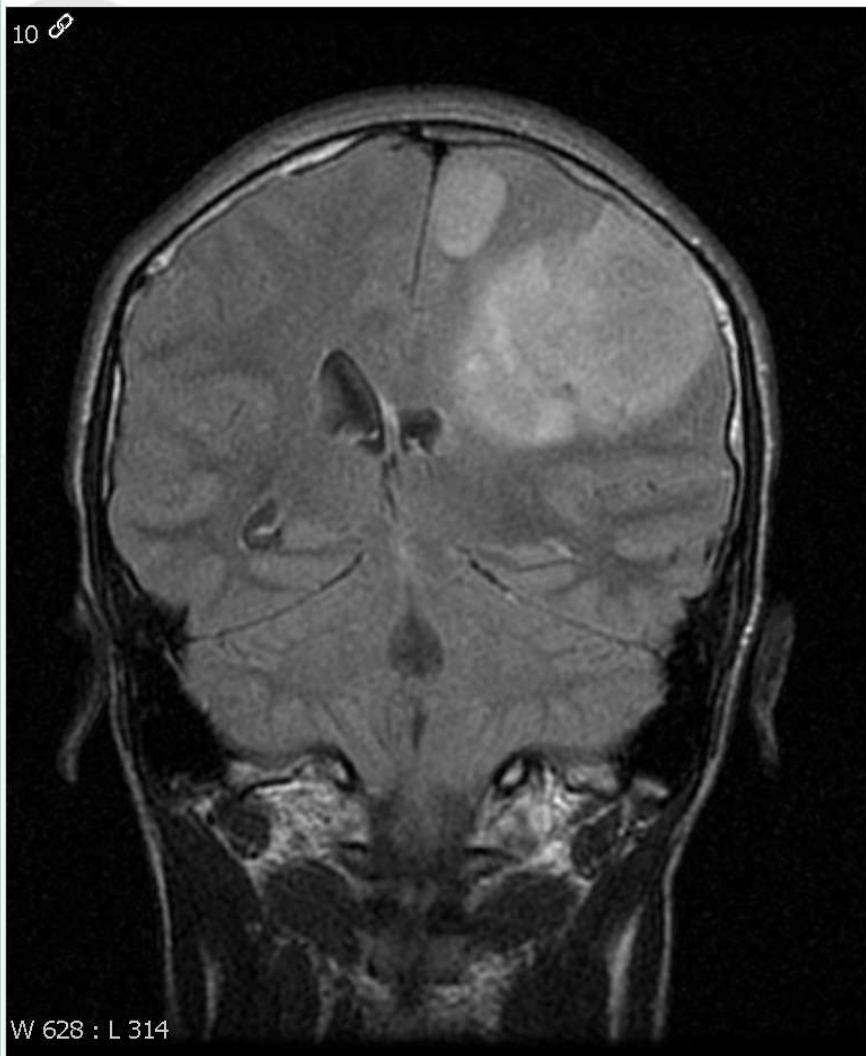
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Axial FLAIR T1 fatsat + C



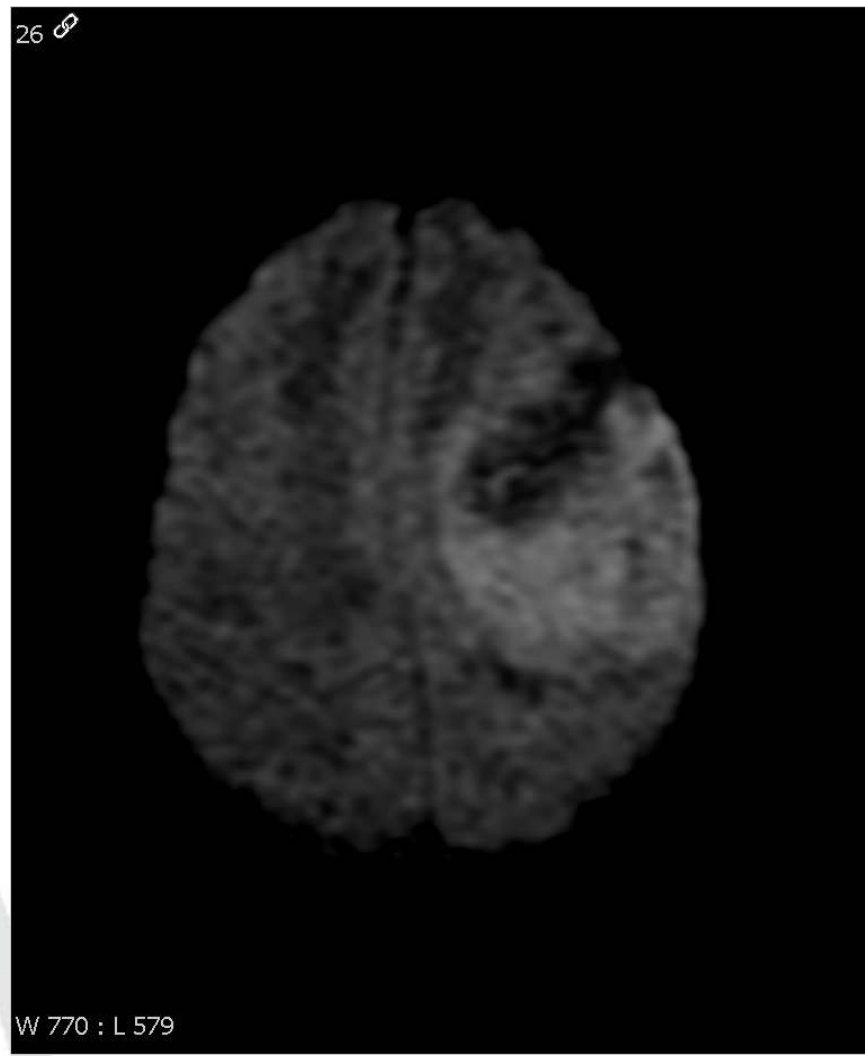
10



W 628 : L 314

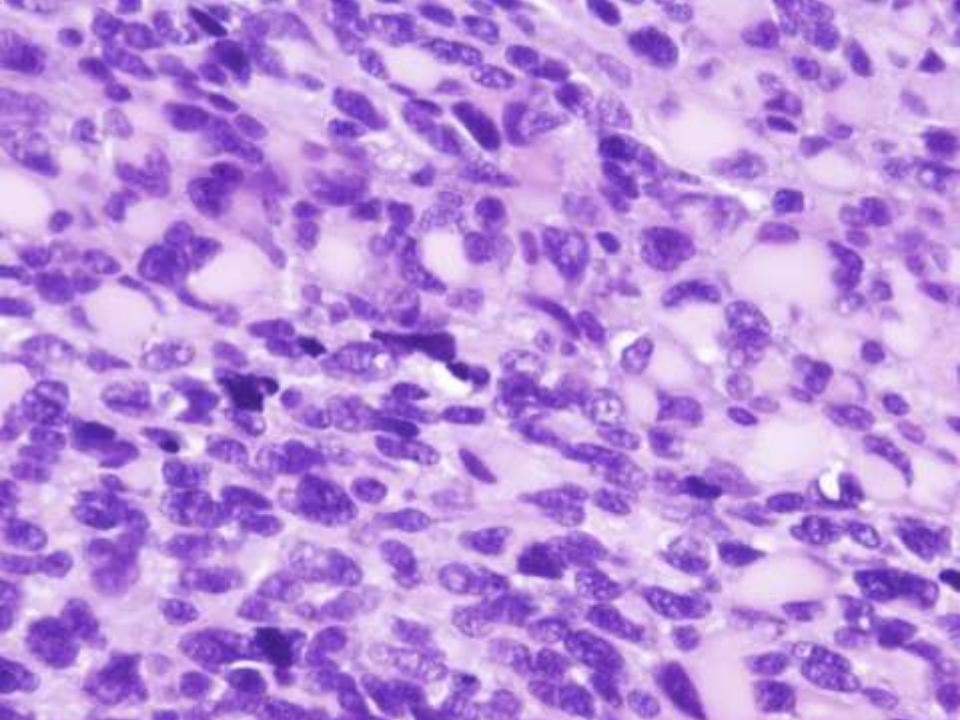
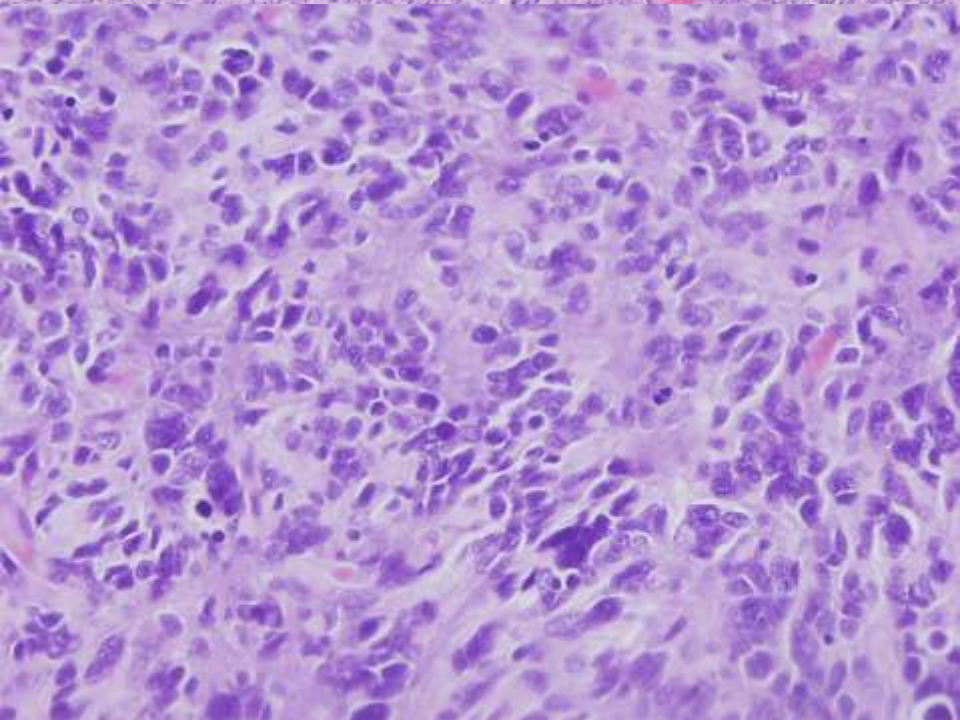
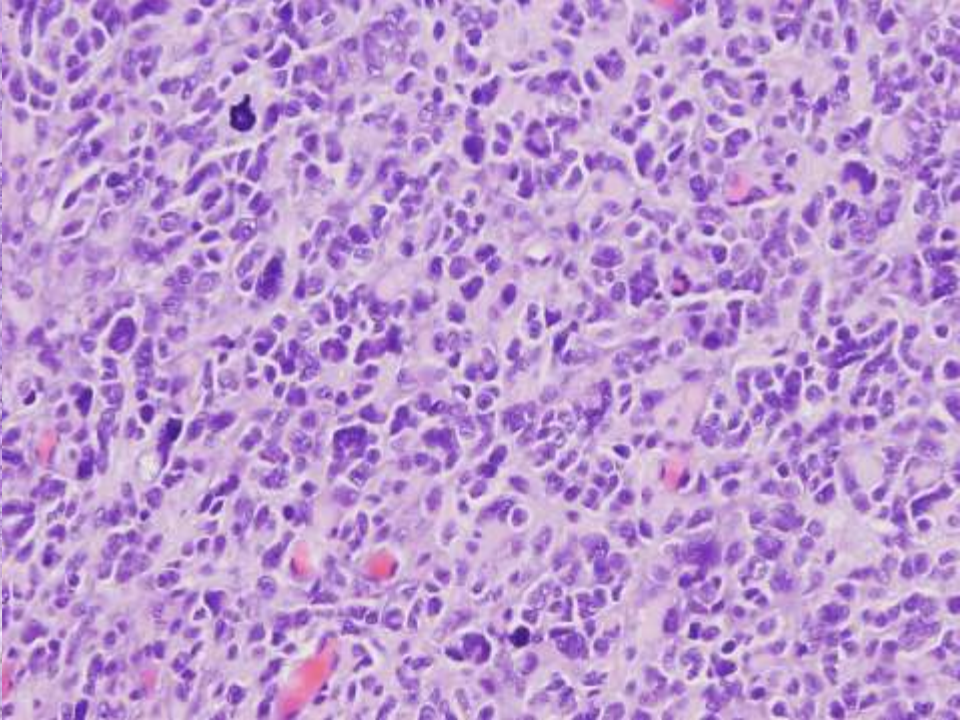
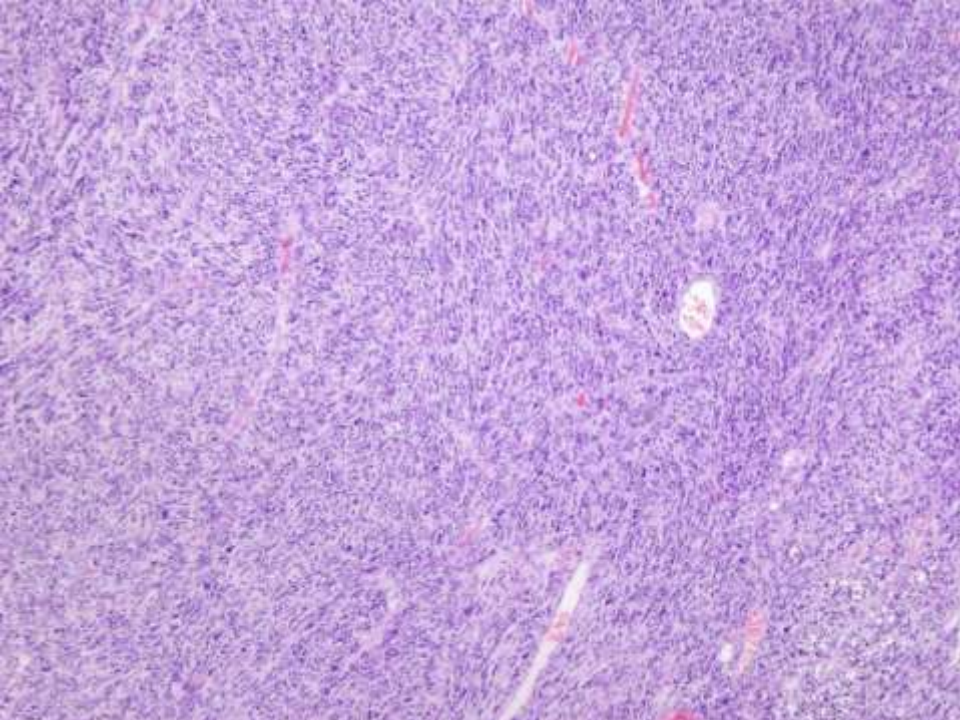
Coronal FLAIR T2

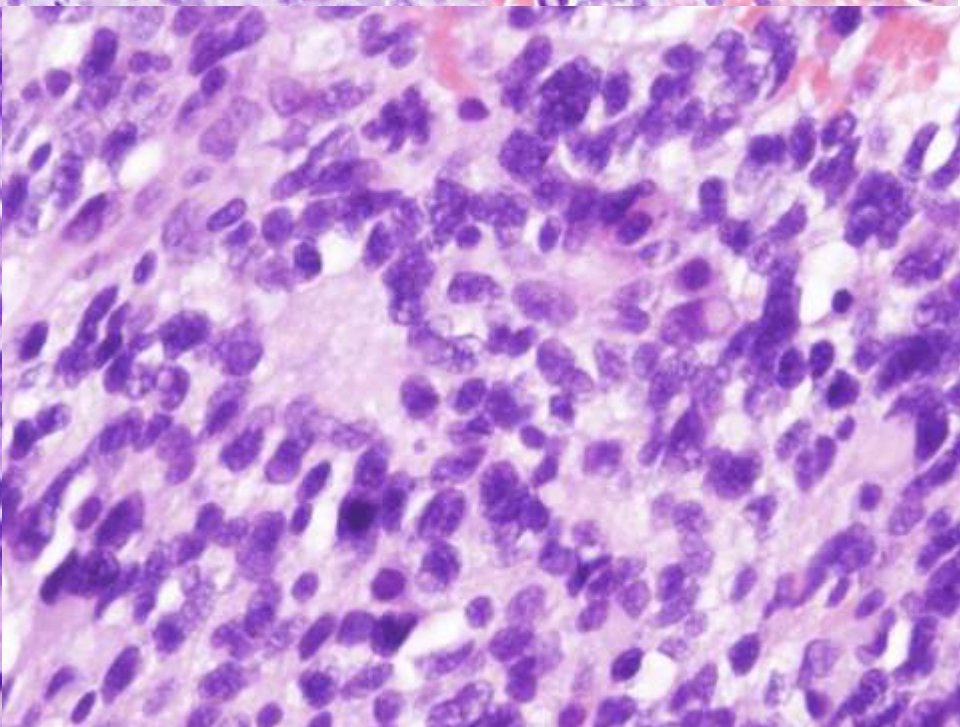
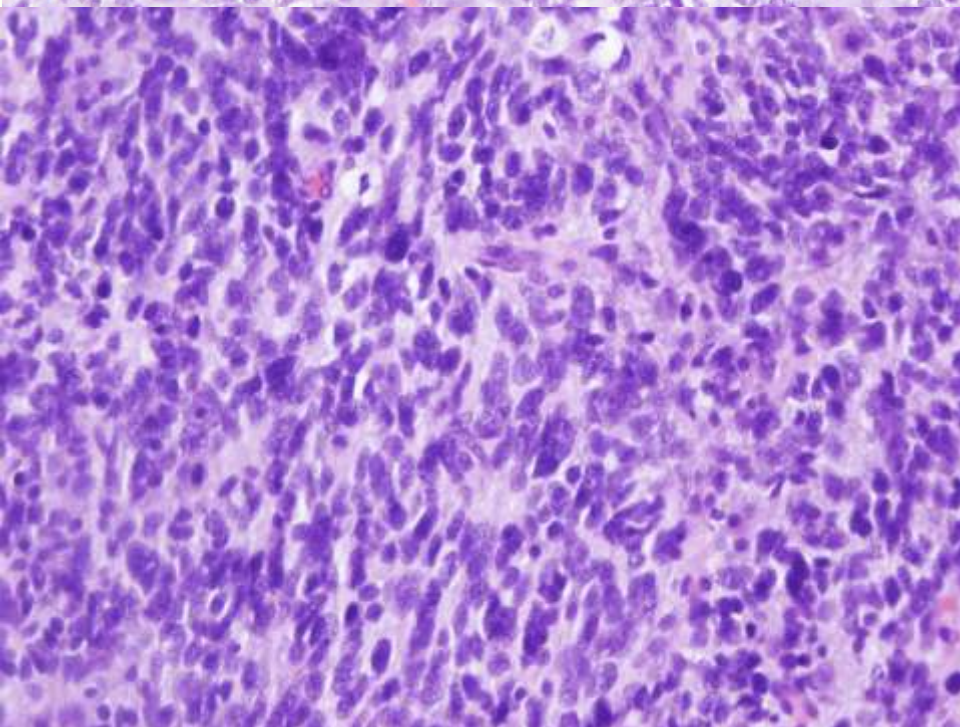
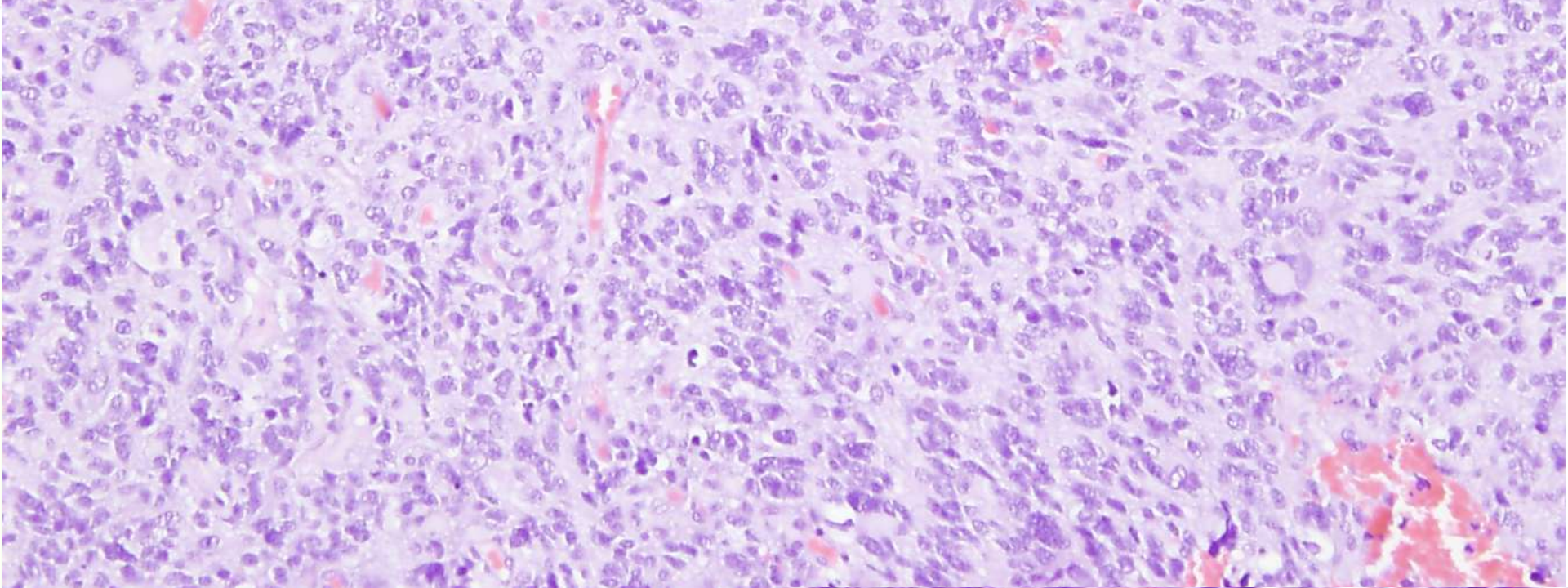
26

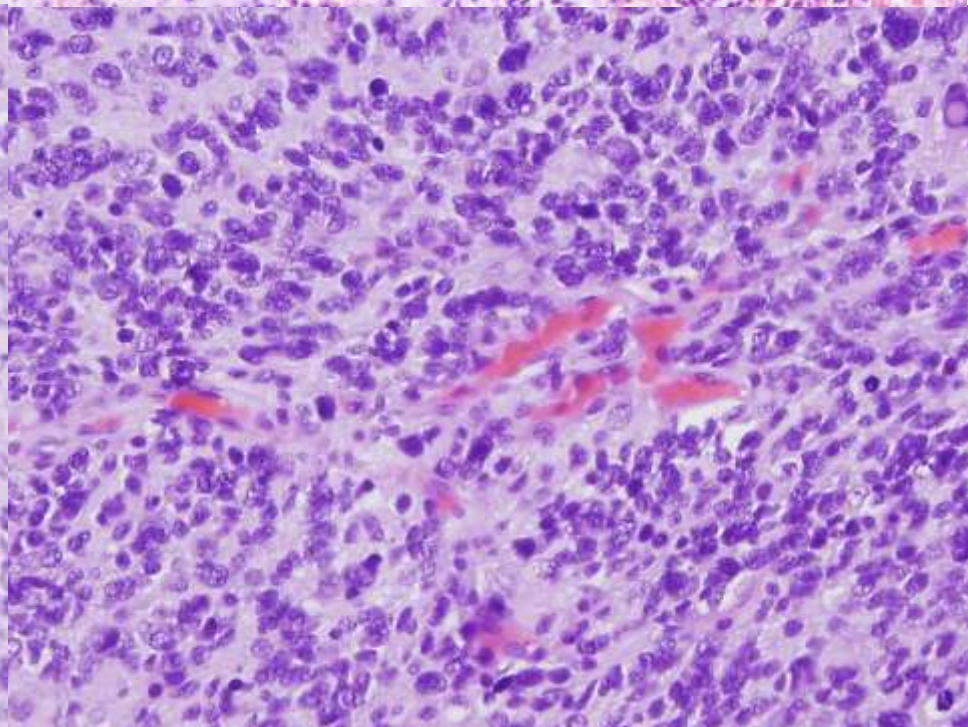
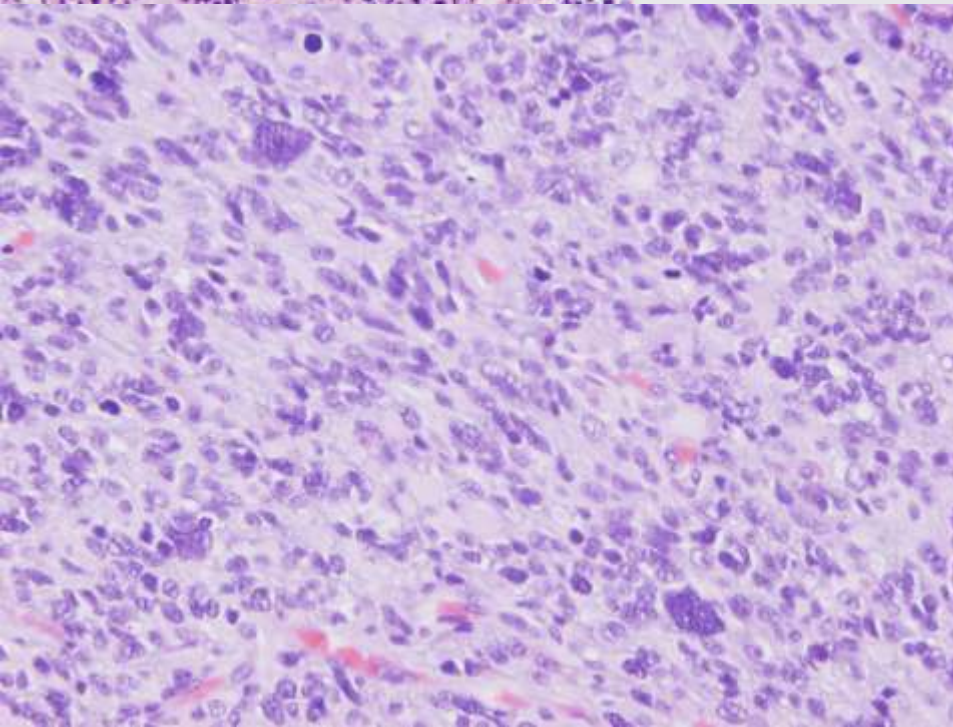
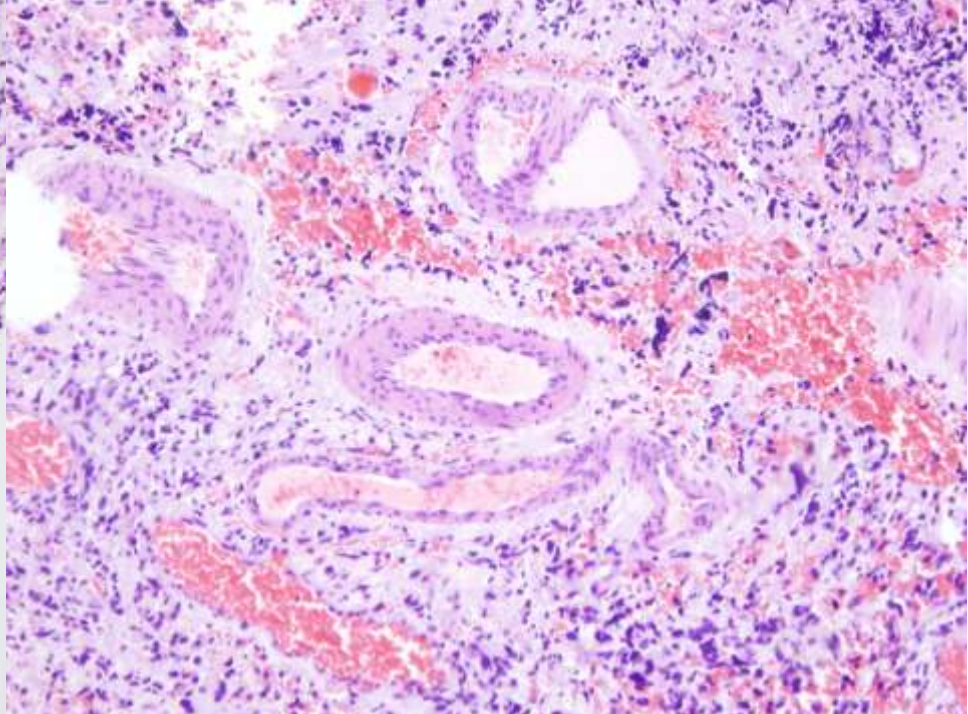
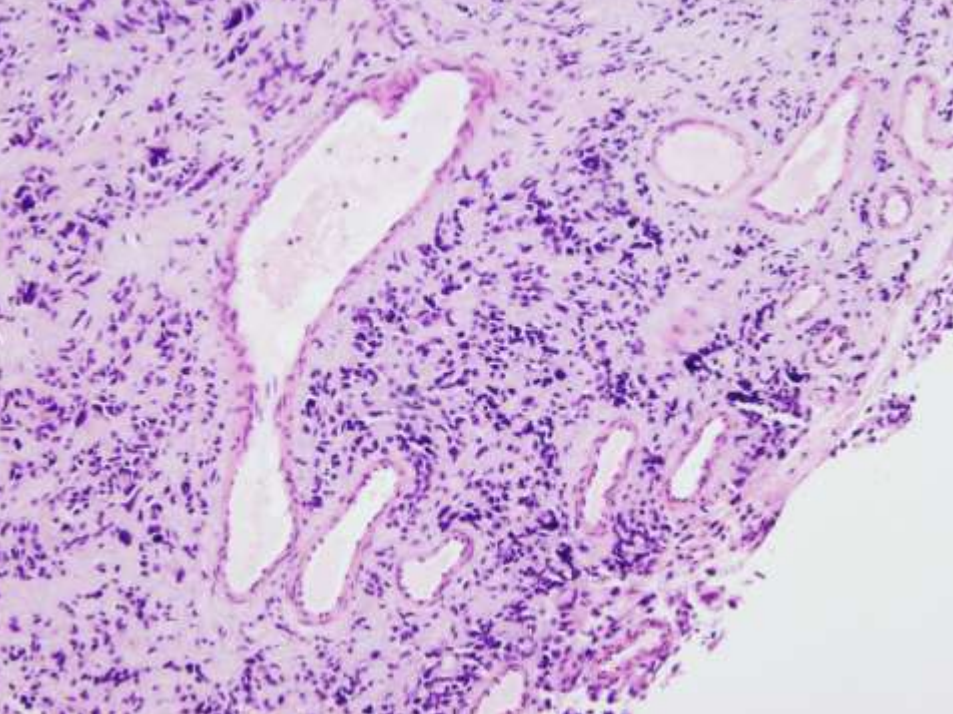


W 770 : L 579

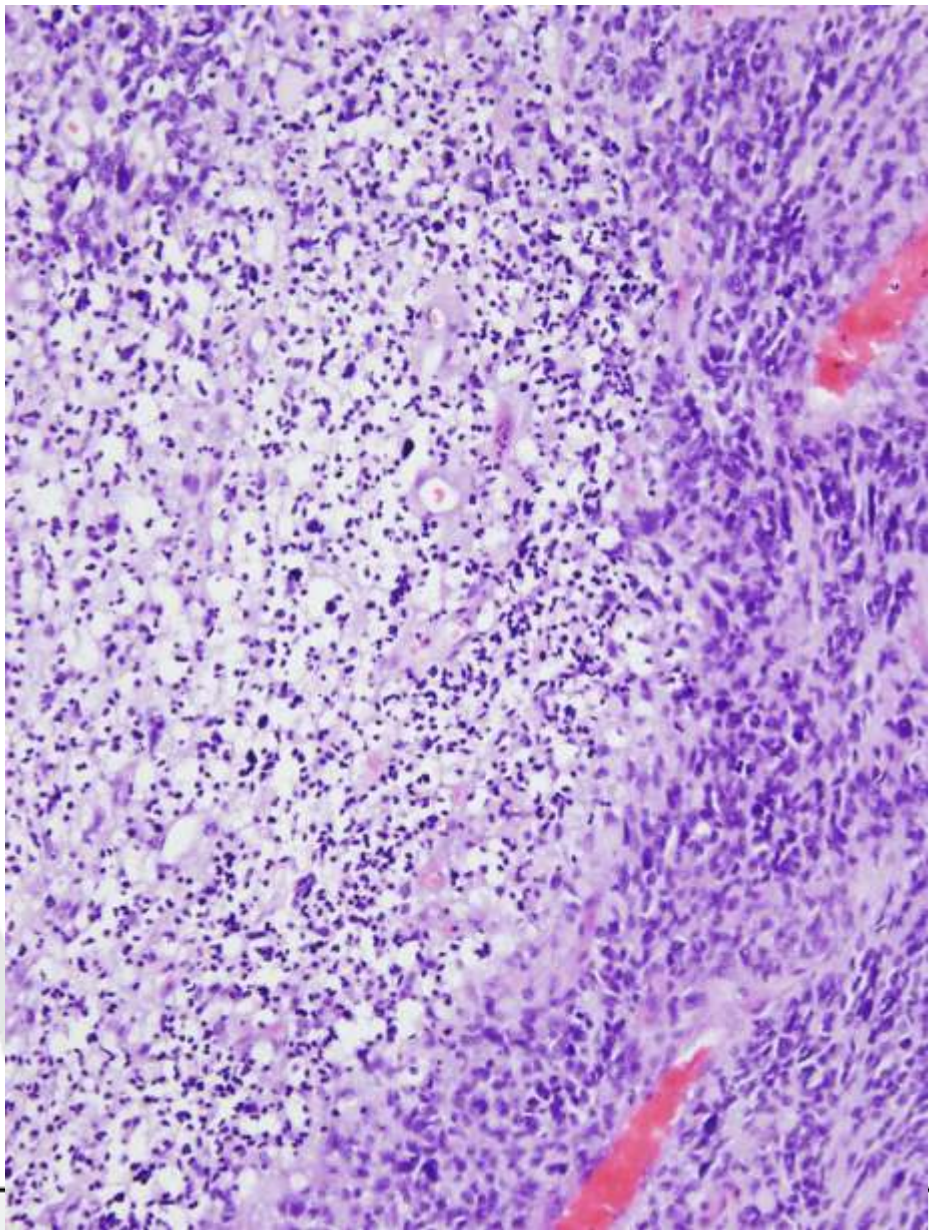
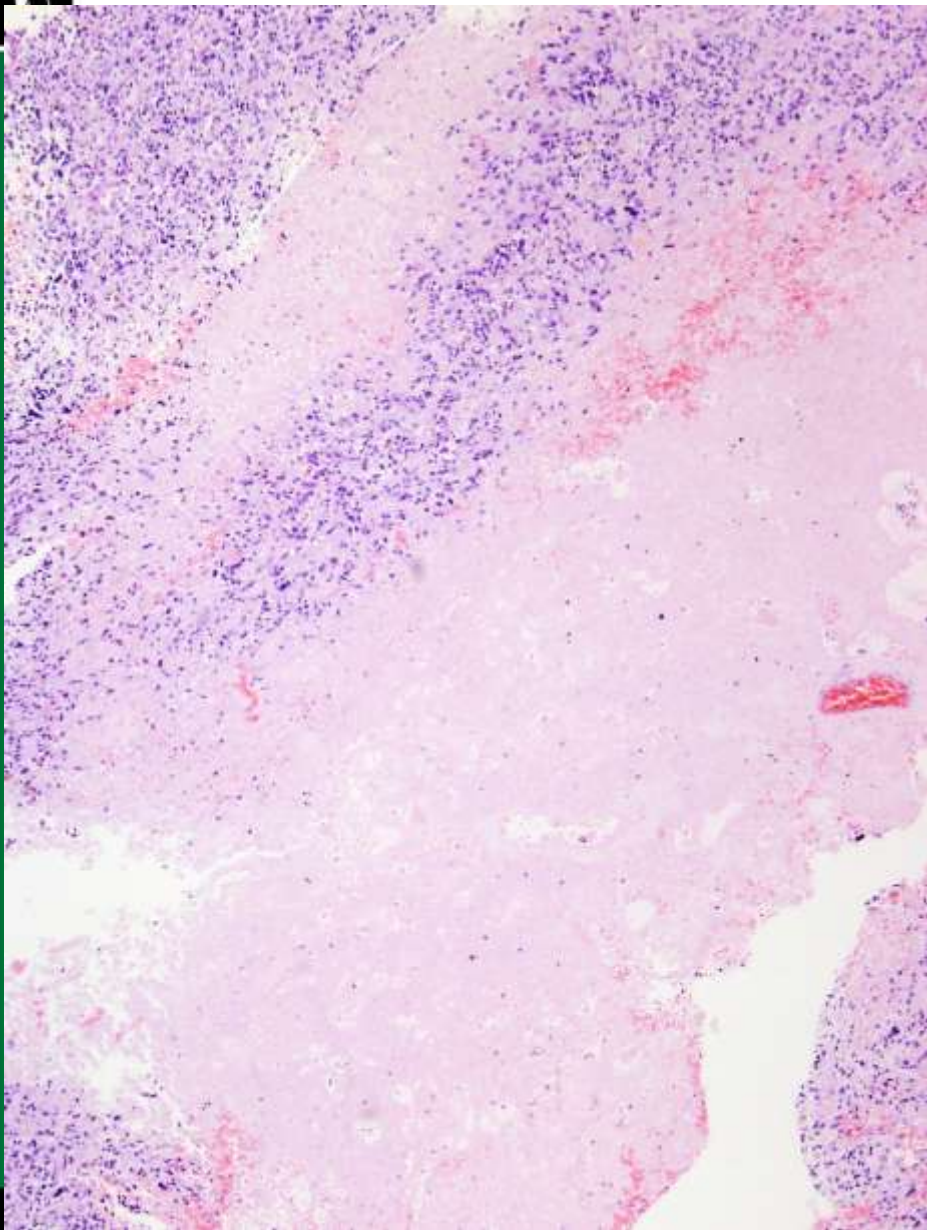
Axial DWI







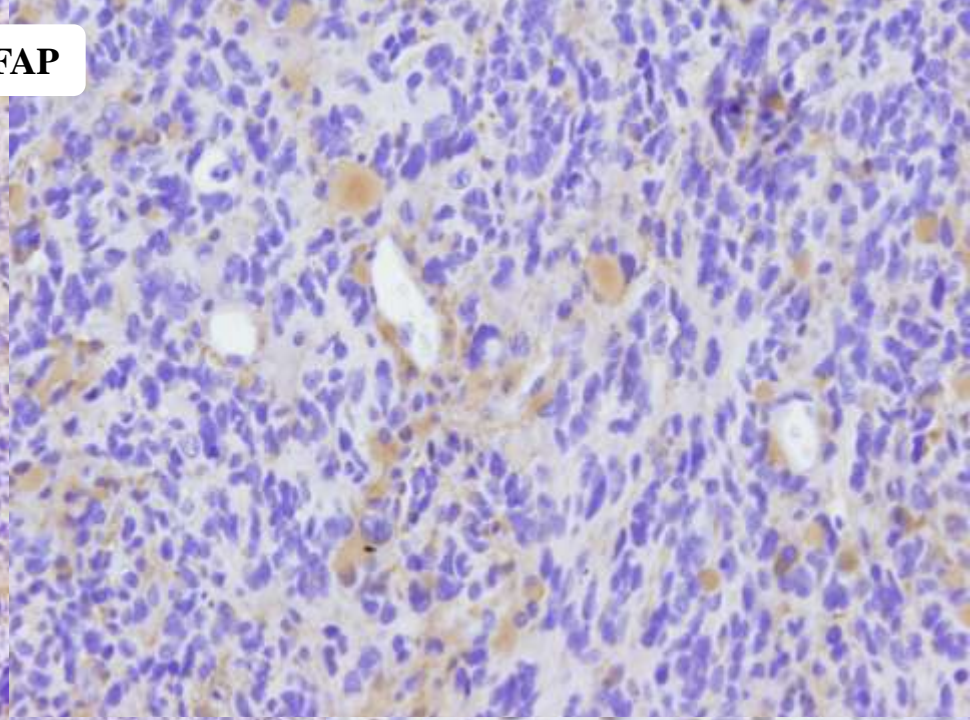
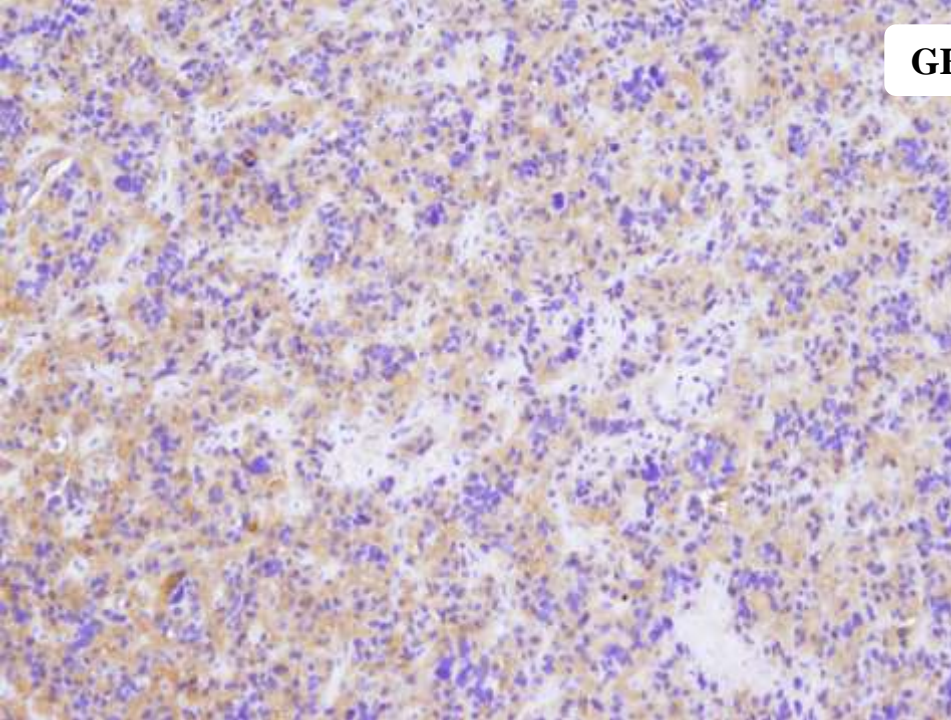




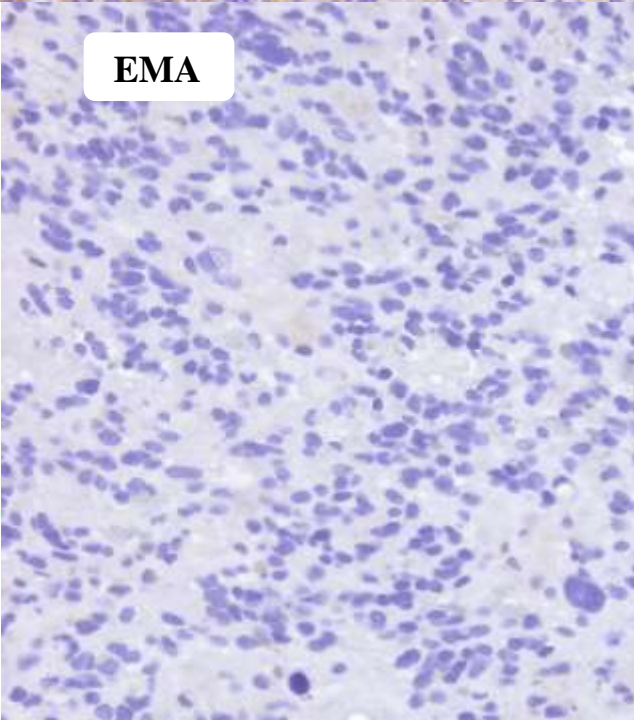
# Diagnóstico diferencial

<u>Niños</u>	%	<u>Adultos</u>	%
<u>Primarios</u>	>99	<u>Primarios</u>	40-70
Astro I-II	45	Astro I-II	20
<b>Astro III-IV</b>	<b>5</b>	<b>Astro III-IV</b>	<b>55</b>
Ependimoma	16	Ependimoma	6
Oligodendroglioma	<1	Oligodendroglioma	10
Meningioma	2	Meningioma	20
<b>MDB/PNETc</b>	<b>21</b>	<b>MDB/PNETc</b>	<b>raro</b>
AT/RT	2	AT/RT	0
<u>Metástasis</u>	raro	<u>Metástasis</u>	30-60

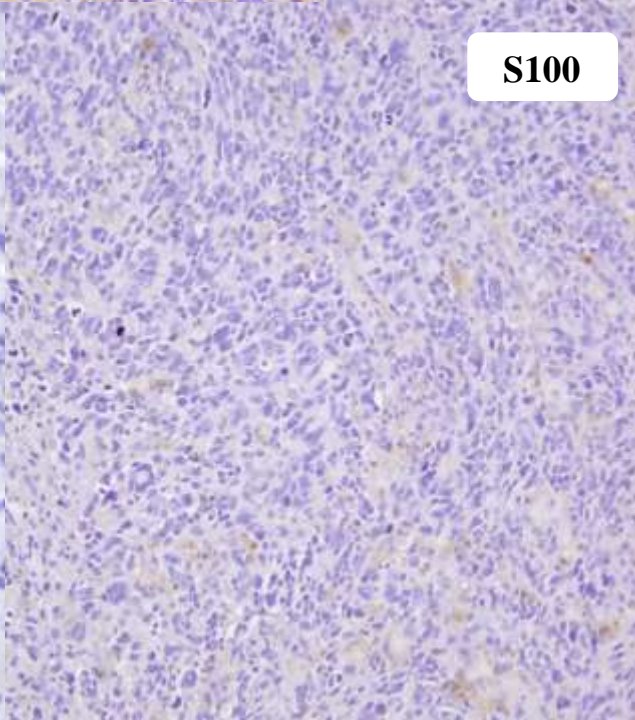
**GFAP**



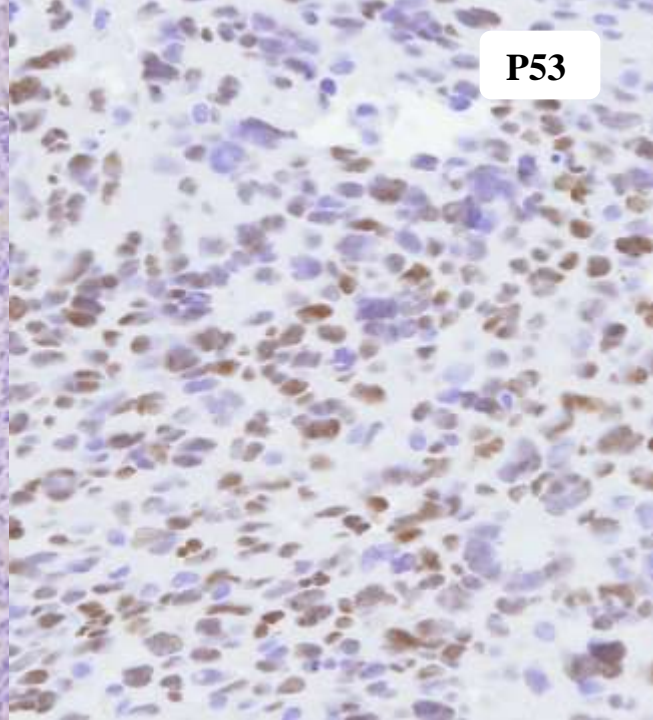
**EMA**



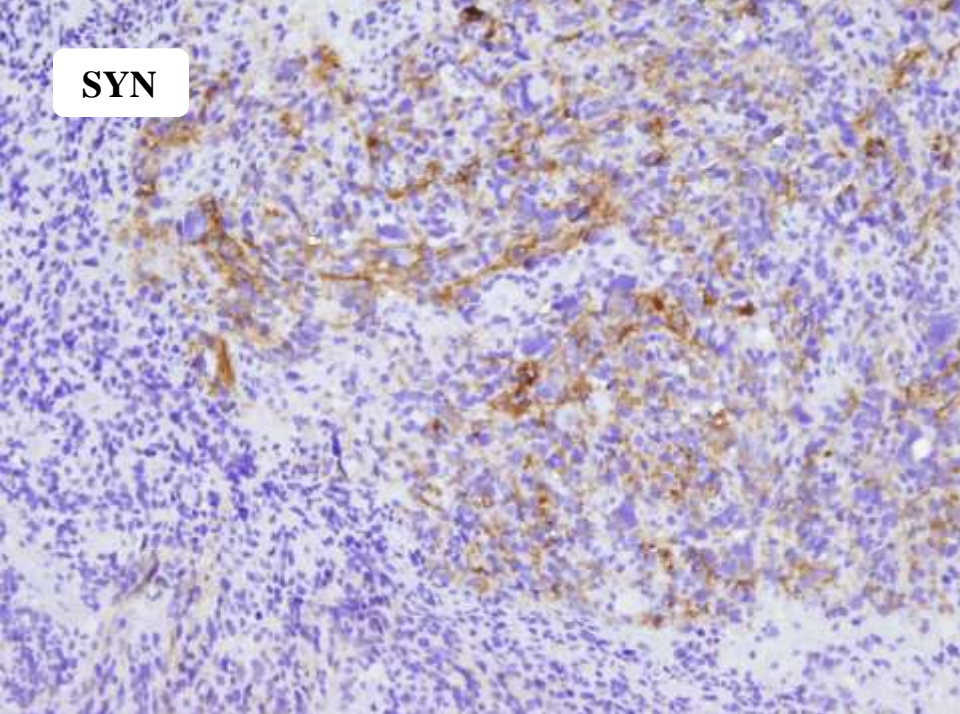
**S100**



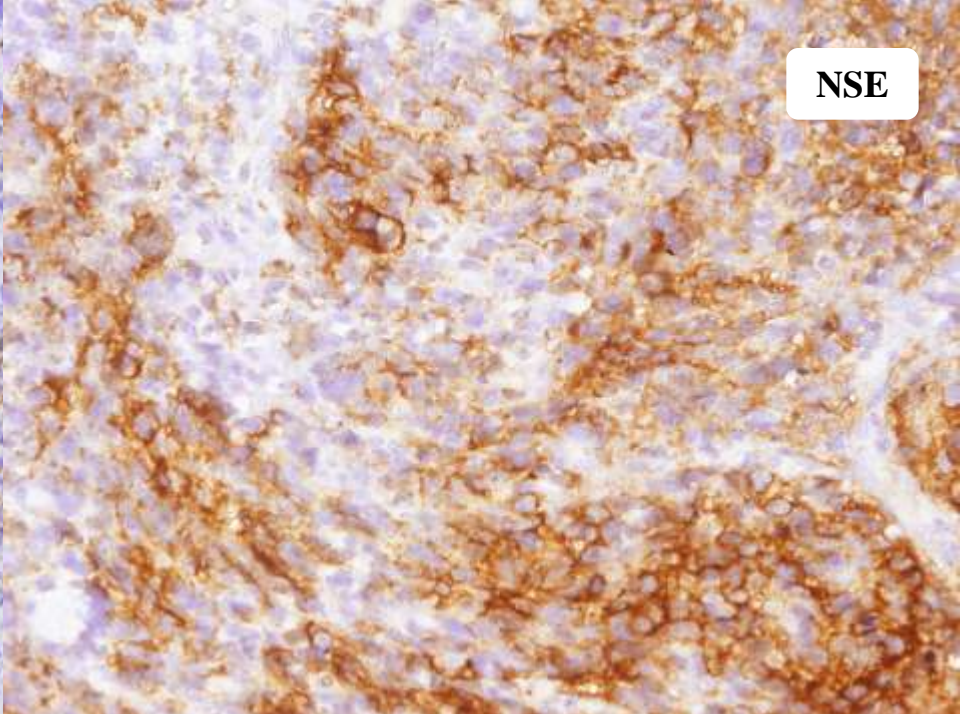
**P53**



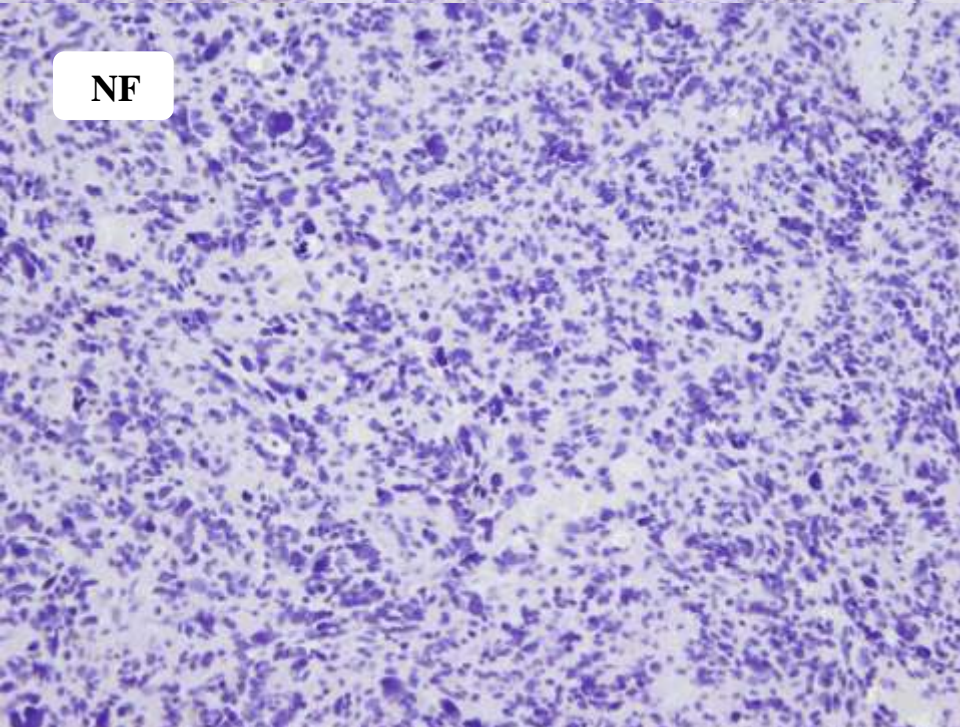
**SYN**



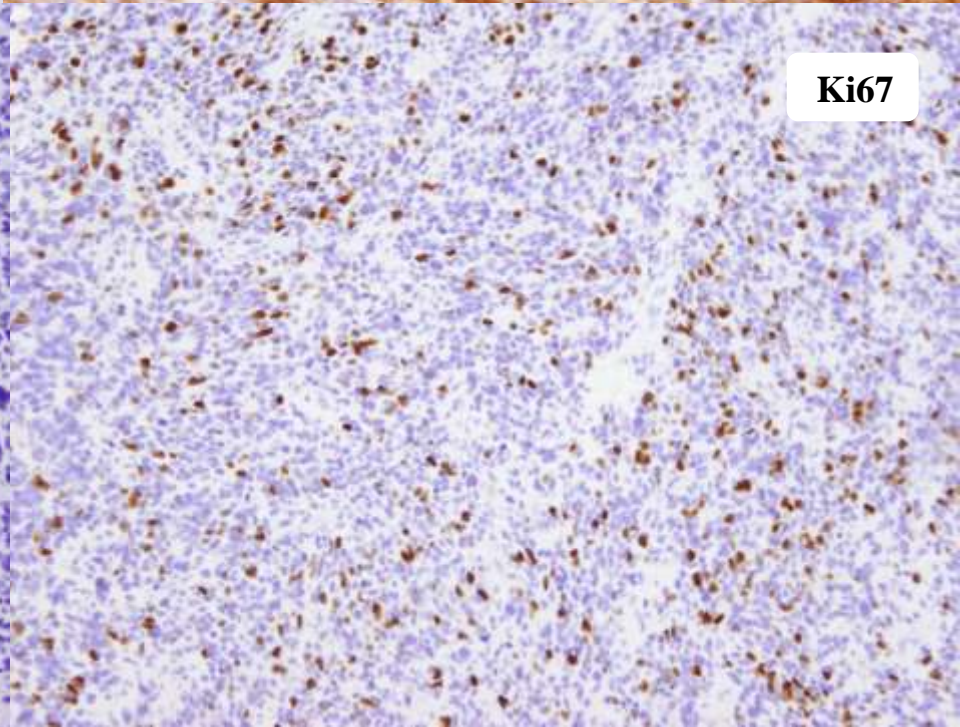
**NSE**

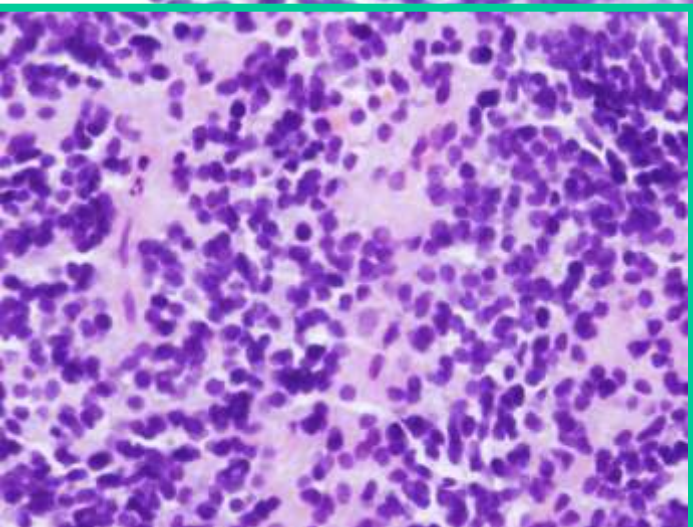
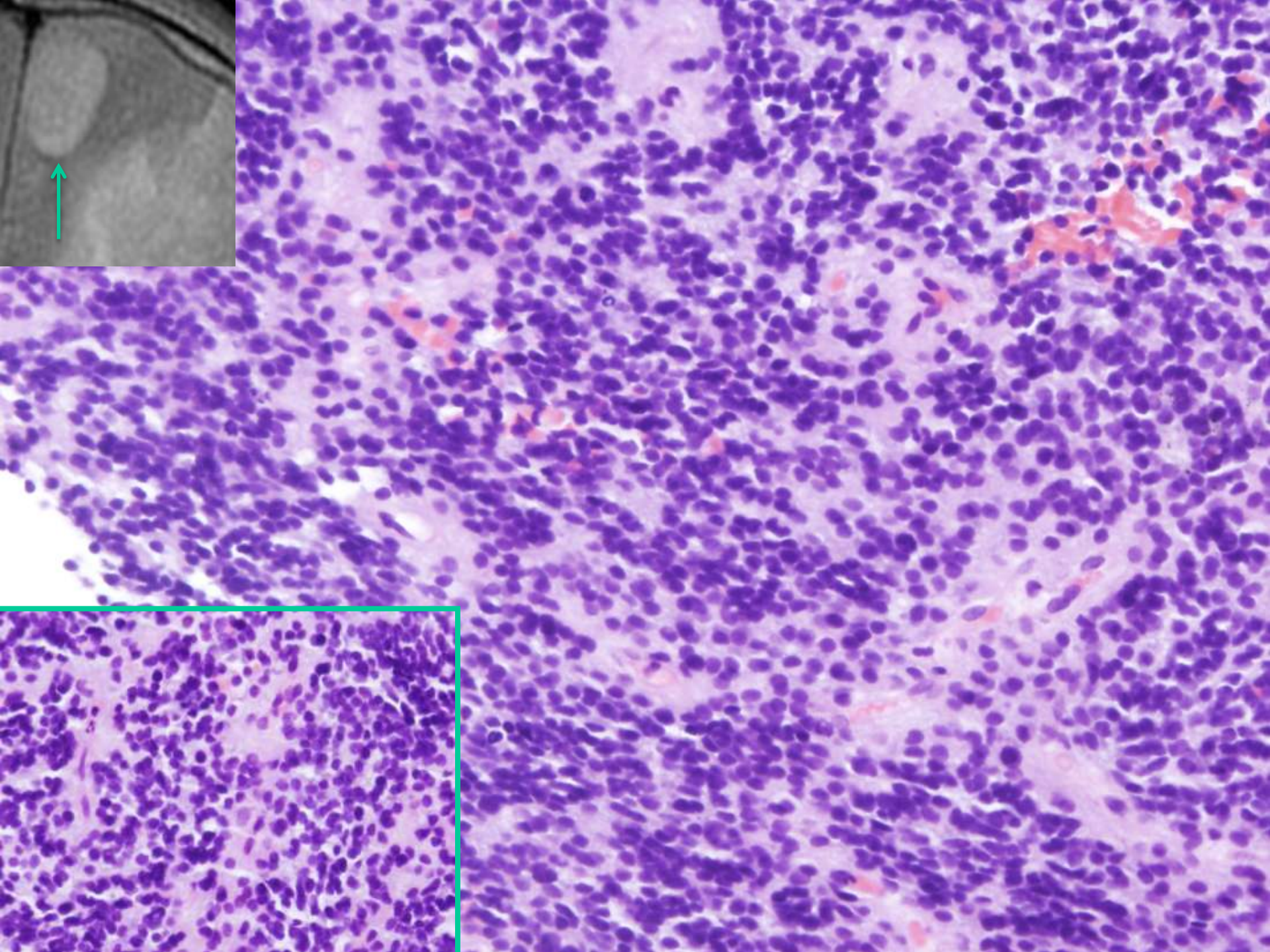
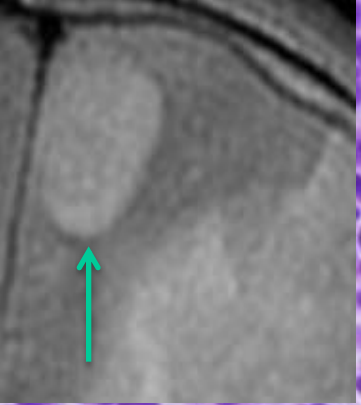


**NF**



**Ki67**





# Diagnóstico

- CNS-PNET
- Glioblastoma Multiforme

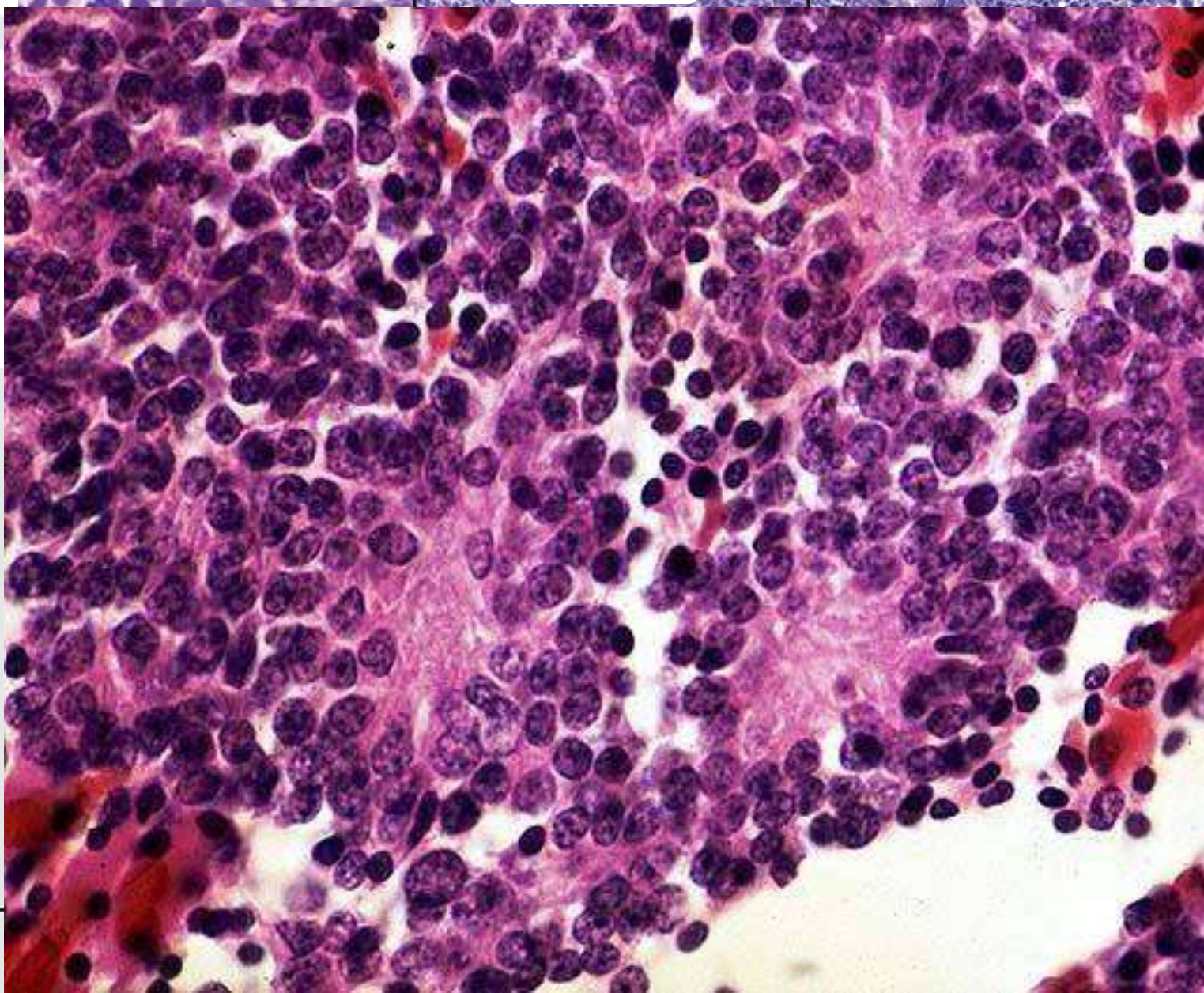
# Tumores embrionarios (WHO, 2007)

## PNET (IV)

Medulloblastoma	9470/3
Desmoplastic/nodular medulloblastoma	9471/3
Medulloblastoma with extensive nodularity	9471/3
Anaplastic medulloblastoma	9474/3
Large cell medulloblastoma	9474/3
CNS primitive neuroectodermal tumour	9473/3
CNS Neuroblastoma	9500/3
CNS Ganglioneuroblastoma	9490/3
Medulloepithelioma	9501/3
Ependymoblastoma	9392/3
Atypical teratoid / rhabdoid tumour	9508/3

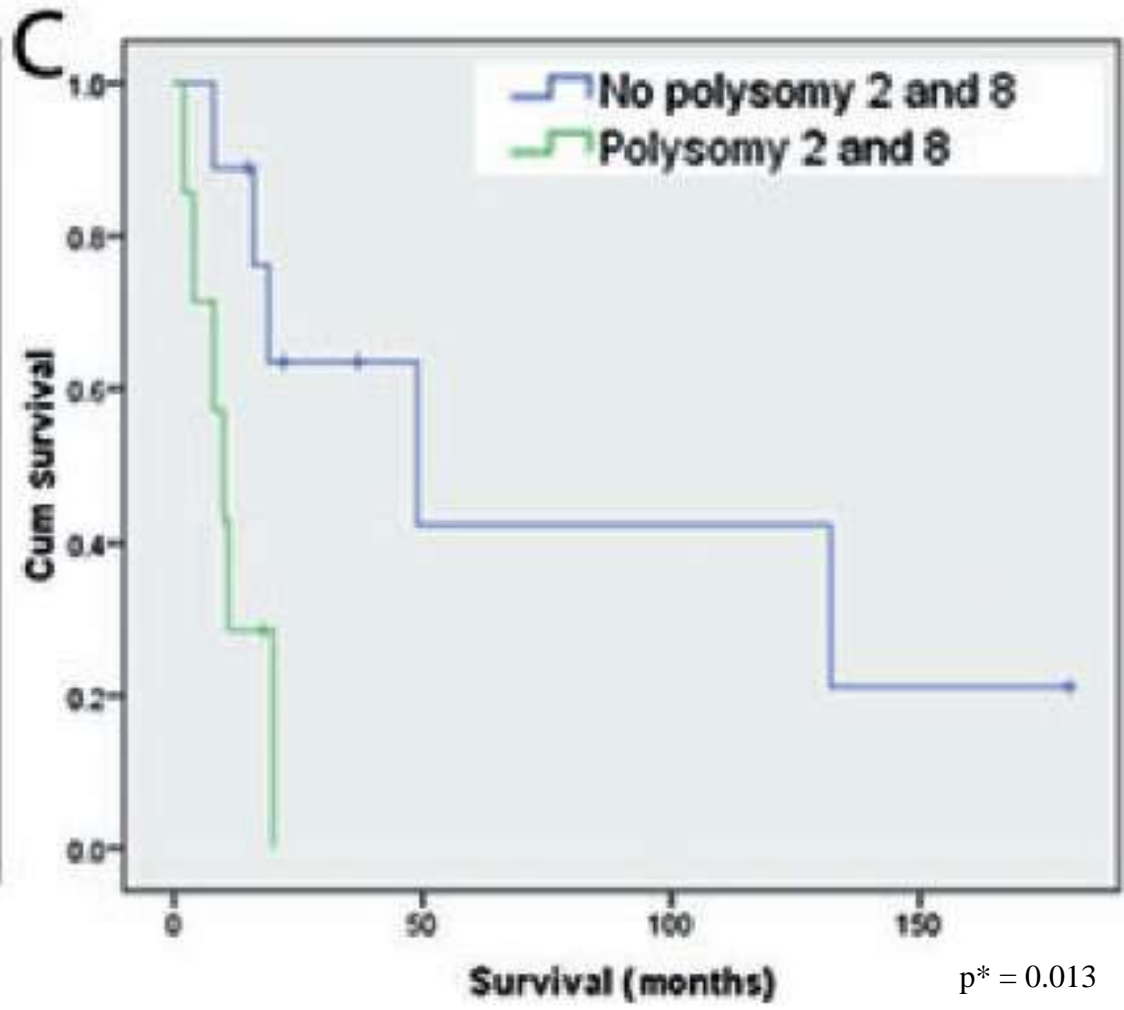


CNS-PNET



Behdad A, Perry A. Central Nervous System Primitive Neuroectodermal Tumors: A Clinicopathologic and Genetic Study of 33 Cases. *Brain Pathology* 20 (2010) 441–450



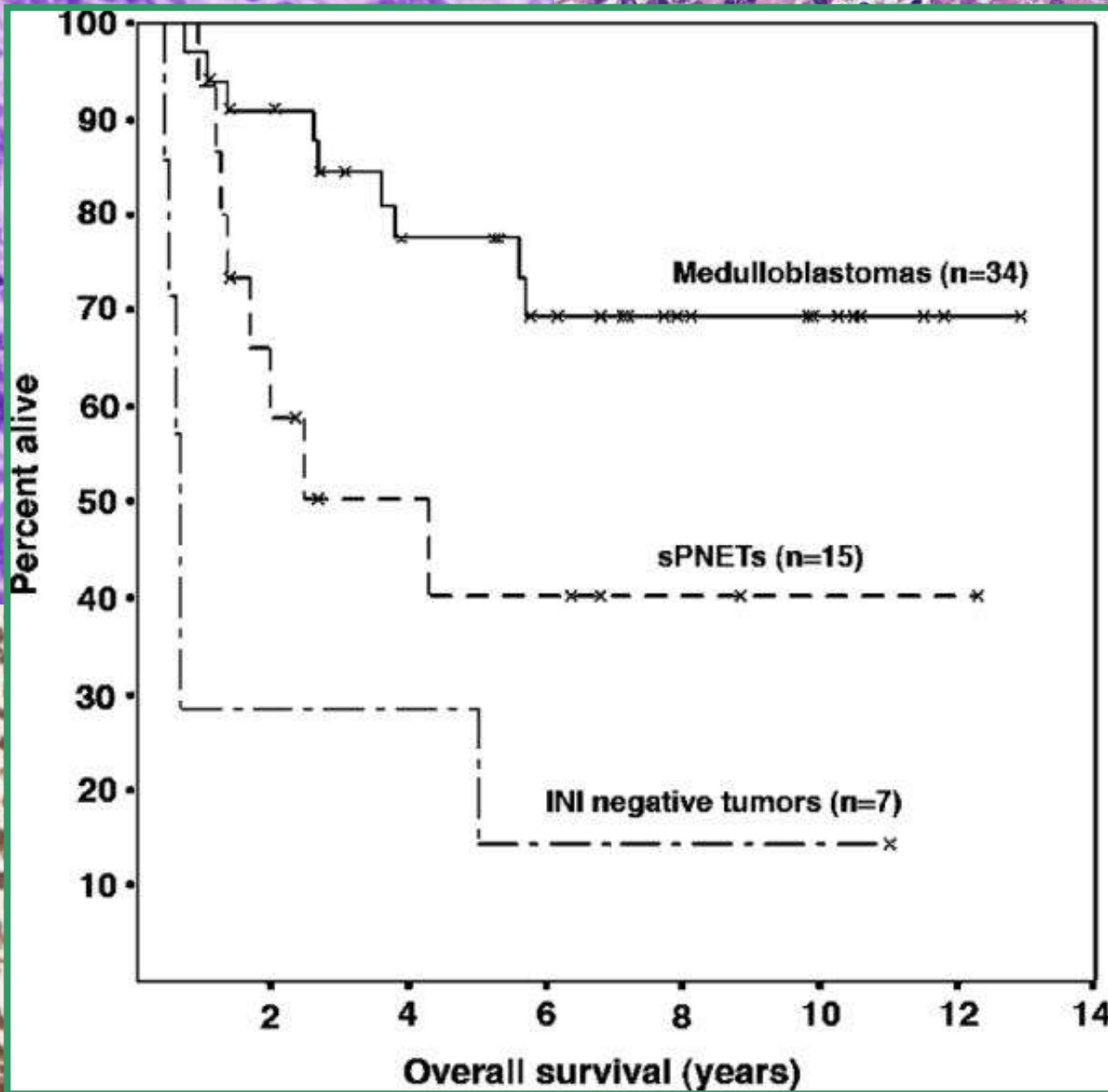


Histologic features/protein
Anaplastic/Large cell features
Homer Wright Rosettes (n)
GFAP (n = 26)
Synaptophysin (n = 23)
Neurofilament (n = 10)
Neu-N (n = 14)
CD99 (n = 11)
CAM 5.2 (n = 9)
Histologic features/protein
Anaplasia/large cell features
Homer Wright rosettes (n)
GFAP (n = 5)
Synaptophysin (n = 6)
Neurofilament (n = 5)

	Pediatric (%)
	41
	9.5
	0
	43
	52
	5
	Adults (%)
	0
	16
	0
	100
	100
	33

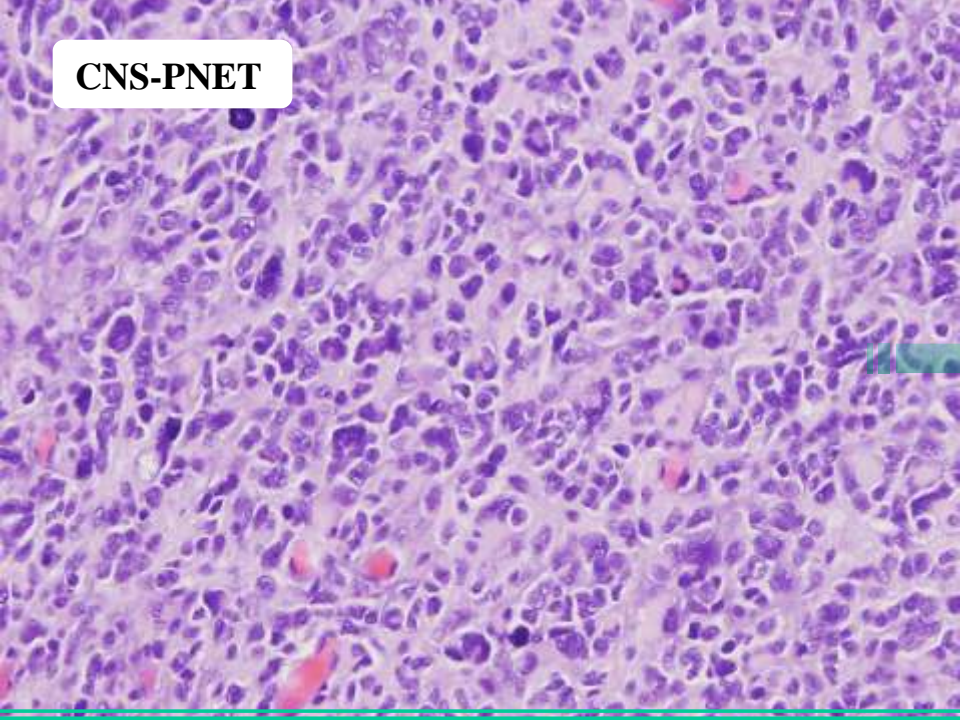
Behdad A, Perry A. Central Nervous System Primitive Neuroectodermal Tumors: A Clinicopathologic and Genetic Study of 33 Cases. Brain Pathology 20 (2010) 441–450

CNS-PNET

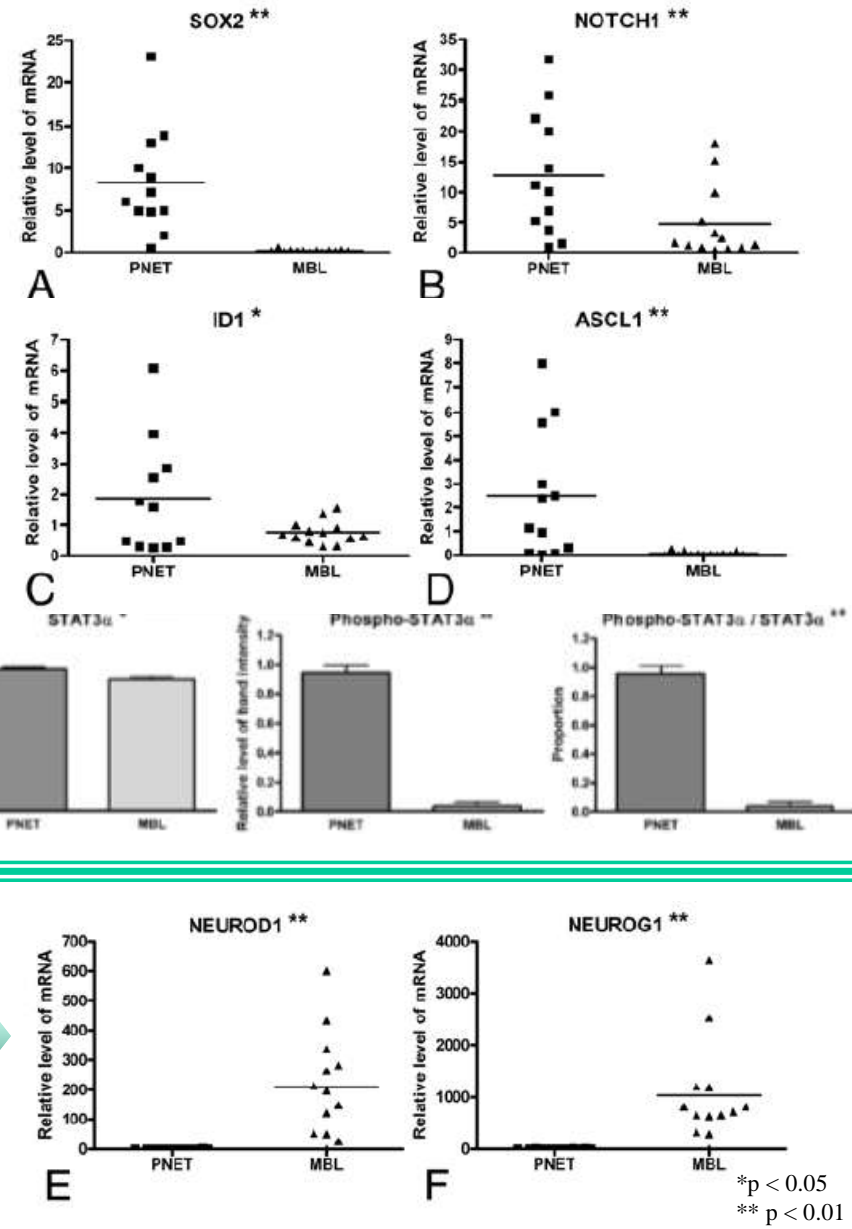
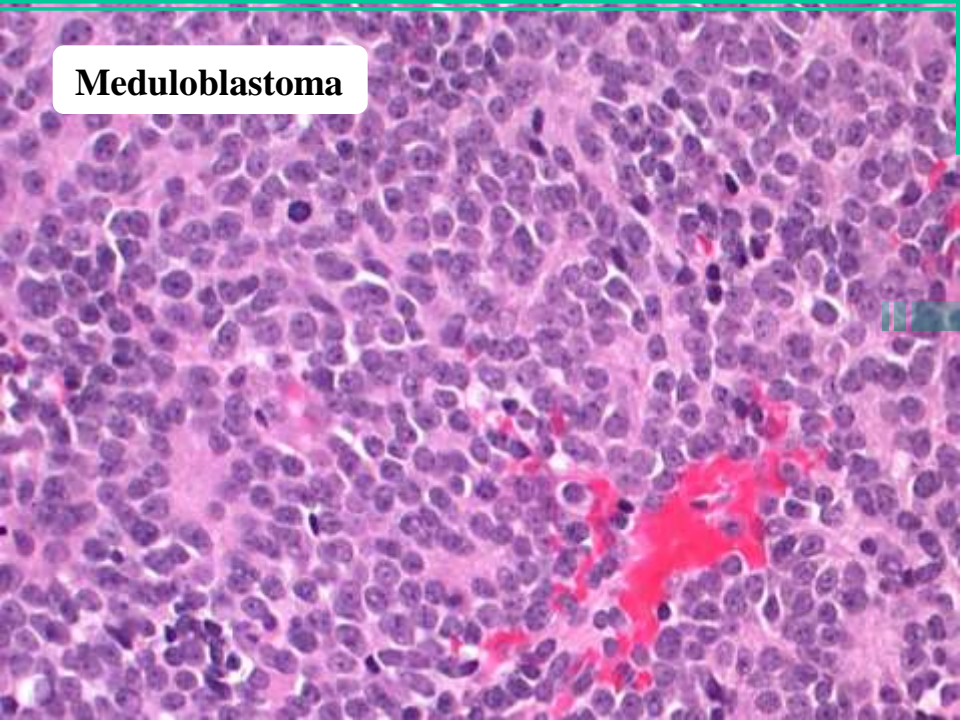


Haberler C et al. Immunohistochemical Analysis of INI1 Protein in Malignant Pediatric CNS Tumors: Lack of INI1 in Atypical Teratoid/ Rhabdoid Tumors and in a Fraction of Primitive Neuroectodermal Tumors without Rhabdoid Phenotype. American Journal of Surgical Pathology 2006;30:1462-1468

CNS-PNET



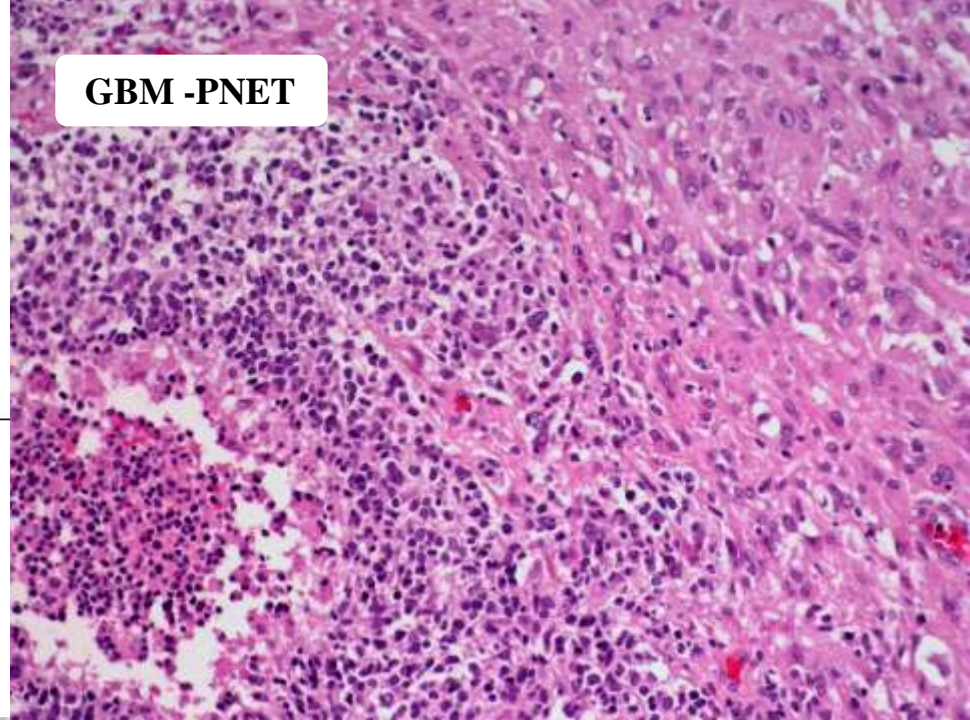
Medulloblastoma



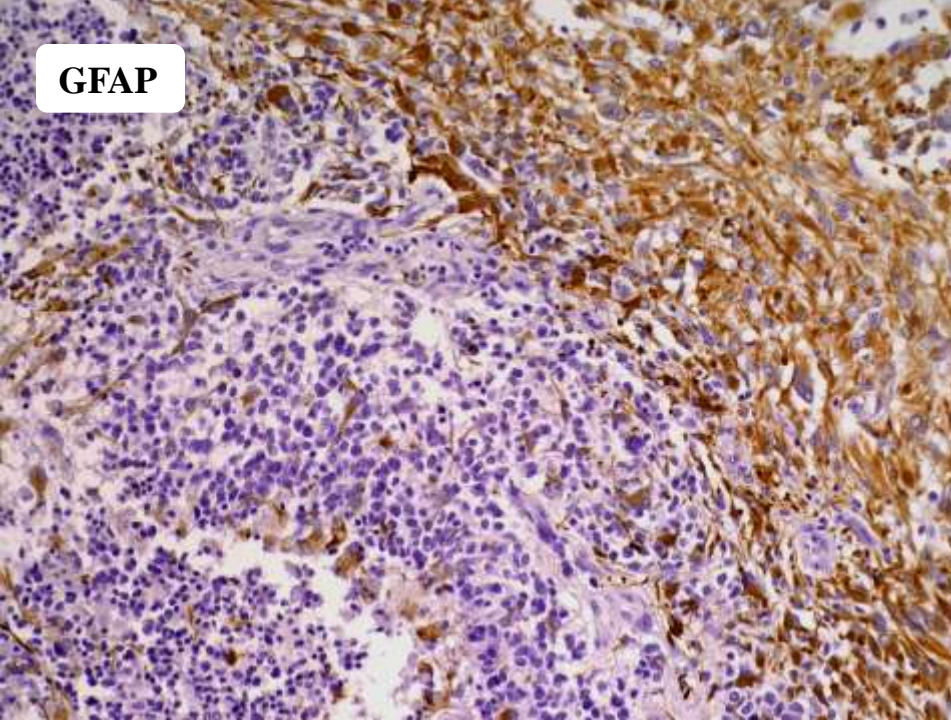
Ji Hoon Phi et al. Upregulation of *SOX2*, *NOTCH1*, and *ID1* in supratentorial primitive neuroectodermal tumors: a distinct differentiation pattern from that of medulloblastomas. *J Neurosurg Pediatrics* 5:000–000, 2010.

GBM variant and morphological features	Molecular alterations	Prognostic markers	Survival
<b>Classic GBM</b> Infiltrating, pleomorphic, hyperchromatic cells with glassy, astrocytic cytoplasm. Frequent presence of pseudopalisading necrosis, neopithelialization, mitotic figures, and hypercellularity	EGFR, EGFRvIII, p16 <sup>INK4A</sup> , PTEN, p53, MGMT, PI3K/AKT, DH1; Loss chromosome: 1p, 10, 19q <b>Genomic subtypes:</b> <b>Proneural:</b> PDGF, IDH1/IDH2, p53, PI3KCA, PI3KR1 <b>Mesenchymal:</b> NF1, p53, PTEN <b>Proliferative/classical:</b> EGFR, EGFRvIII, PTEN, p16 <sup>INK4A</sup> <b>Neural:</b> nonspecific	EGFRvIII, MGMT, IDH1, PTEN, p53, CD133, proneural subtype	5 year survival: 9.8% Median PFS: 5.3-10.3 months Median OS: 12.7-21.7 months
<b>GBM with primitive neuroectodermal tumour (GBM-PNET)</b> Features of GBM along with PNET-like areas showing hypercellularity, minimal fibrillary background, small undifferentiated cells with scant cytoplasm, oval-round hyperchromatic nuclei, and Homer Wright neuroblastic rosettes staining for S-100, synaptophysin, NeuN, and NFP	N-myc, C-myc, IDH1; Loss chromosome 10q	IDH1	Mean survival: 44 months

**GBM -PNET**



**GFAP**



**NF**

