

# XXVIII. Martinský biooptický seminár

## Prípad SD-IAP 794



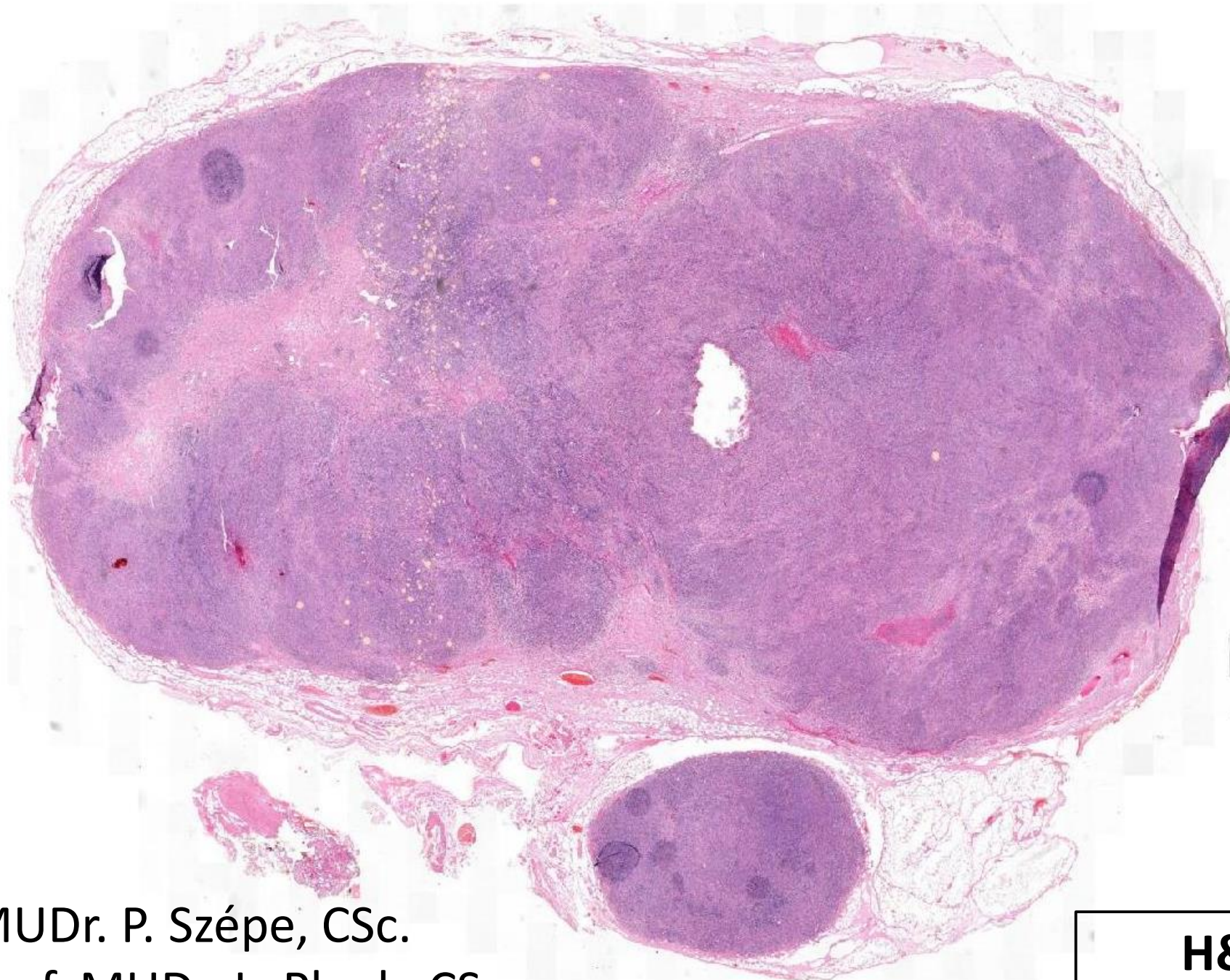
**Katarína Lešková**

Ústav patologickej anatómie JLF UK a UN Martin

11.-12. november 2022

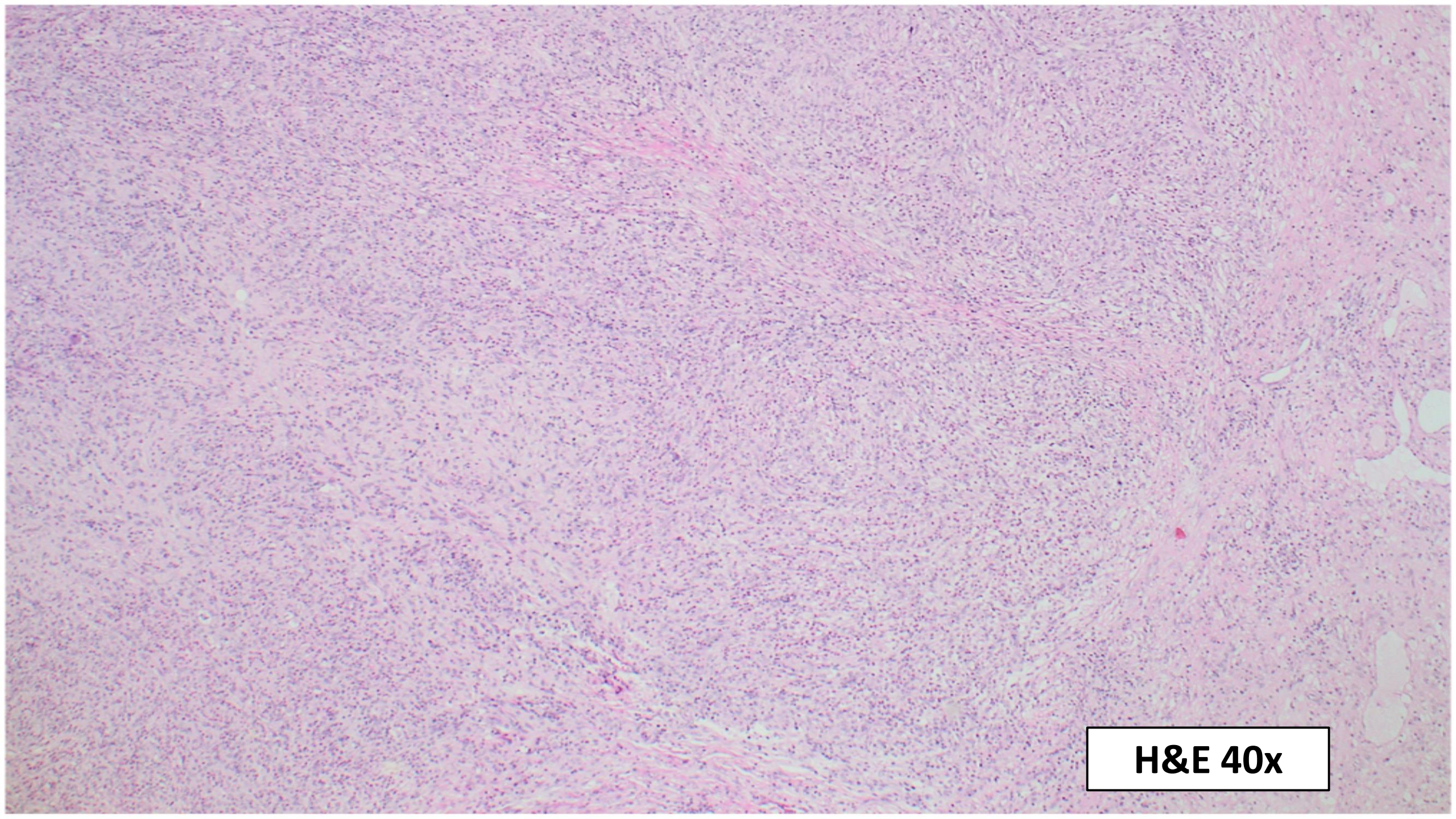


- 82- ročná žena
- **Predmet vyšetrenia:** krčná LU vľavo (Unilabs, s.r.o. BB)
- **Makroskopicky:** atopografické belavé laločnaté nepravidelné tkanivo veľkosti 4 x 2-2,5 x 1-1,5 cm (MUDr. Ján Dzuracký, Unilabs, s.r.o. BB)
- **Klinická diagnóza:** lymfadenopatia colli, susp. MTS postihnutie, resp. primárne ochorenie

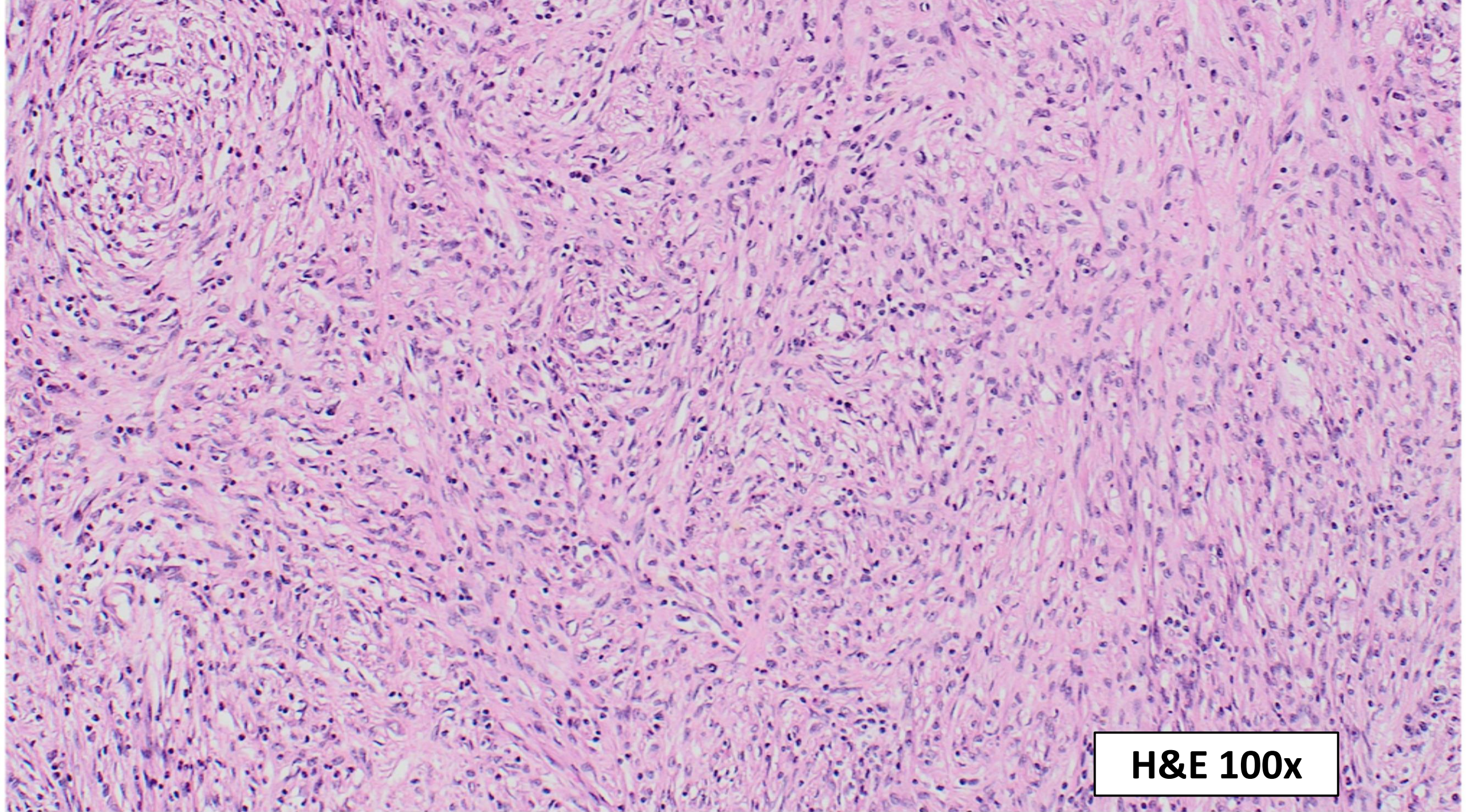


Vyšetřili: MUDr. P. Szépe, CSc.  
prof. MUDr. L. Plank, CSc.

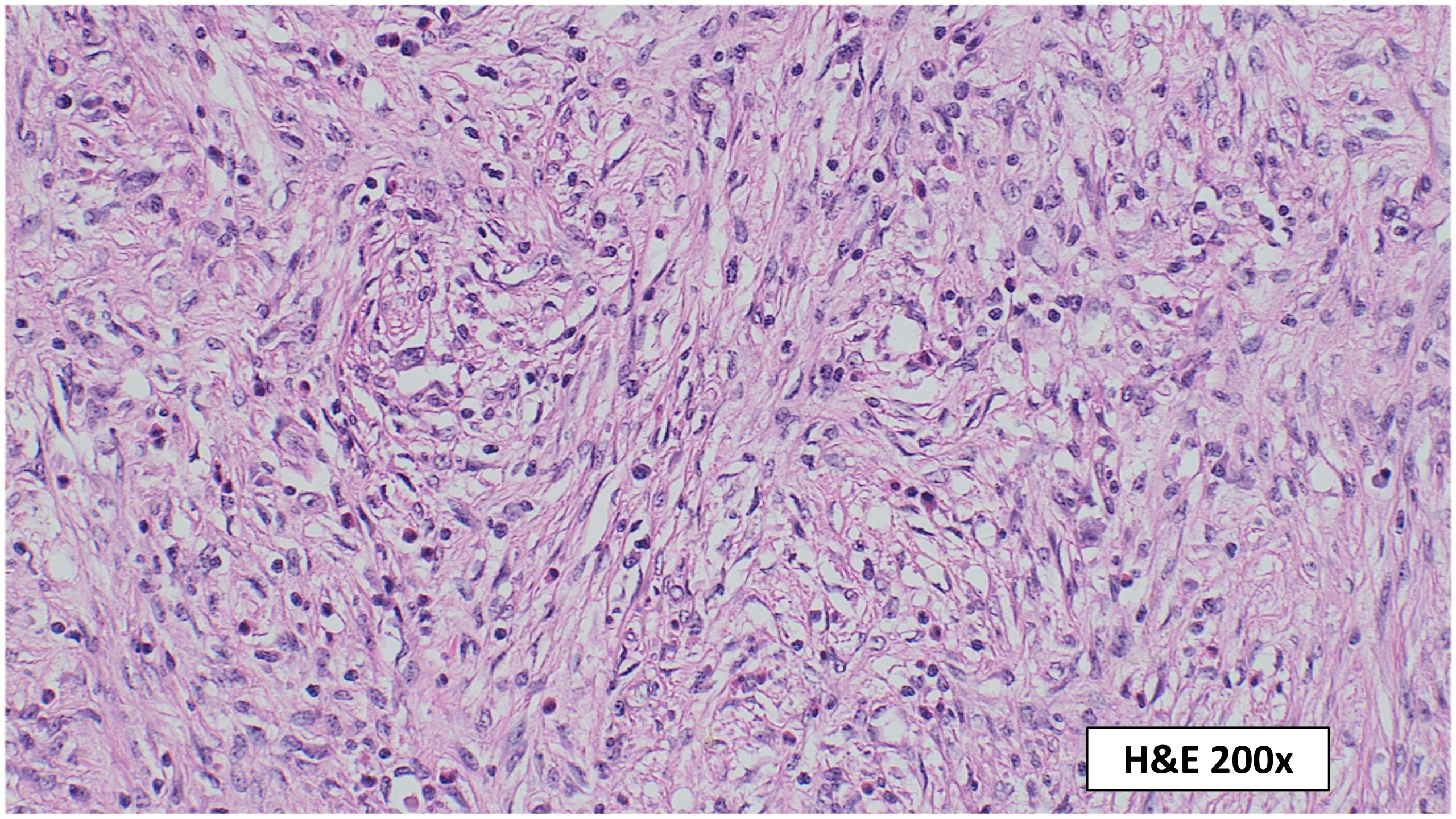
**H&E**



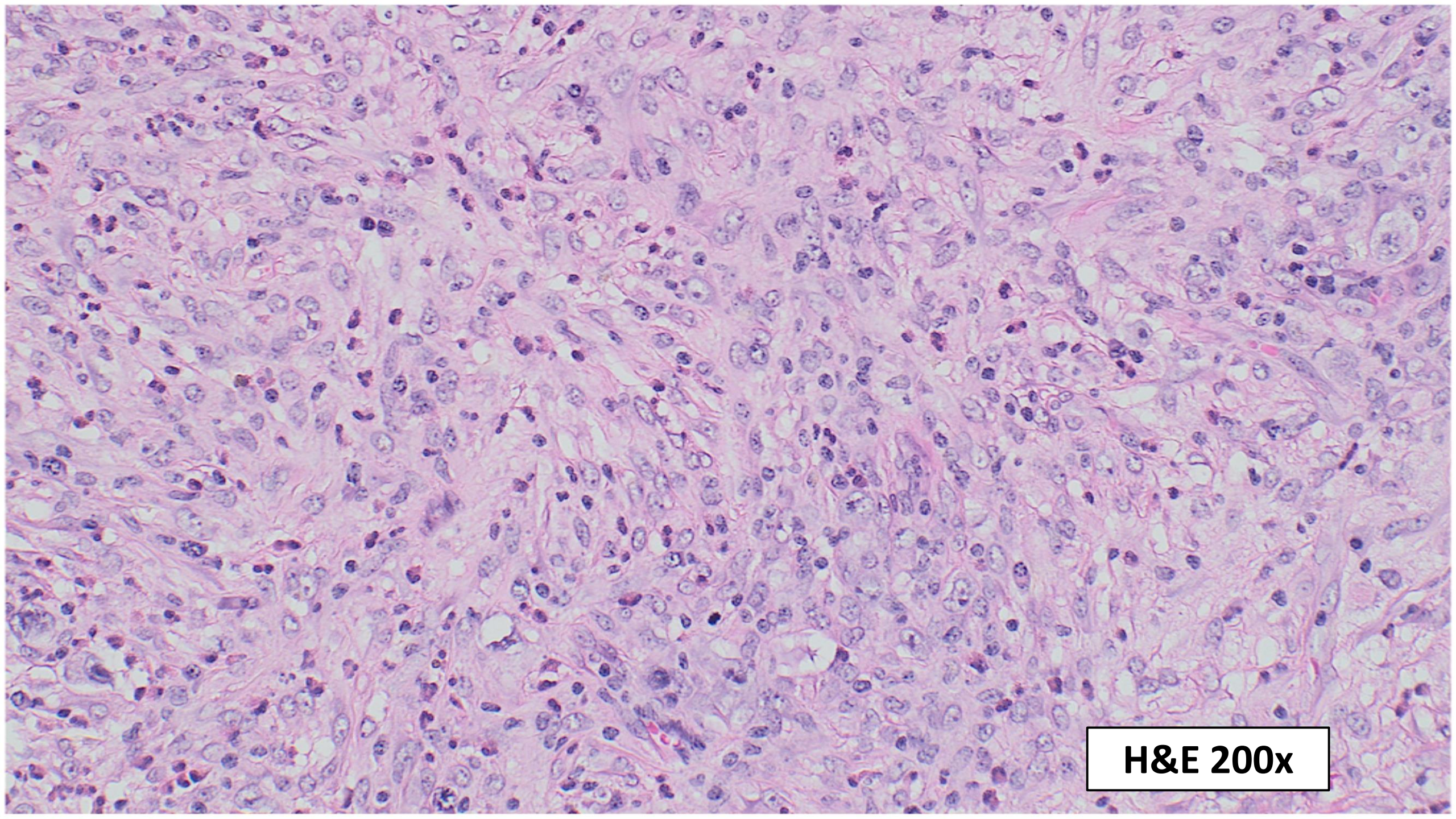
**H&E 40x**



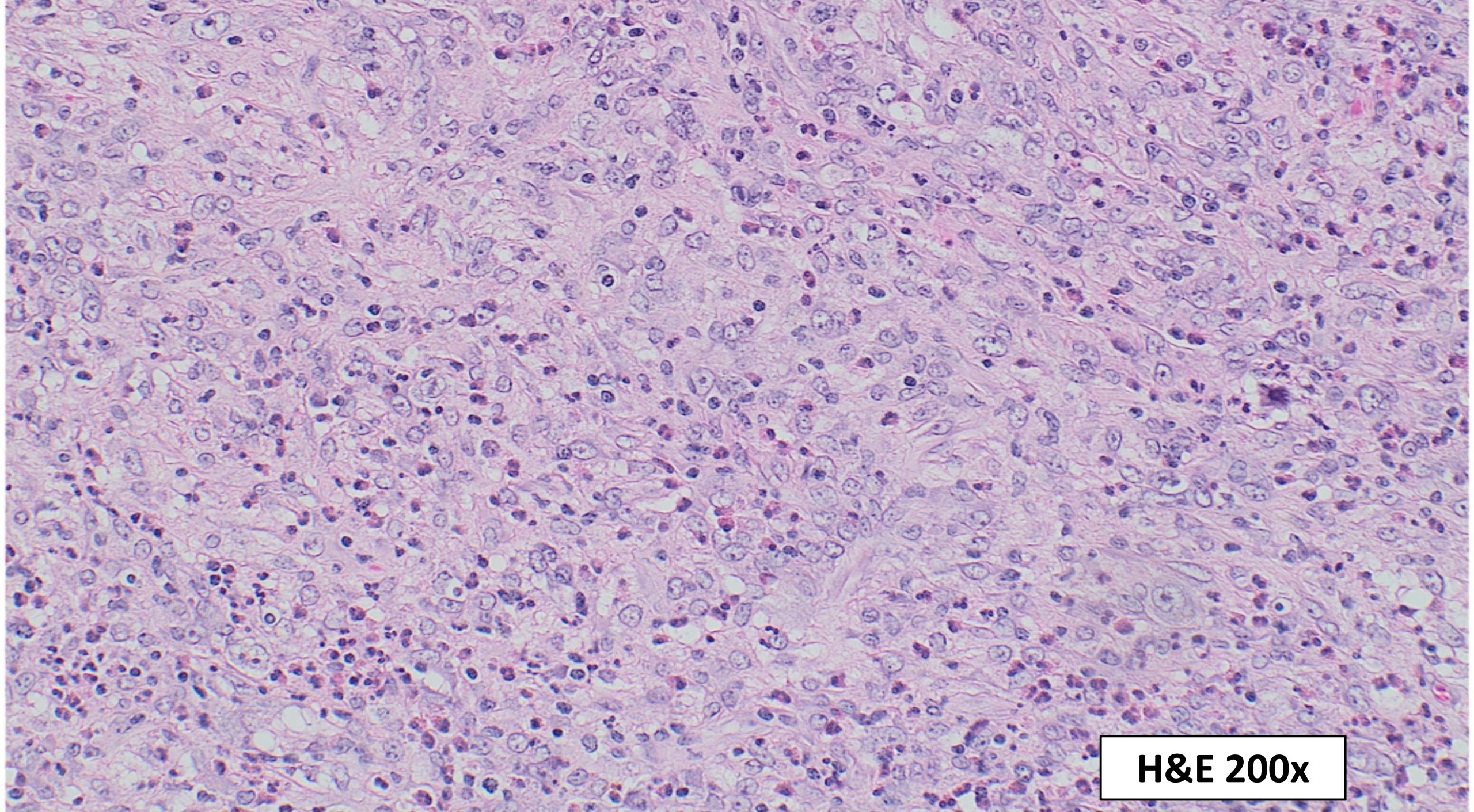
**H&E 100x**



**H&E 200x**

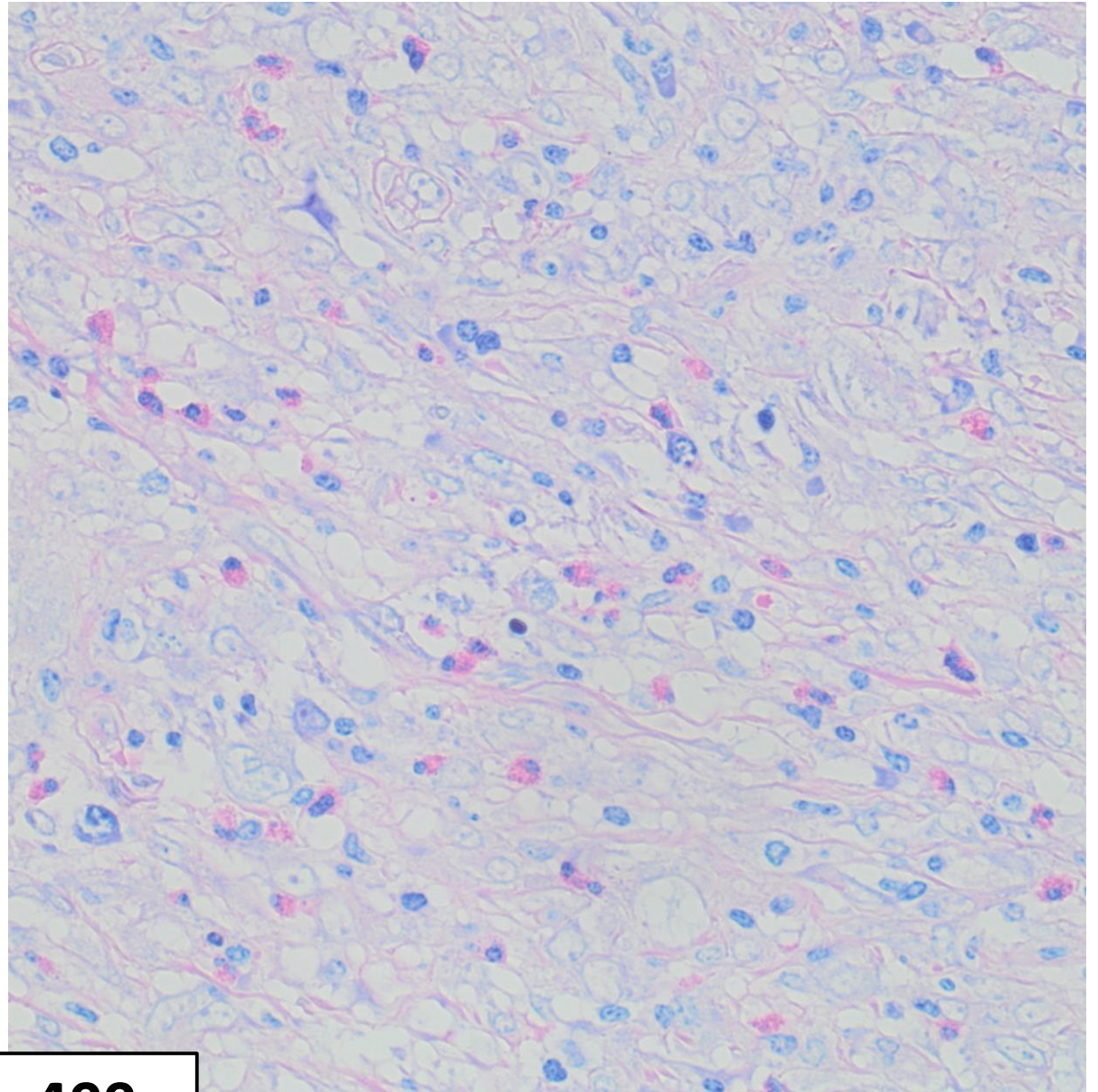
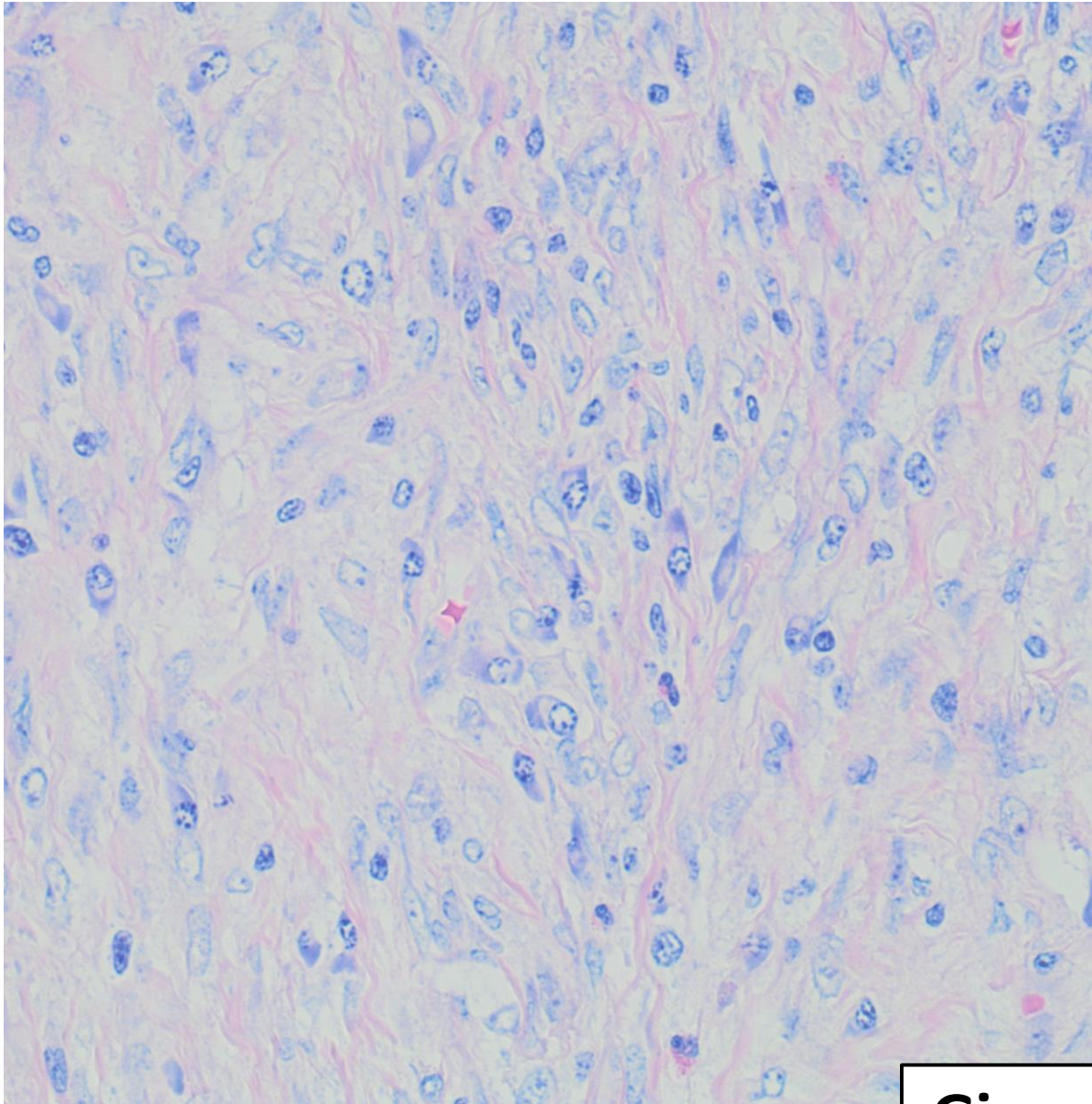


**H&E 200x**



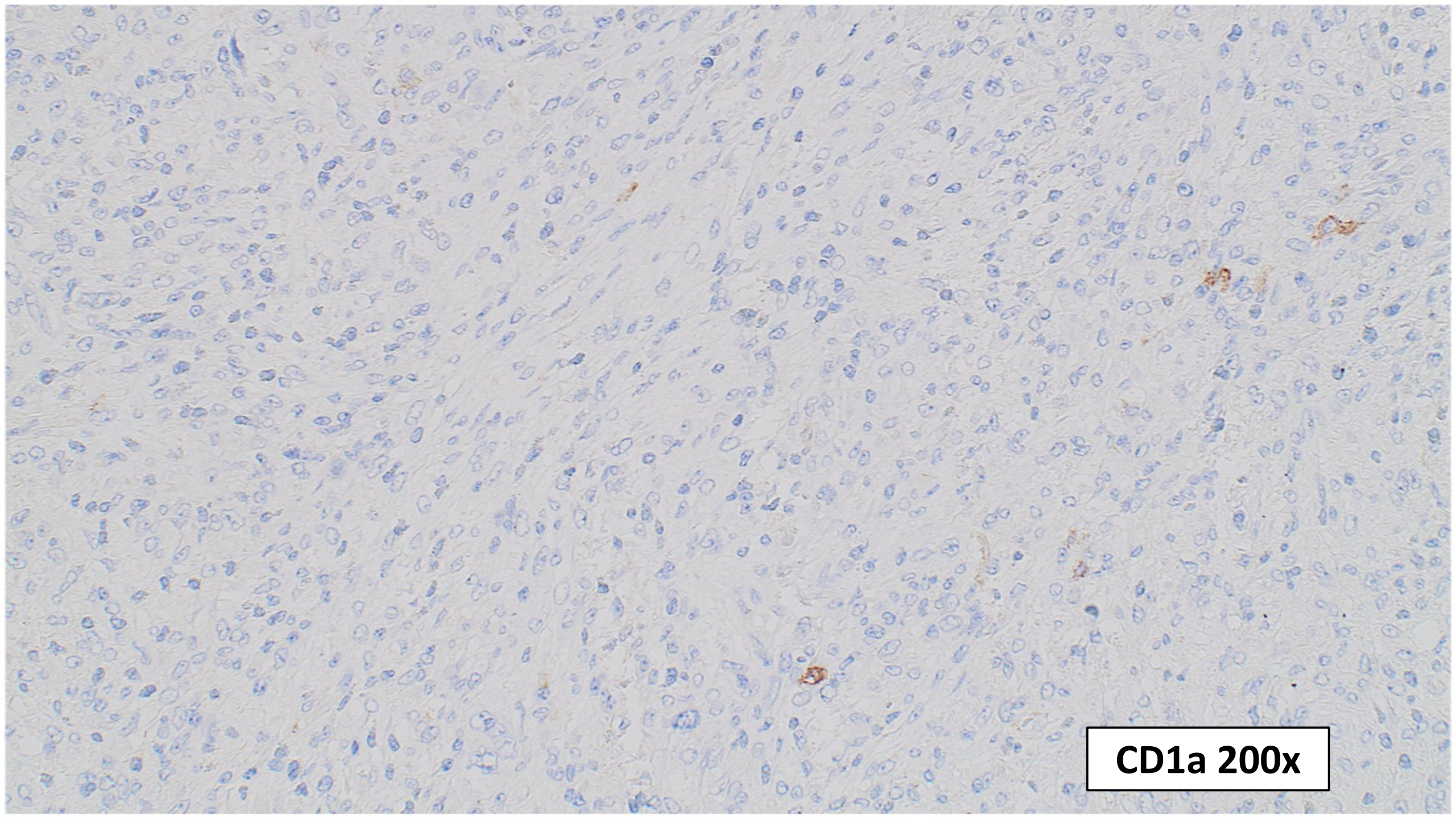
**H&E 200x**



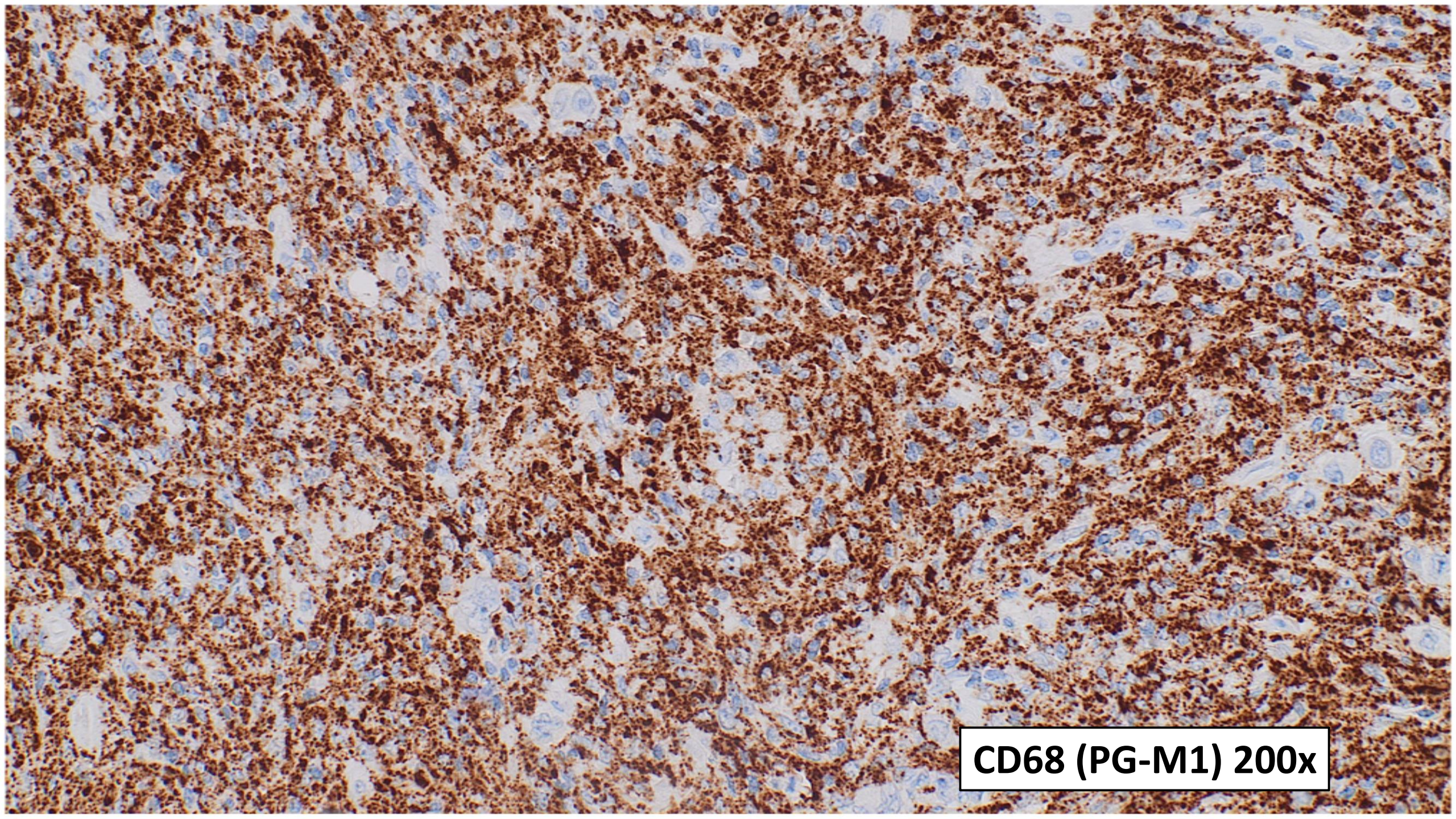


**Giemsa 400x**

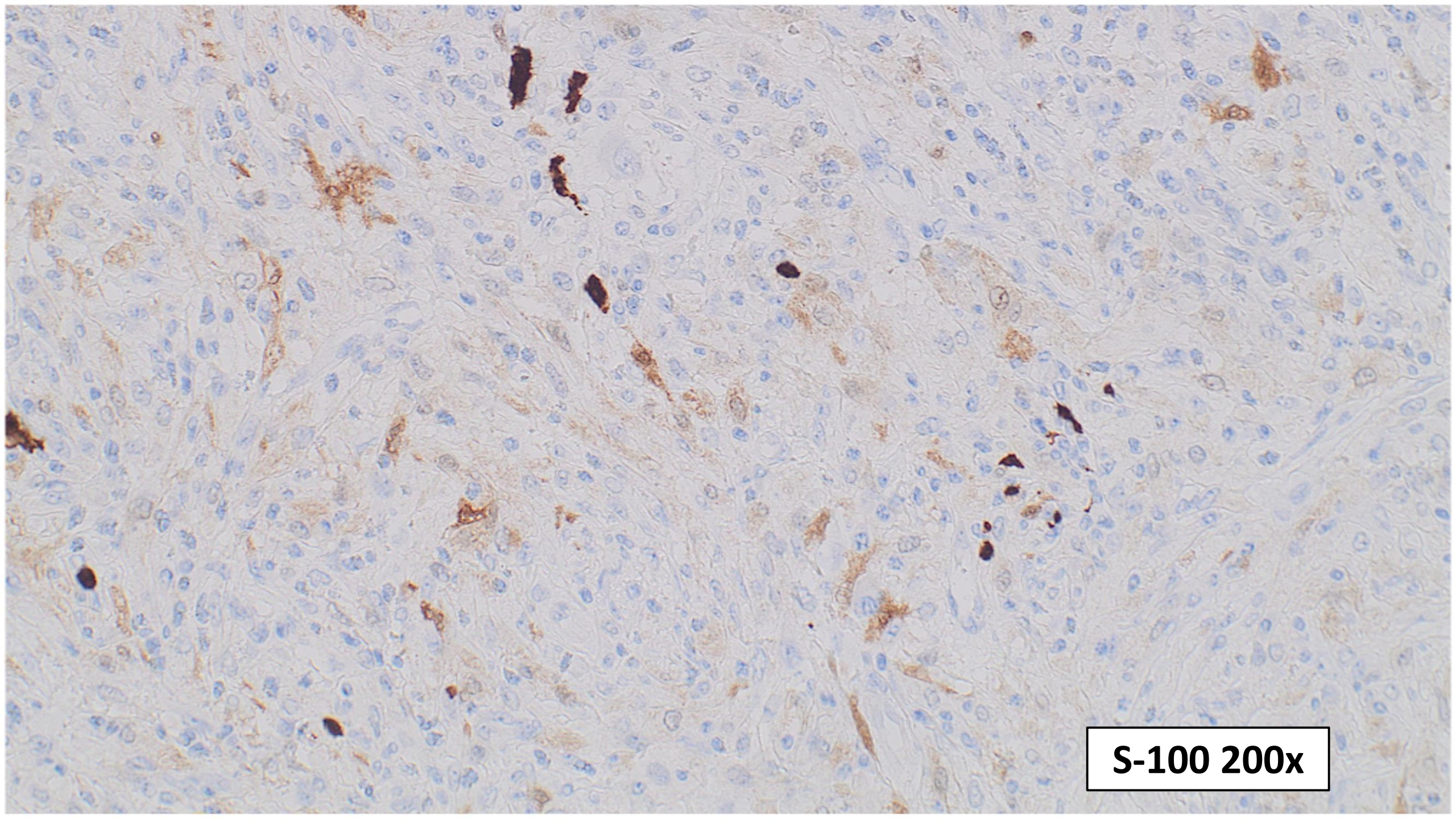




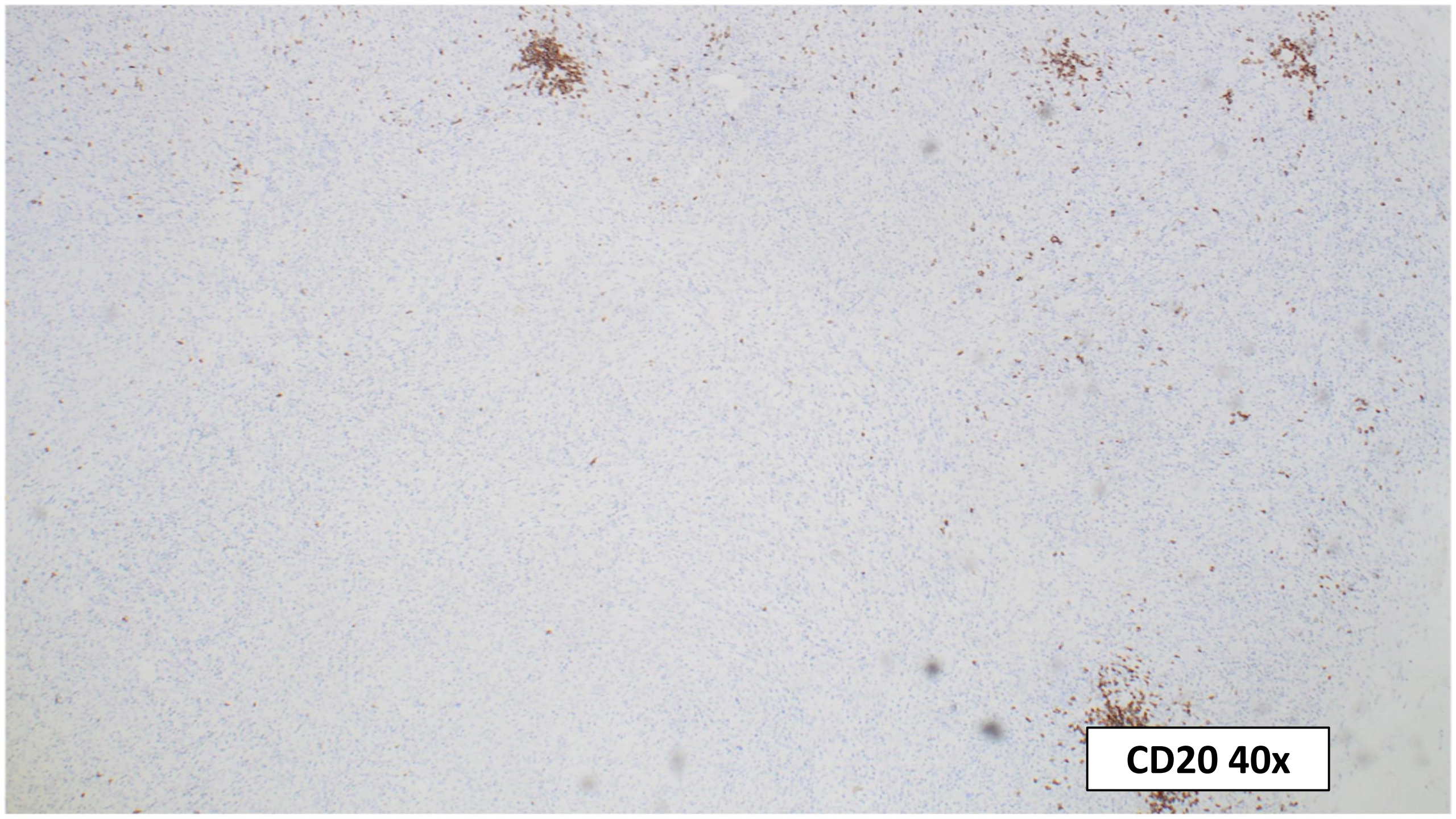
**CD1a 200x**



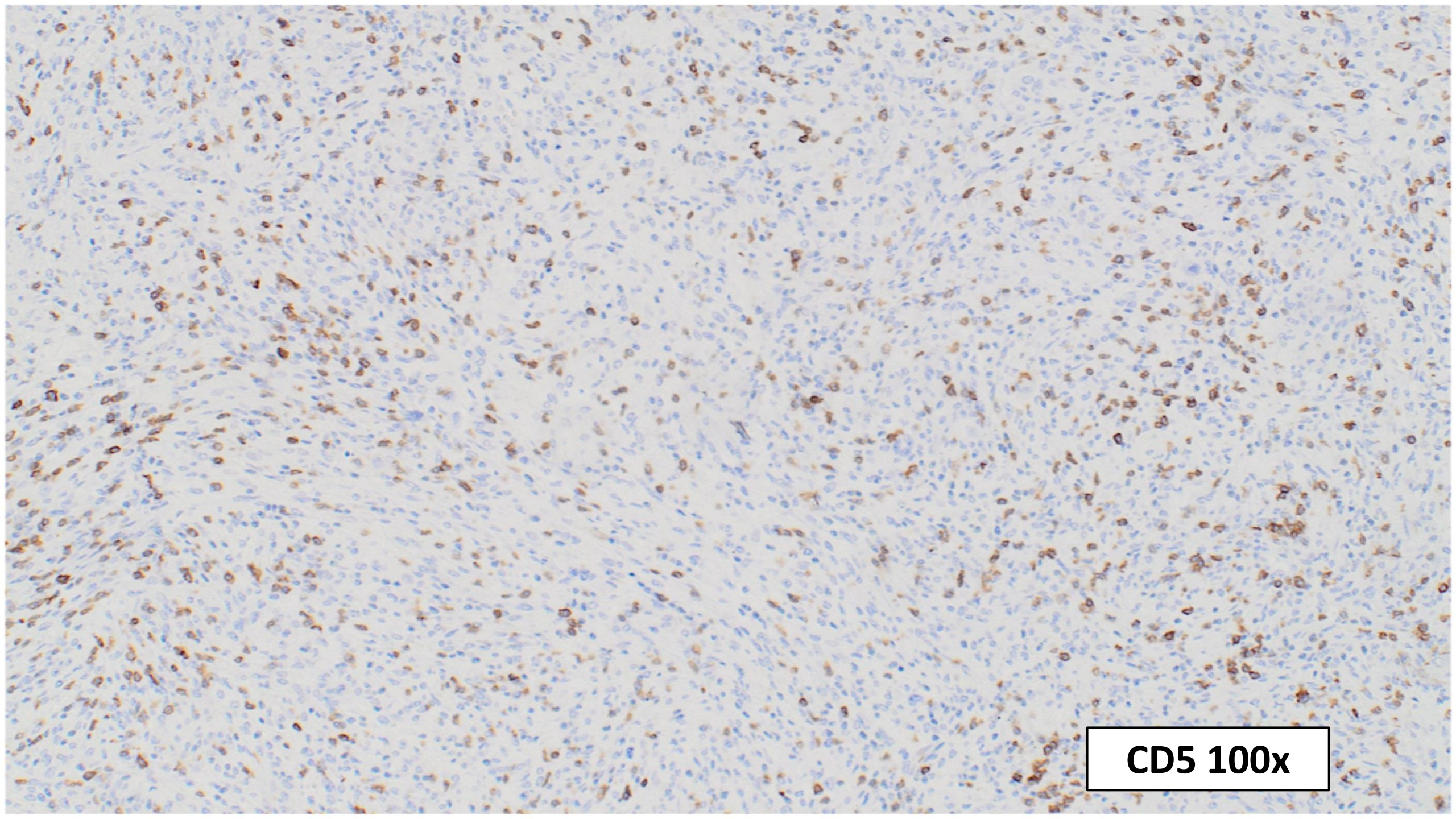
**CD68 (PG-M1) 200x**



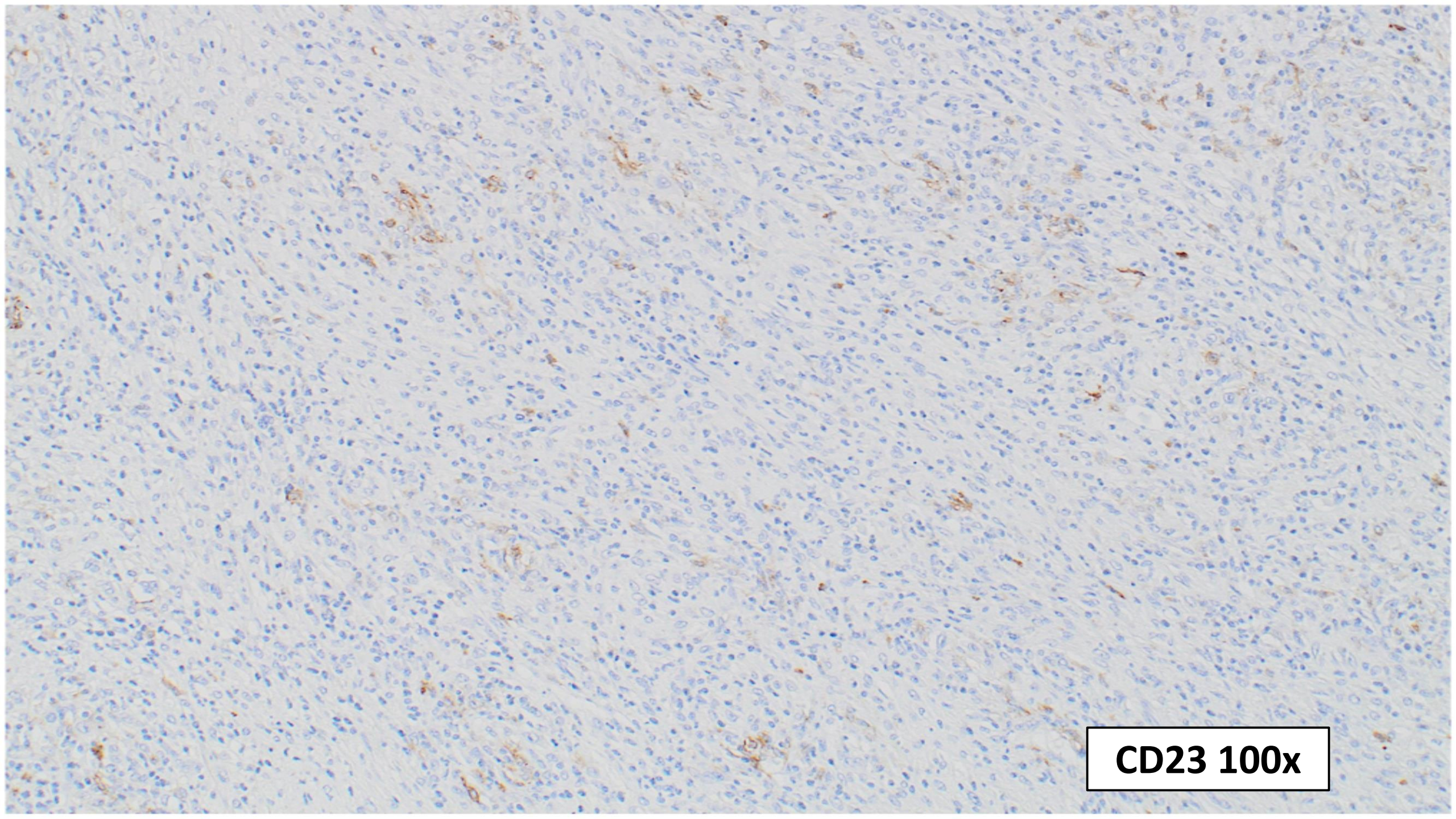
**S-100 200x**



**CD20 40x**



**CD5 100x**



**CD23 100x**



## Zhrnutie výsledkov IHC vyšetrení:

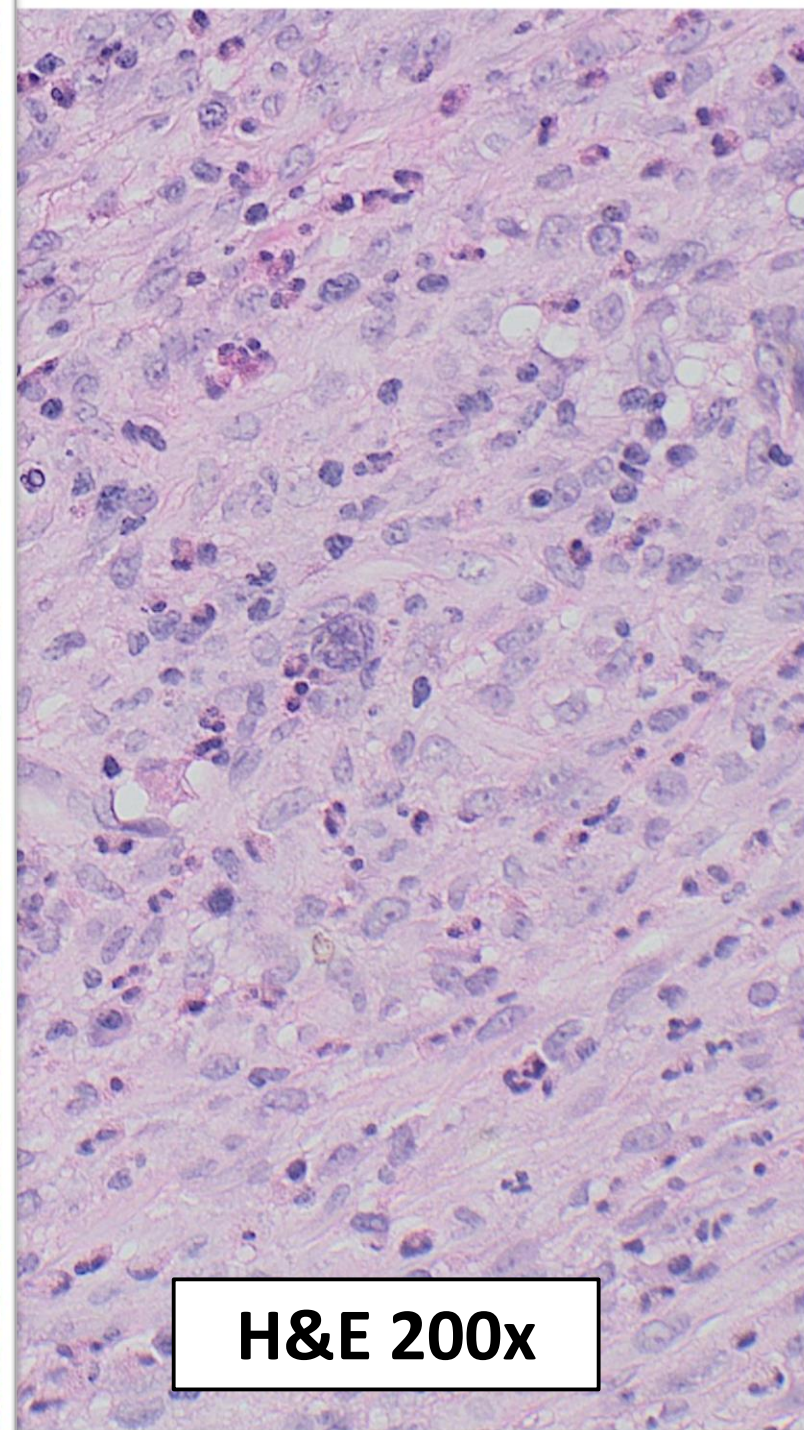
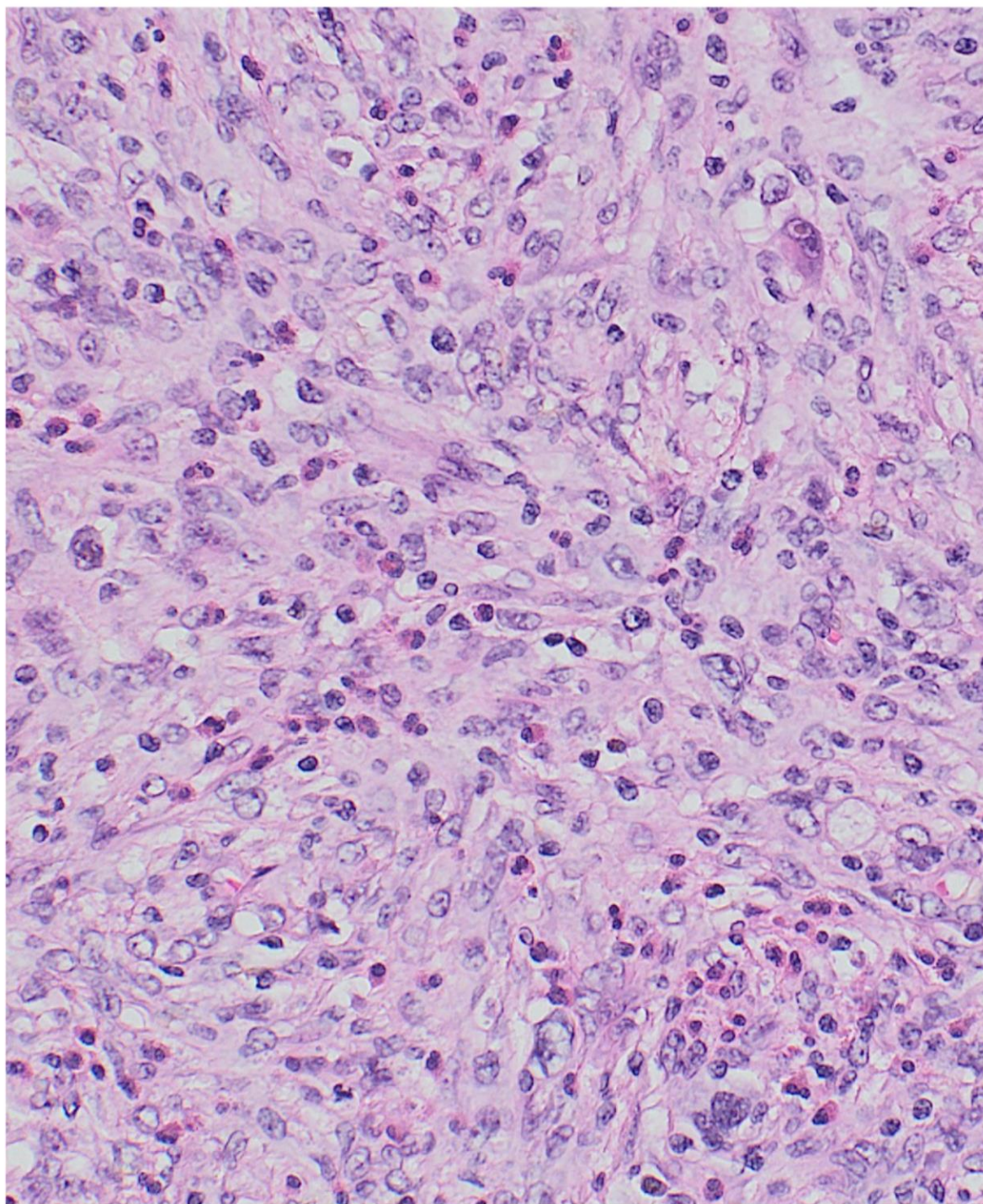
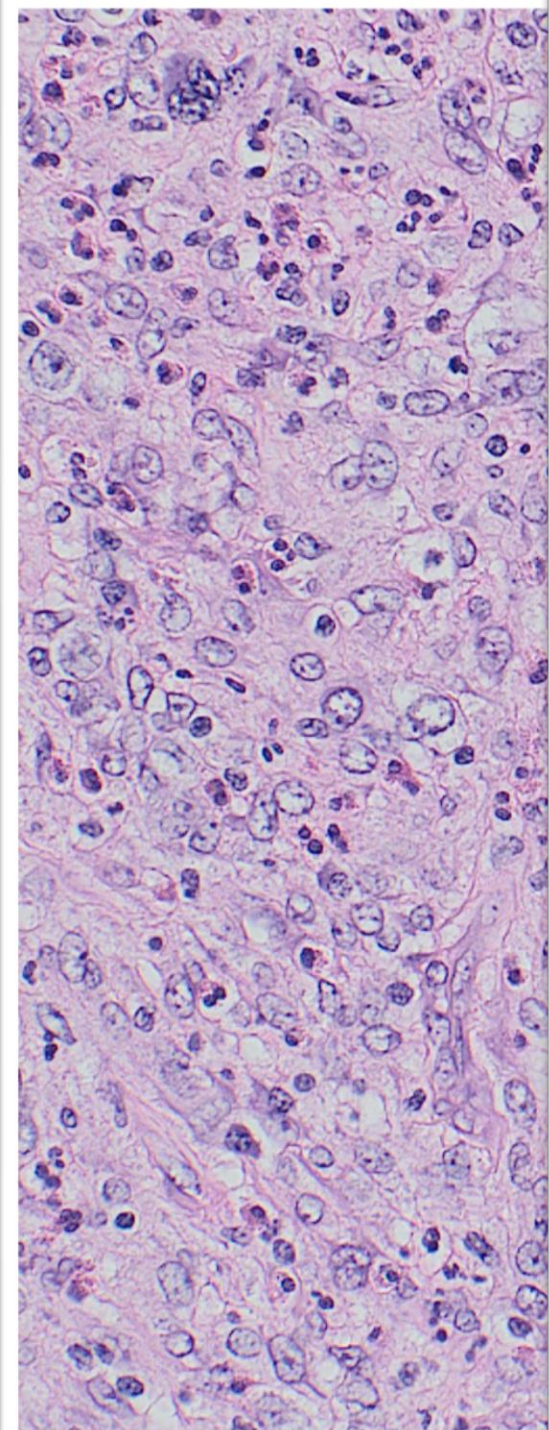
- **Negativita:**

- CD1a
- CD5
- CD20
- CD23
- S-100 mono

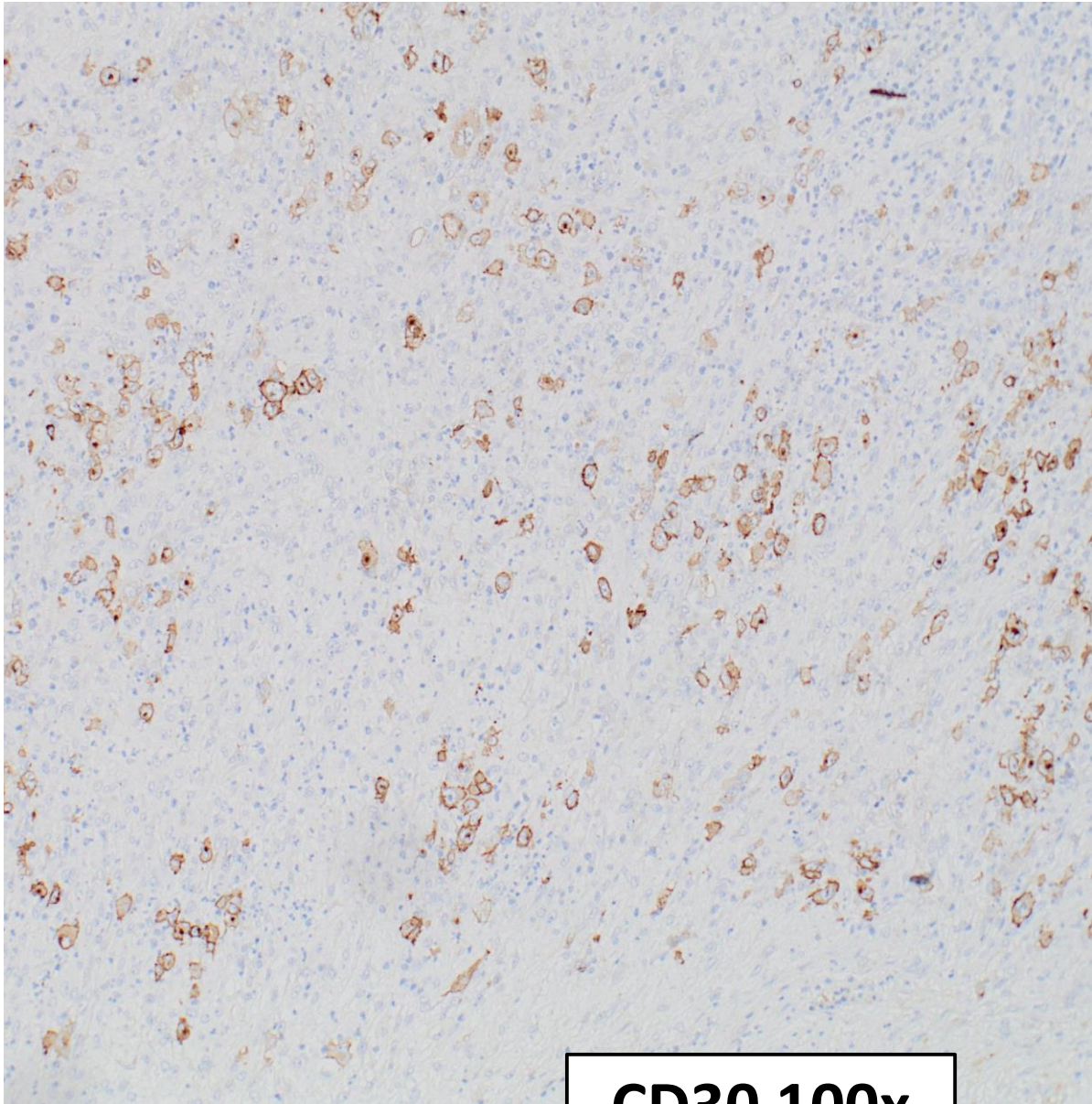
- **Pozitivita:**

- CD68

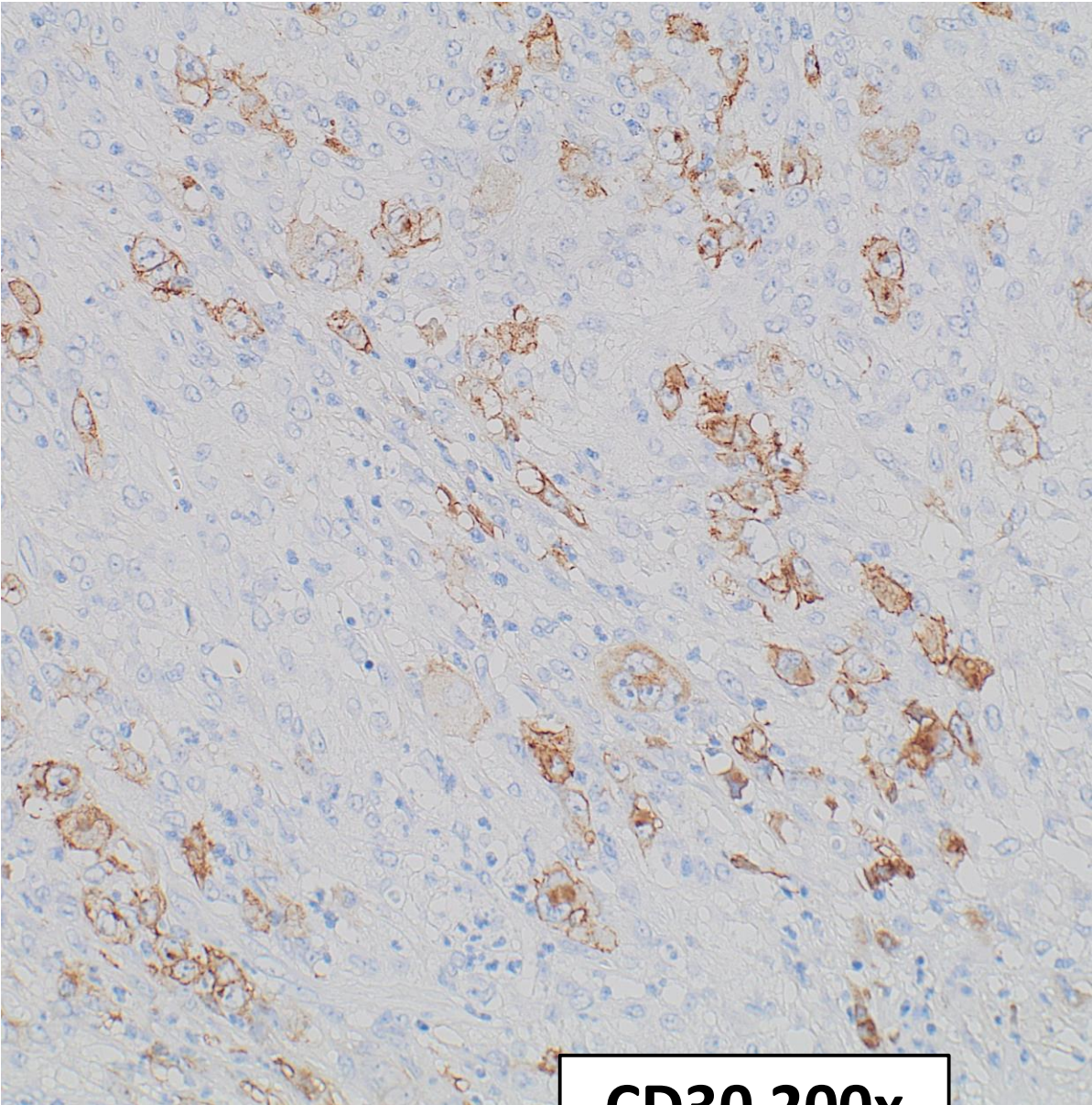




**H&E 200x**



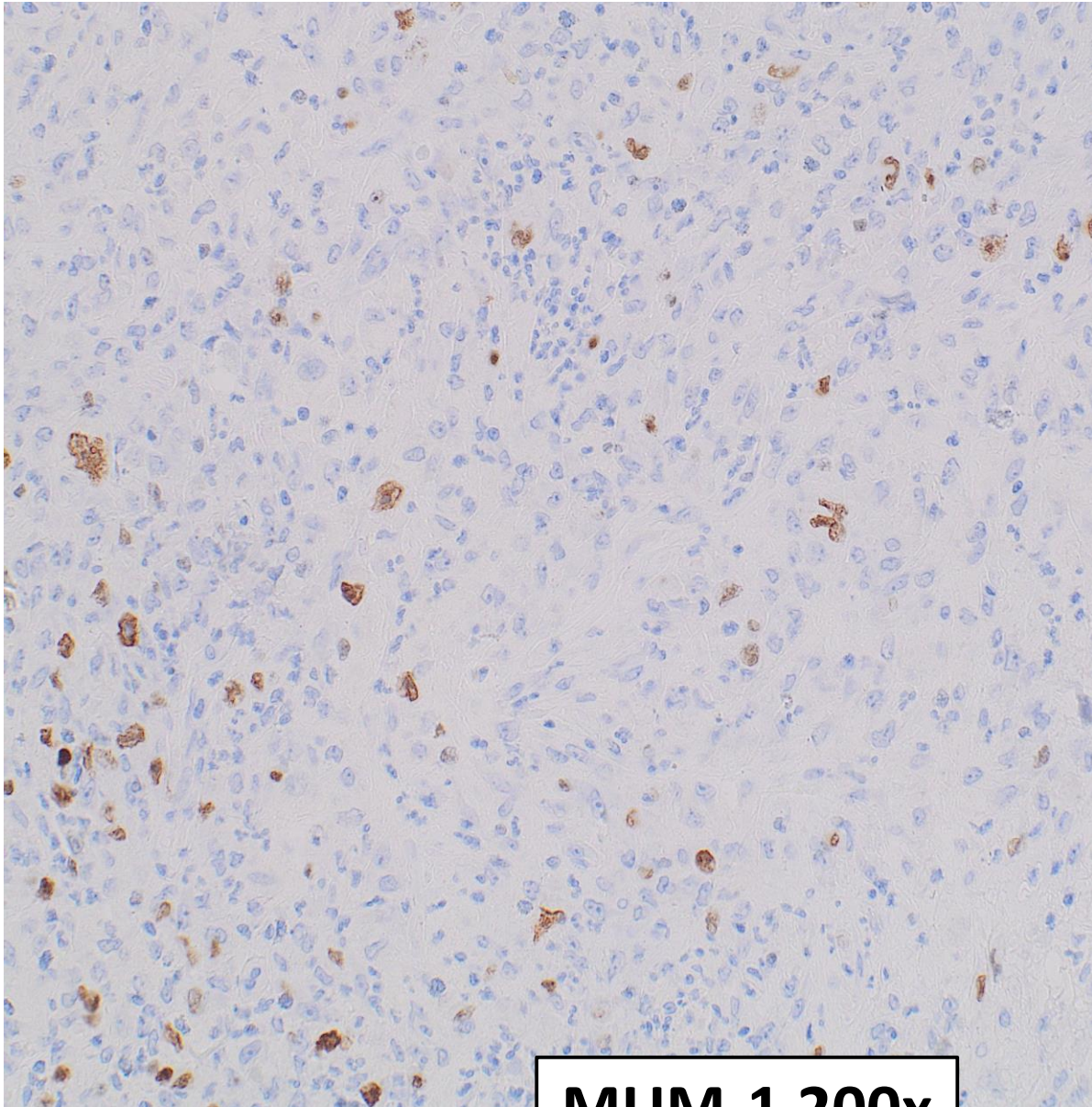
**CD30 100x**



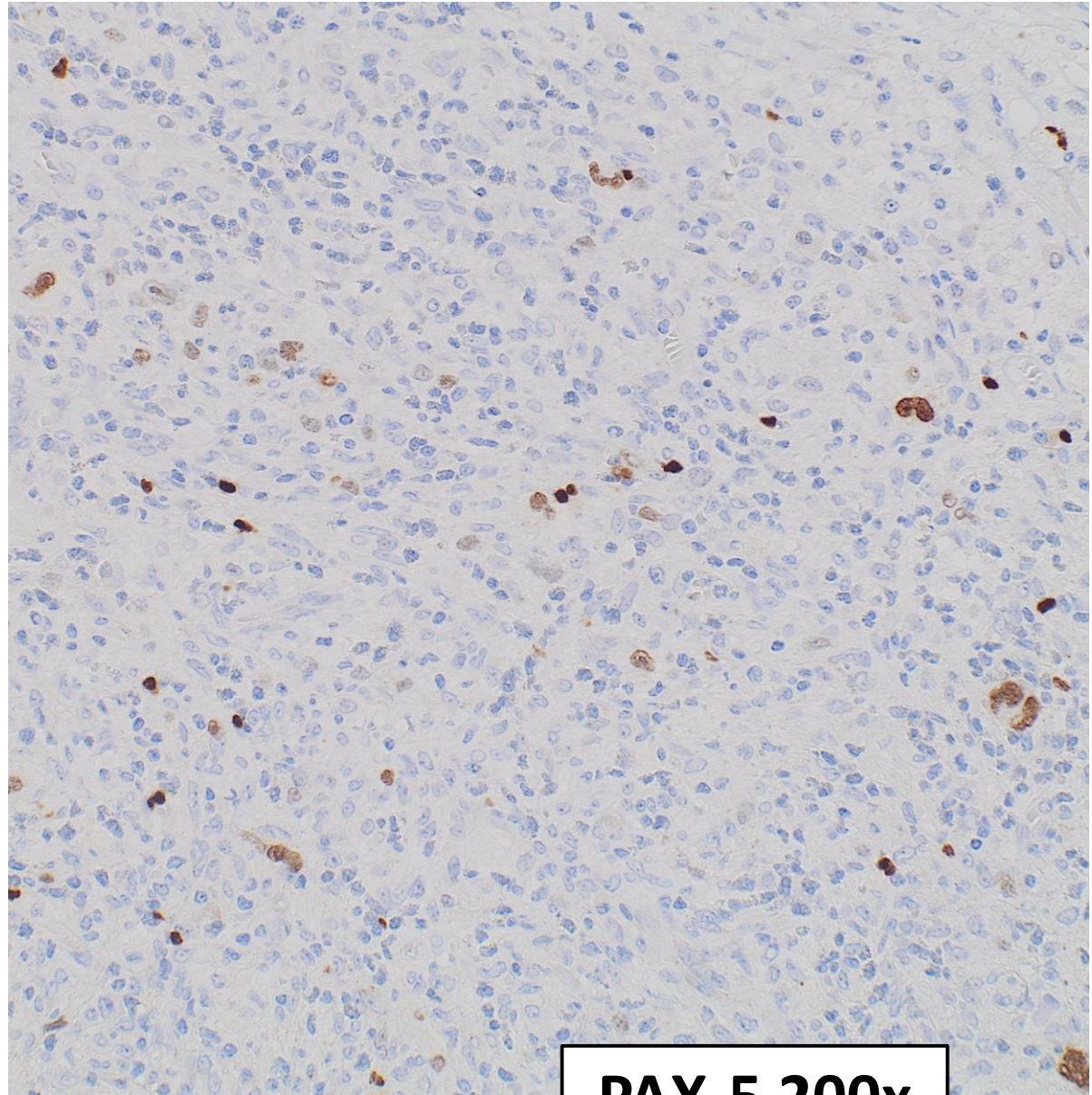
**CD30 200x**



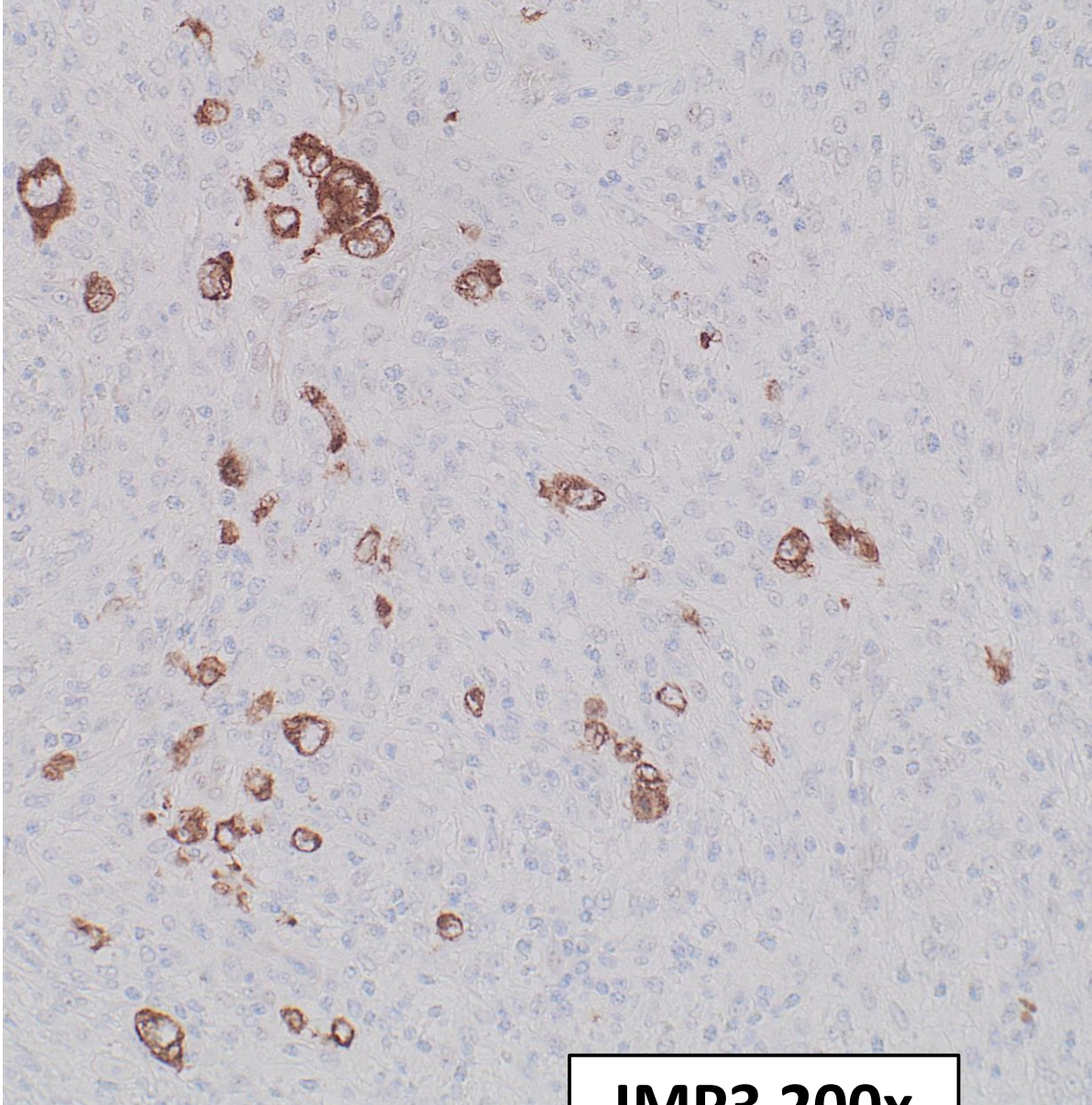
**CD15 200x**



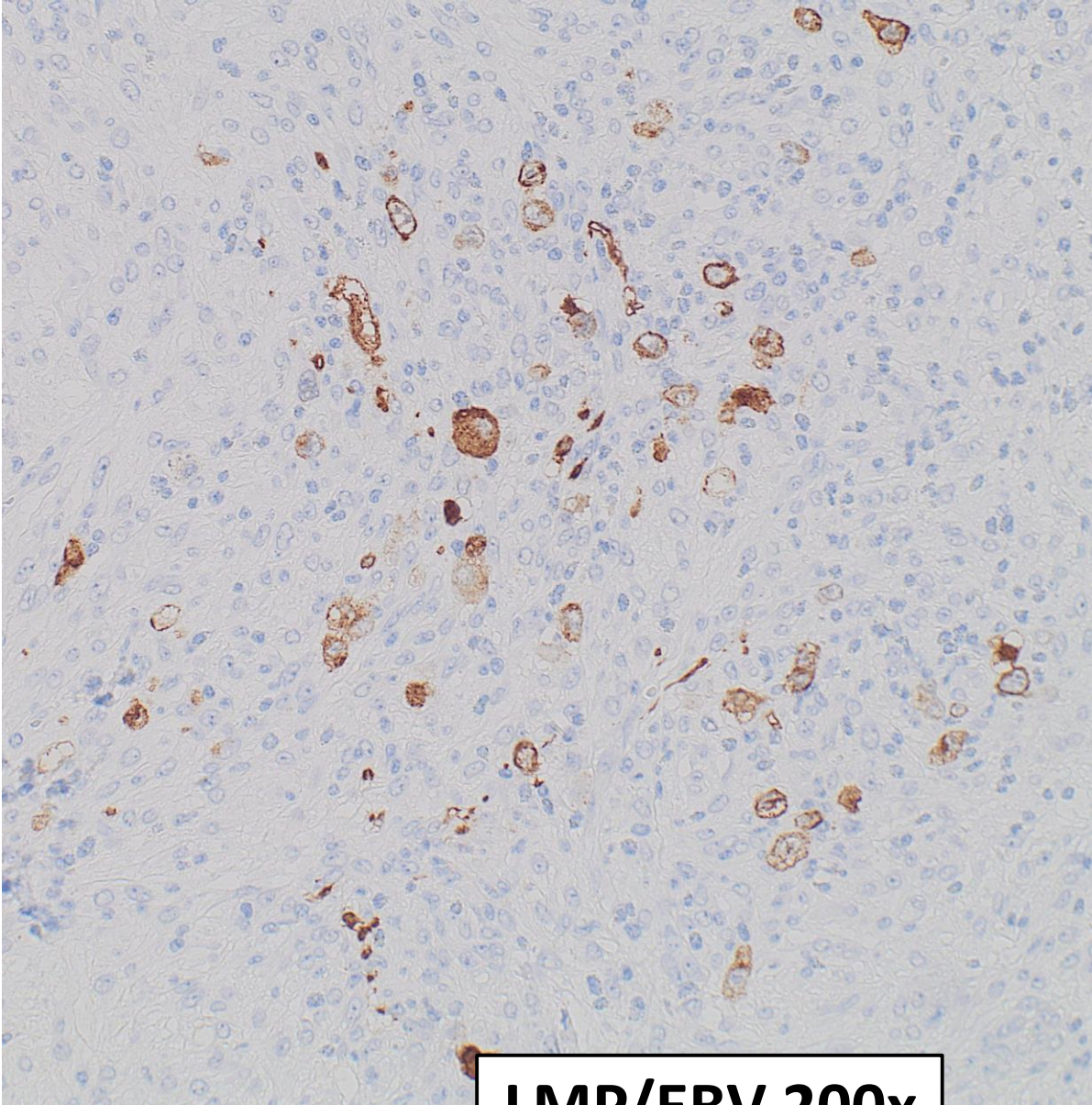
**MUM-1 200x**



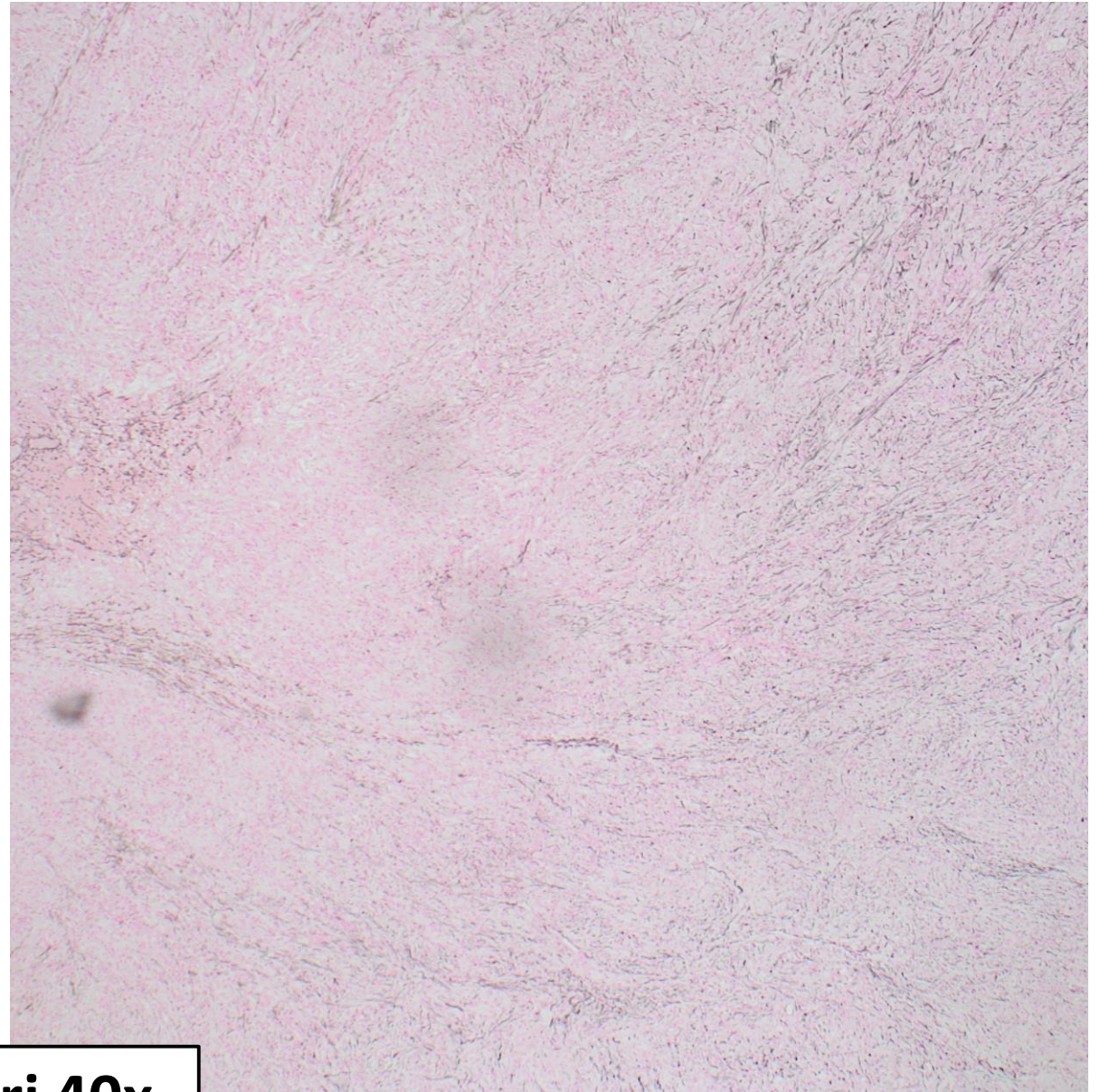
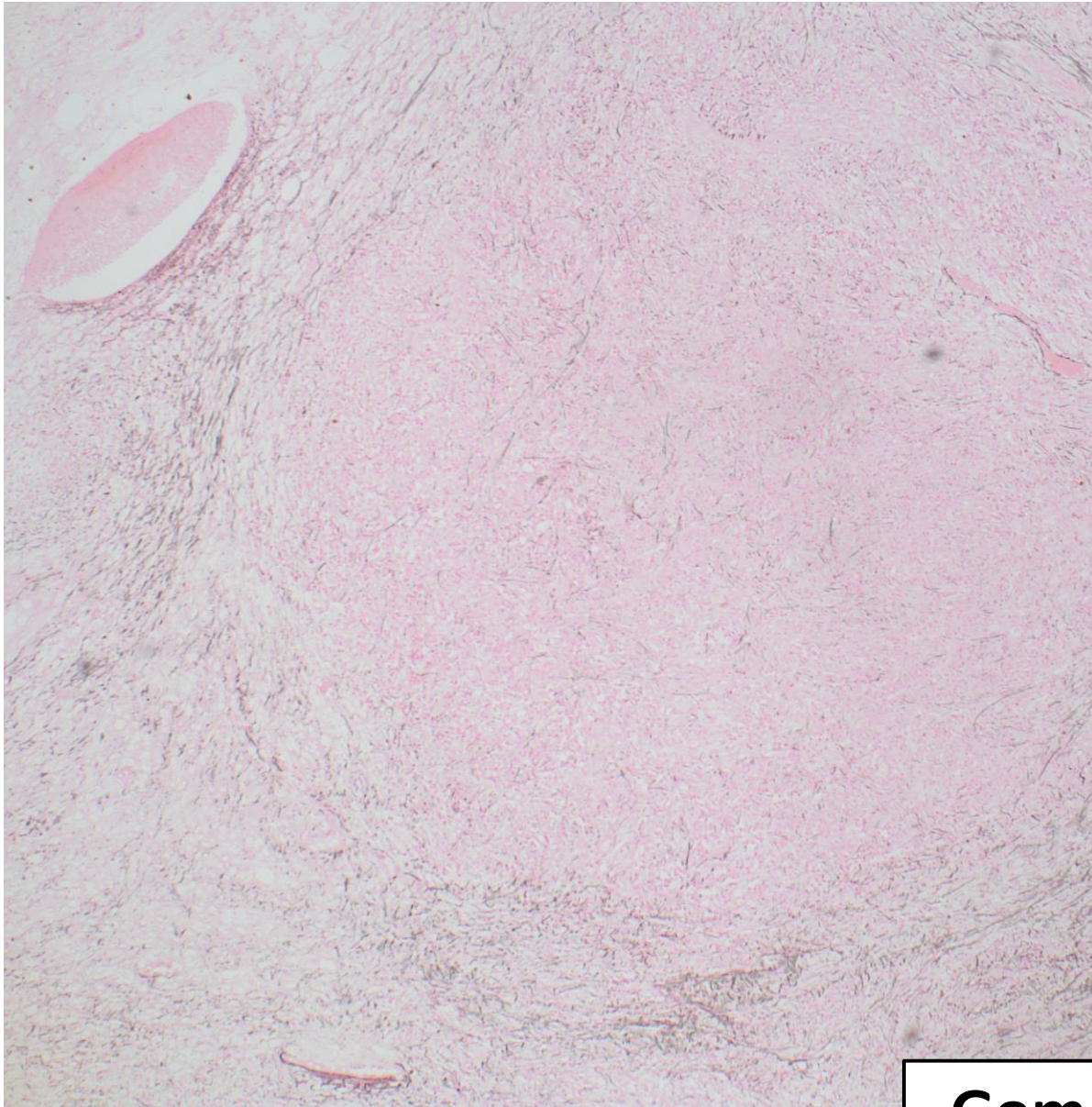
**PAX-5 200x**



**IMP3 200x**



**LMP/EBV 200x**



**Gomori 40x**



# Klasický Hodgkinov lymfóm s nodulárnou sklerózou

- asociovaný s EBV infekciou
- s vystupňovanou epitelioidnebunkovou reakciou

## c-HL, MC

- ~20% of CHL
- malé lymfocyty, neutrofily, eozinofily, histiocyty, plazmatické bunky, epitelioidné granulómy
- periférne LU, slezina, KD
- deti a dospelí > 60 rokov, M > Ž,
- väčšina (70 - 80%) EBV+

## c-HL, NS

- ~70% of CHL
- malé lymfocyty, neutrofily, eozinofily, histiocyty, plazmatické bunky, nekrózy a mikroabscesy, pruhovitá fibróza
- mediastinálne, krčné, supraklavikulárne LU
- vek 15-35 rokov, Ž > M
- malá časť (10 - 25%) EBV+

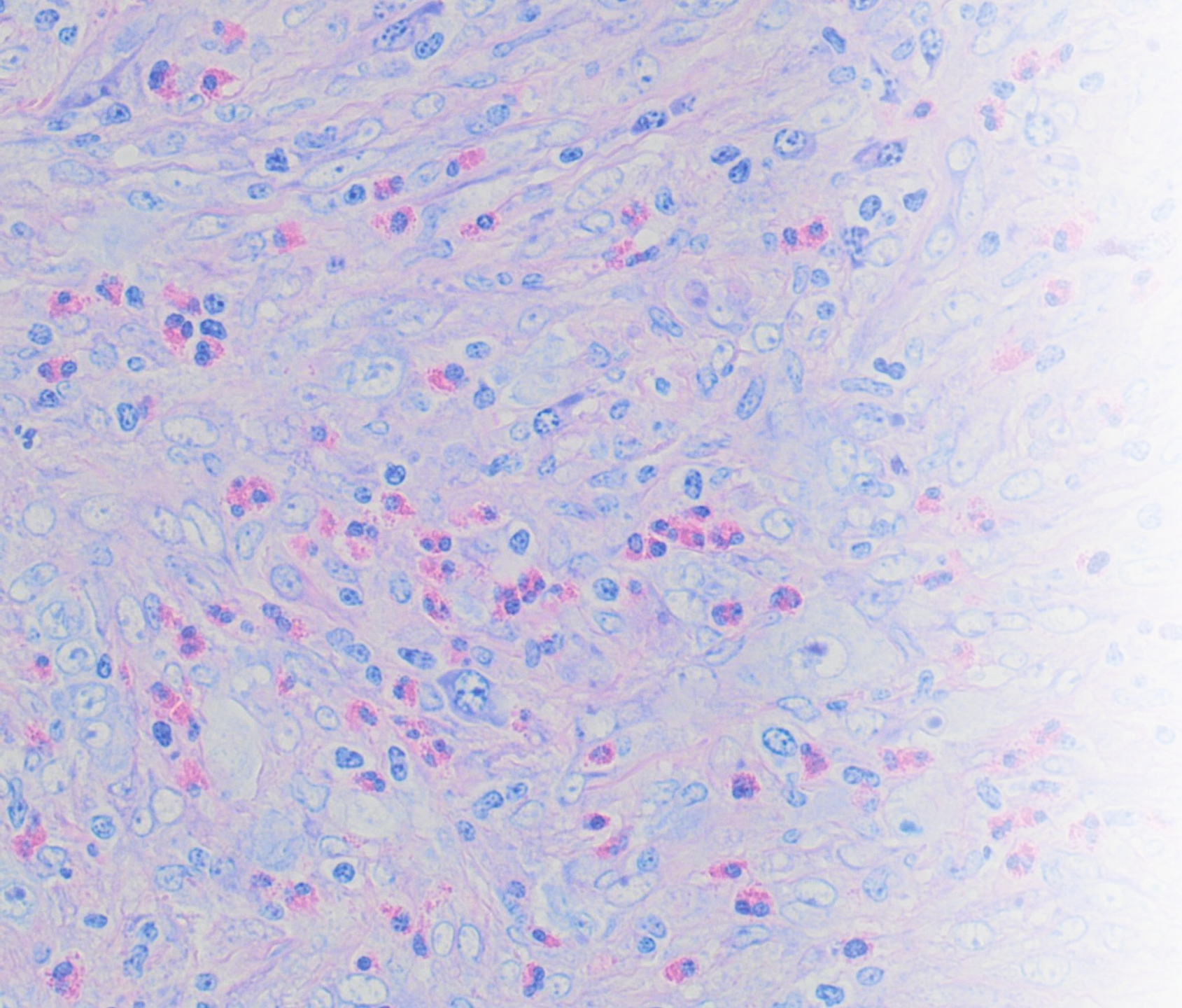
- Vysoké percento CD68 pozitívnych makrofágov v diagnostickej LU je asociované s kratším PFS a zvýšeným rizikom neúspešnej liečby v 2. línii, vrátane autológnej SCT

## Diferenciálna diagnostika:

### • Histiocytové a dendritické neoplázie:

Diagnóza	Pozitivita IHC	Negativita IHC
Klasický Hodgkinov lymfóm, NS	CD30+, PAX-5 slabo+, MUM1+, IMP3+ CD15+/-, LMP/EBV+/-	CD20-/+ CD45-
Histiocytárny sarkóm	CD163+, CD68+, lyzozým, CD45+ S-100 slabo+/-	CD15-/slabo+ CD1a-, langerín-, CD21-, B-/T-markery-
Nádory Langerhansových buniek (LCH)	CD1a+, langerín+, S-100+, vimentín+, CD68+	B-/T-markery-, CD30-, CD21-, CD23-
Sarkóm z interdigitujúcich dendritických buniek (IDC)	S-100+, vimentín+ CD68 slabo+/-, lyzozým+/-, CD45+/-	CD1a-, langerín-, CD21-, CD23-, CD30-, B-/T-markery-
Folikulárny dendritický sarkóm (FDC)	CD21+, CD23+, vimentín+, EGFR+ EMA+/-, S-100+/-, CD68+/-	CD45-/+ , CD20-/+ CD1a-, CD3-, CD79a-, CD30-, lyzozým-

### • Granulomatózne zápaly



## Na záver:

- nezabúdať na možnú malignitu aj v zdanlivo neneoplastickom zápalovom morfológickom obraze



**Ďakujem za  
pozornosť**

