
Territorial Valenciana

Anatomía Patológica

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Hospital Clínico Universitario de Valencia



Niña en la playa, Joaquín Sorolla

CASO CLÍNICO

EPISODIO ACTUAL:

Mujer de **82 años** que ingresa por un cuadro de **2 meses** de evolución de **astenia progresiva, hiporexia y pérdida de 6 kg** de peso.

ANTECEDENTES MÉDICOS:

- ❑ Hipertensión arterial, dislipemia, diabetes mellitus
- ❑ 2007 **Meningioma** en T8-T9
- ❑ 2010 **Carcinoma infiltrante NOS, triple negativo** en mama derecha, con **metástasis ganglionares**
 - **QT** neoadyuvante
 - **Tumorectomía + linfadenectomía axilar**
 - **Radioterapia**



CASO CLÍNICO

EXPLORACIÓN FÍSICA:

- ❑ **Palidez** muco-cutánea
- ❑ **Dolor** a la palpación de **hemiabdomen izquierdo**, en la que además se evidencia **esplenomegalia**
- ❑ **No** se palpan ni observan lesiones cutáneas o subcutáneas en zona de mama irradiada ni en axila derecha.

ANALÍTICA:

Haptoglobina **<8 mg/dL** ↓

LDH **2666 U/L** ↑

Hemoglobina **5,5 g/dl** ↓

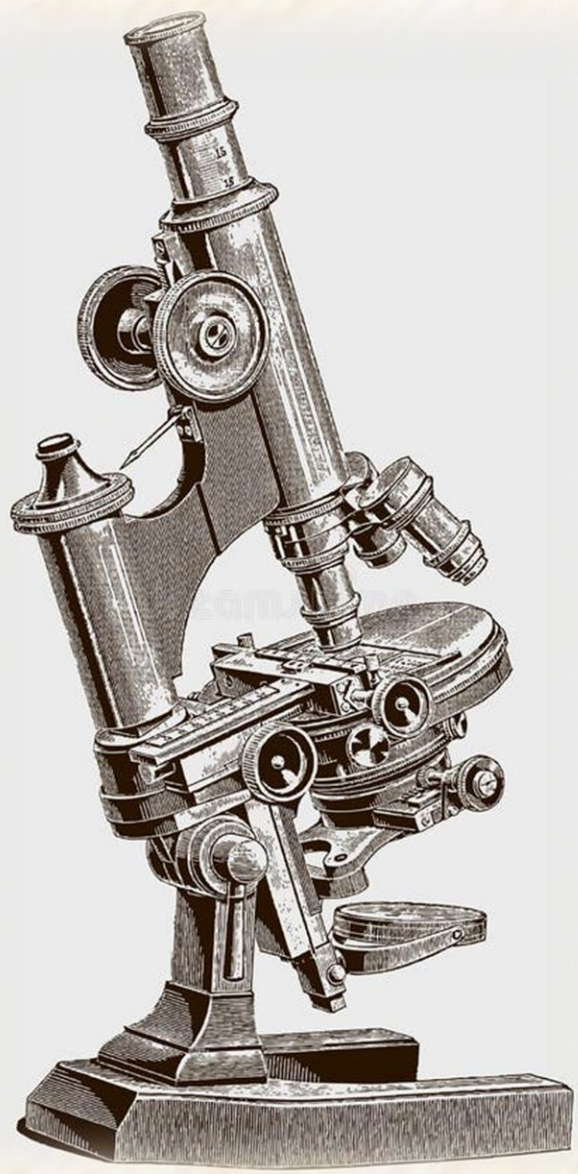
Plaquetas **$5 \times 10^9/L$** ↓

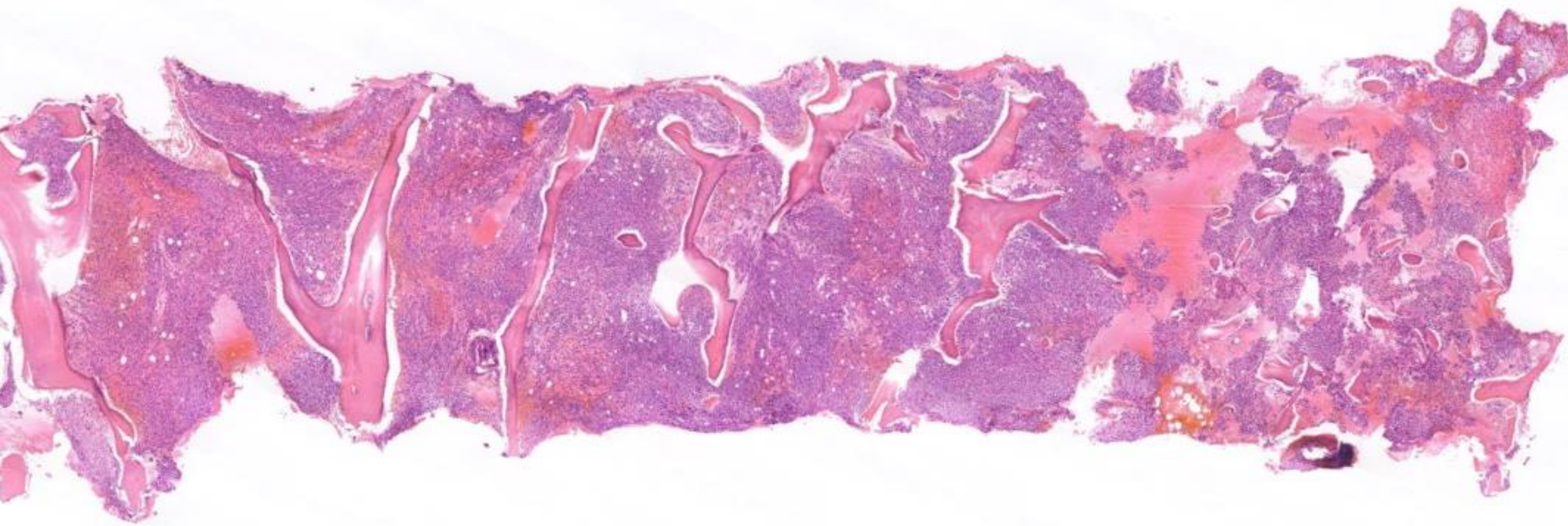
Frotis (SP) compatible con **reacción leucoeritroblástica**.



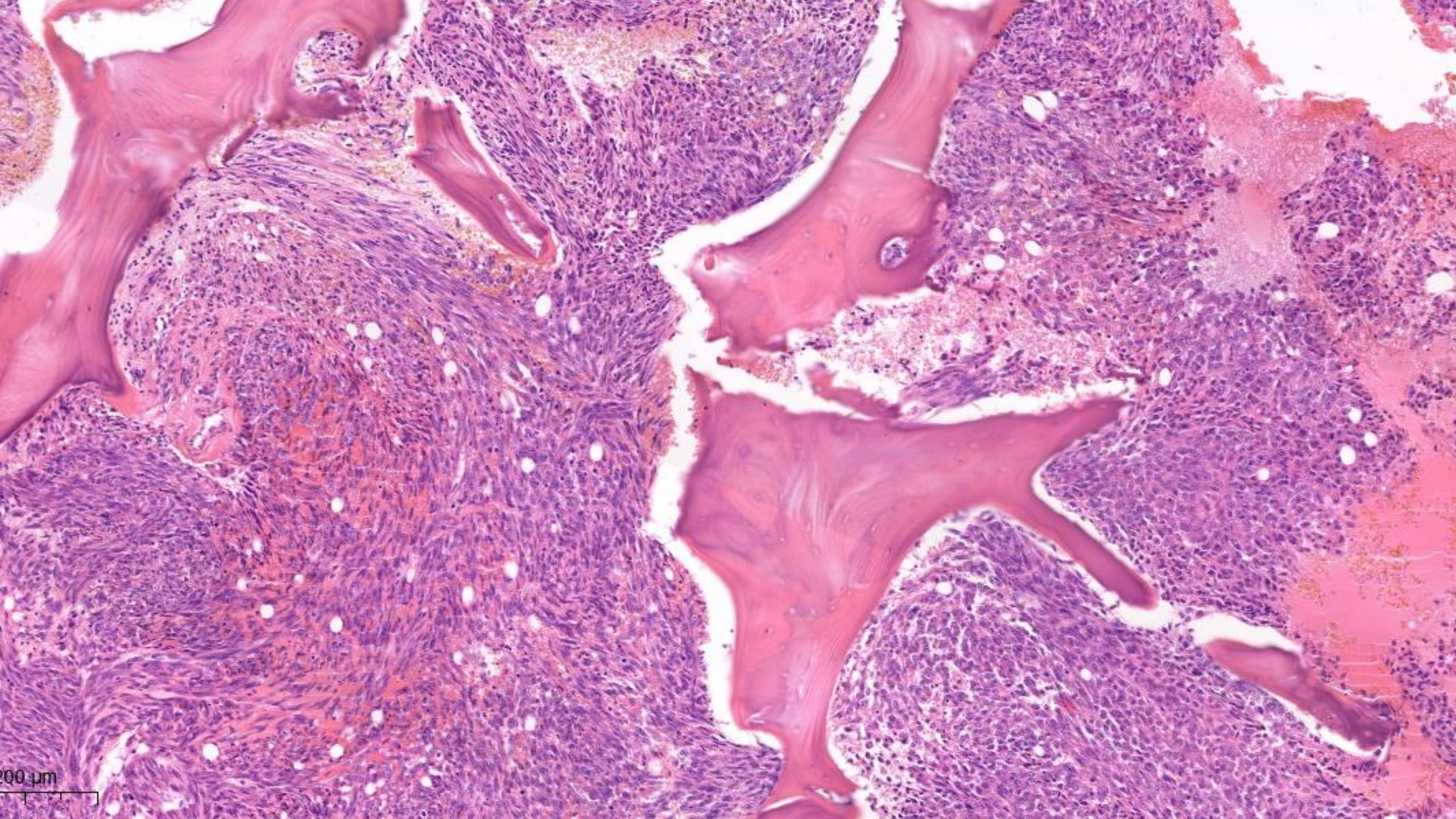


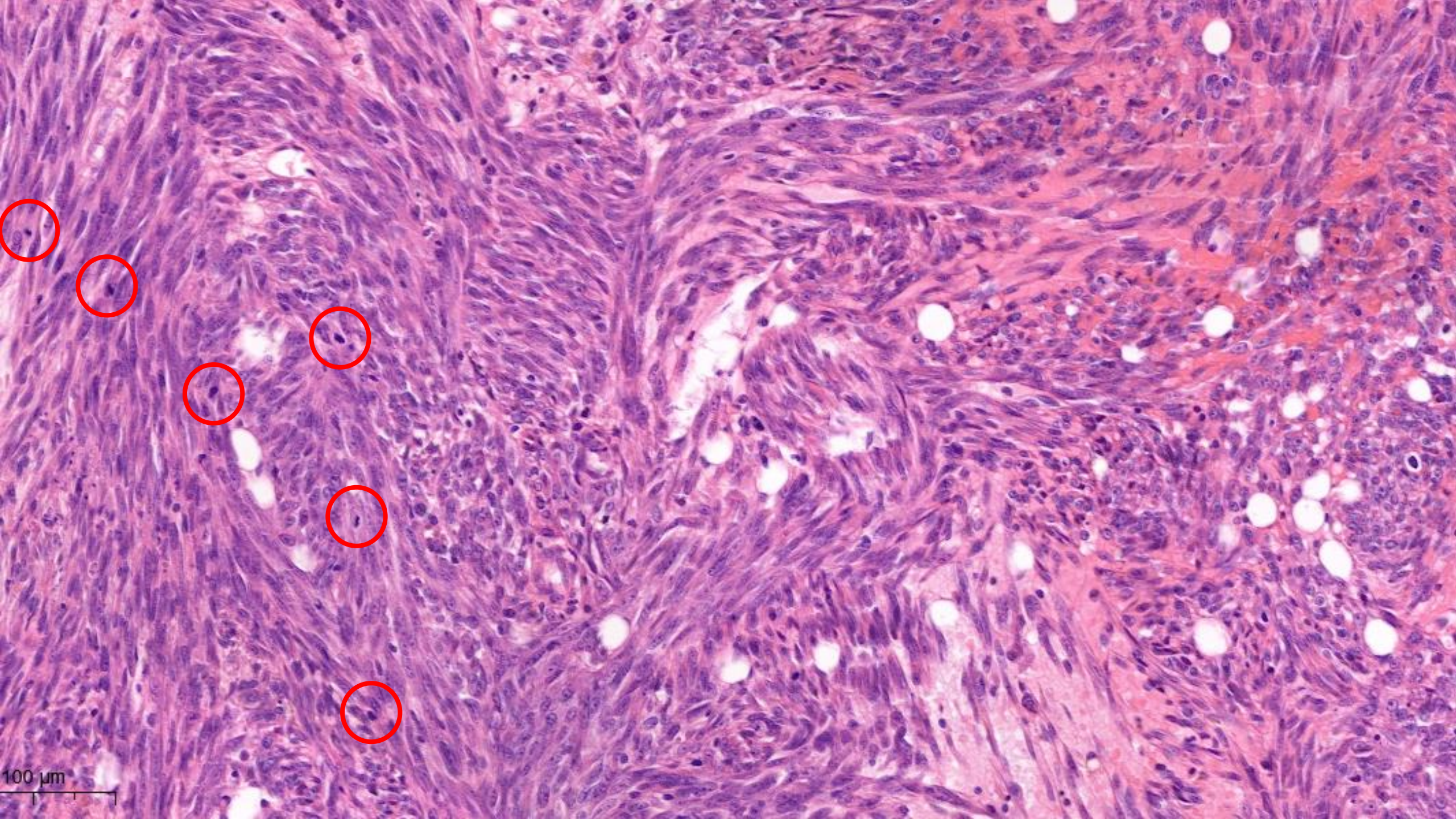
**DESCARTAR NEOPLASIA HEMATOLÓGICA y/o
INFILTRACIÓN DE MÉDULA ÓSEA**



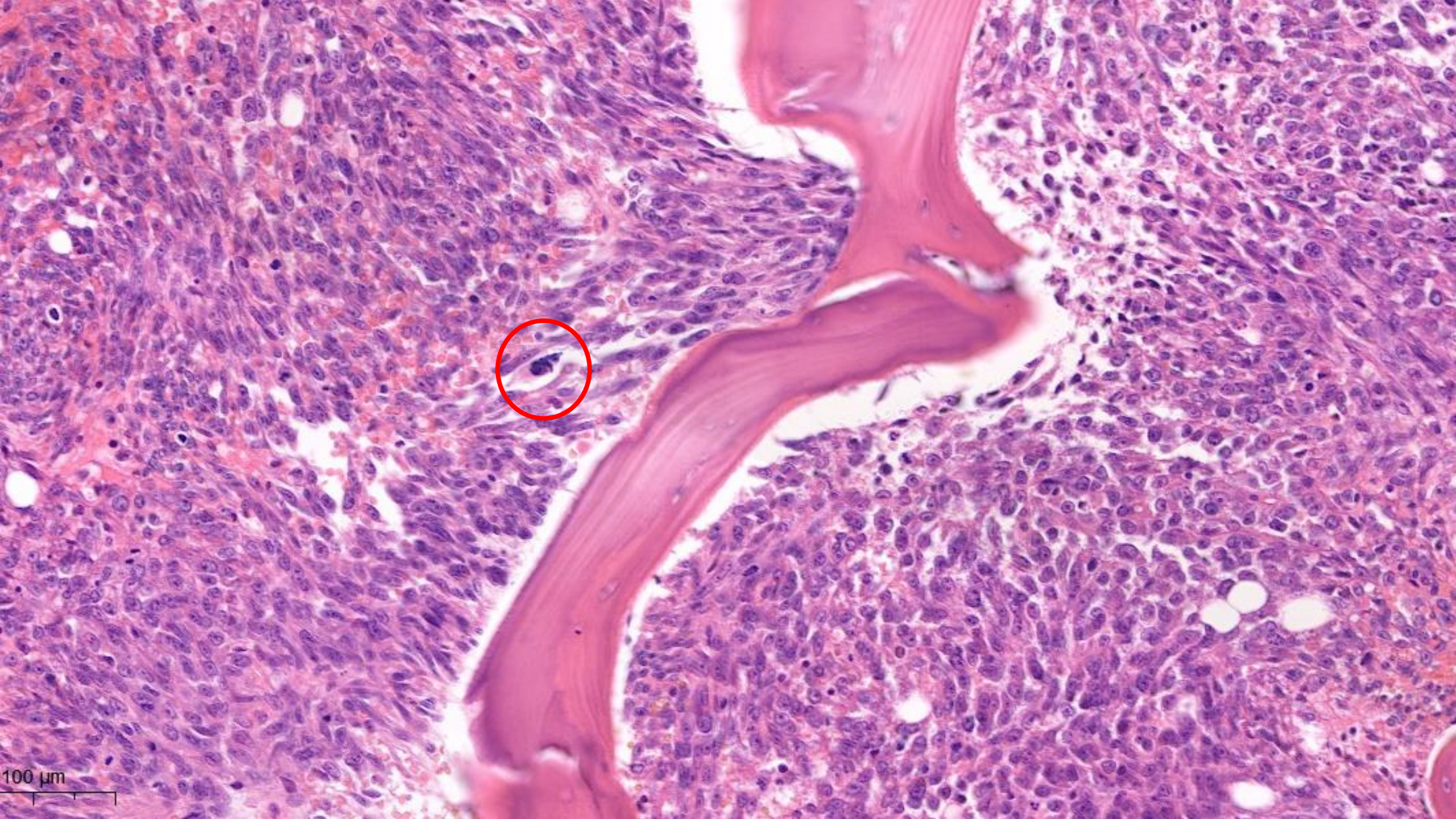


1000 μm

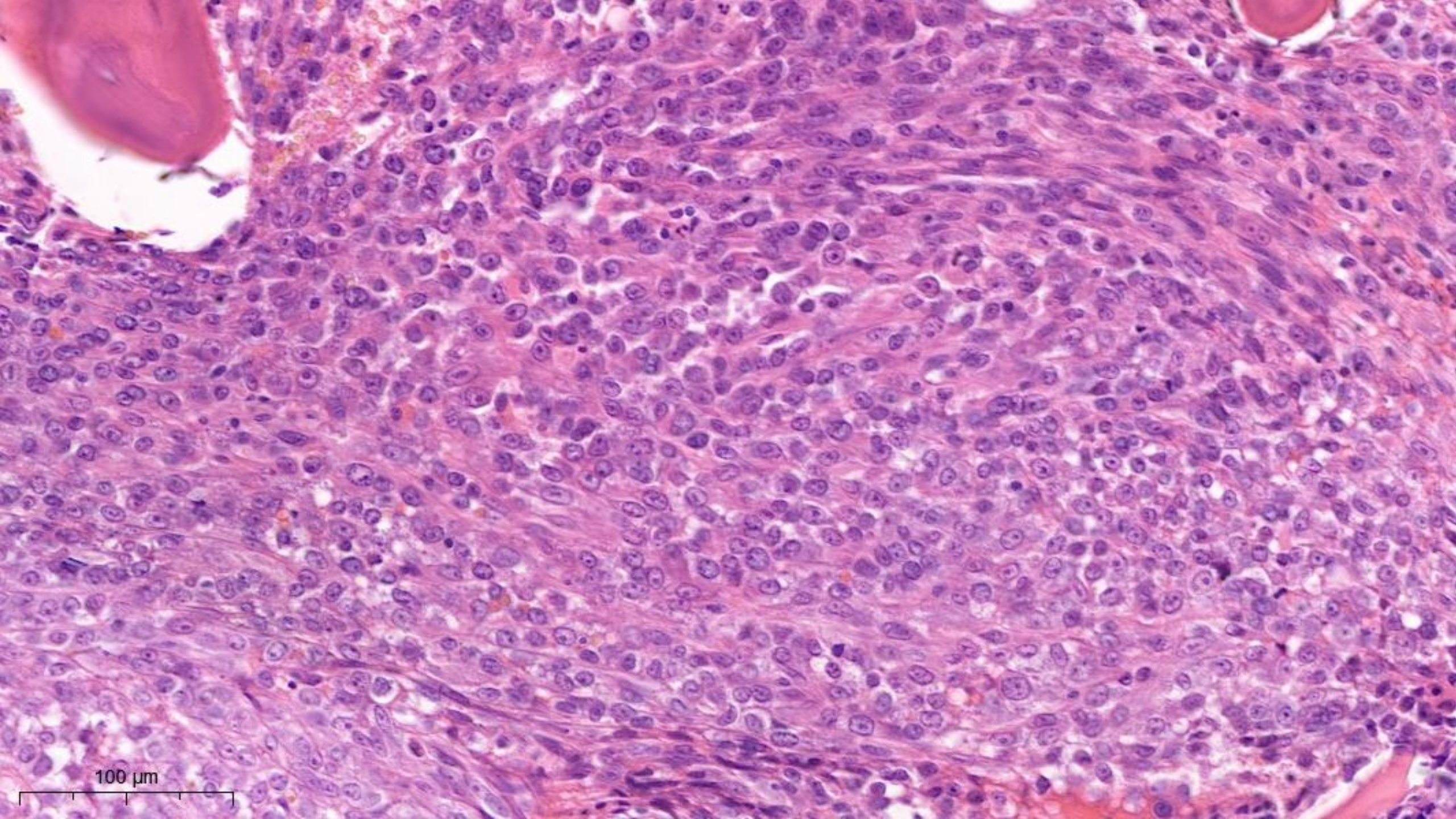


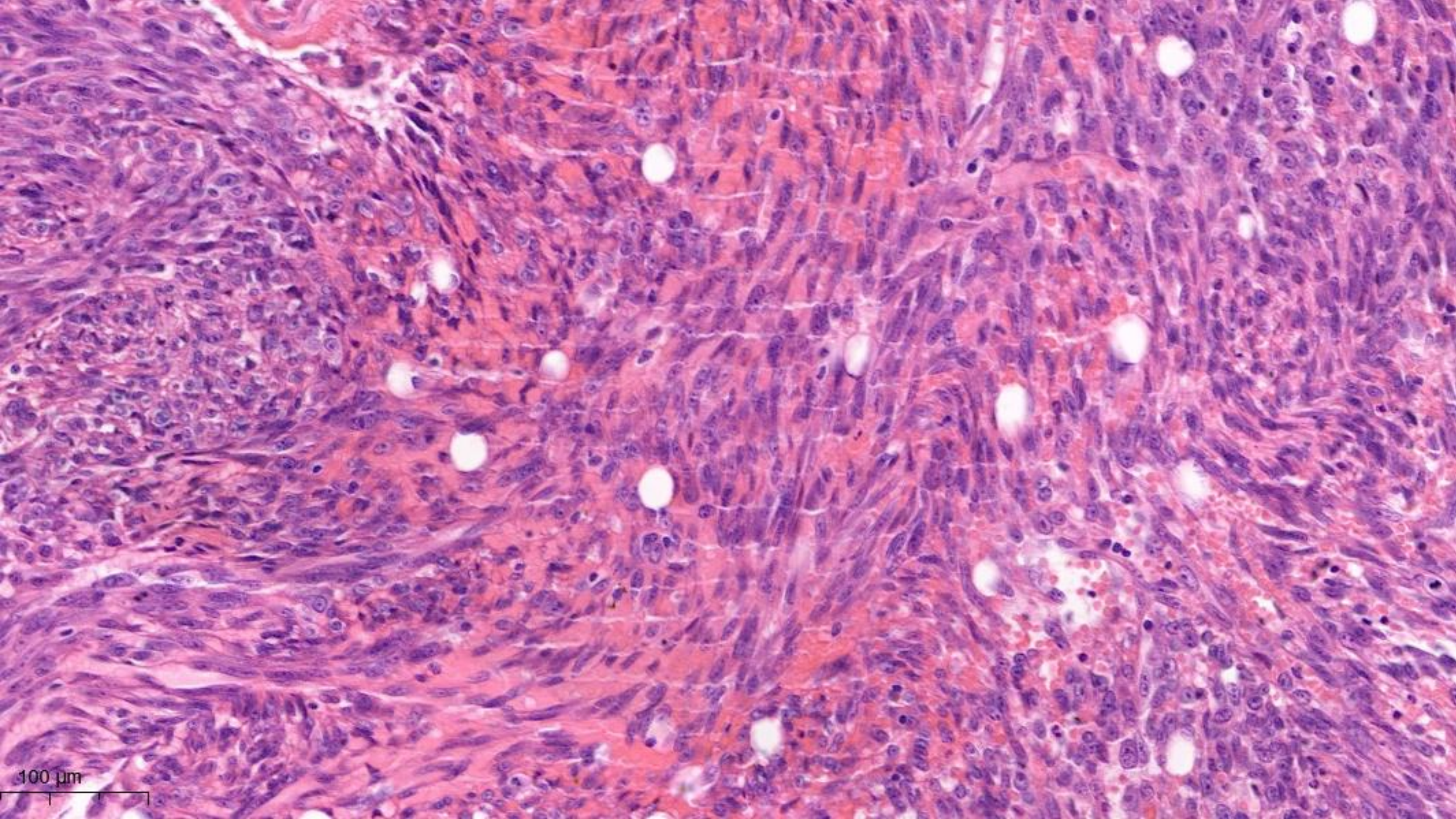


100 μm



100 μ m





100 μm

DIAGNÓSTICO DIFERENCIAL

Neoplasia de hábito **mesenquimal** de **alto grado** que infiltra masivamente la **médula ósea** y se caracteriza por presentar una morfología, predominantemente, **fusocelular** dispuesta con **patrón estoriforme**, y en menor medida, **epiteliode**. Entre los haces de células tumorales se aprecia marcada **extravasación de eritrocitos**. Se identifican frecuentes **figuras de mitosis**.

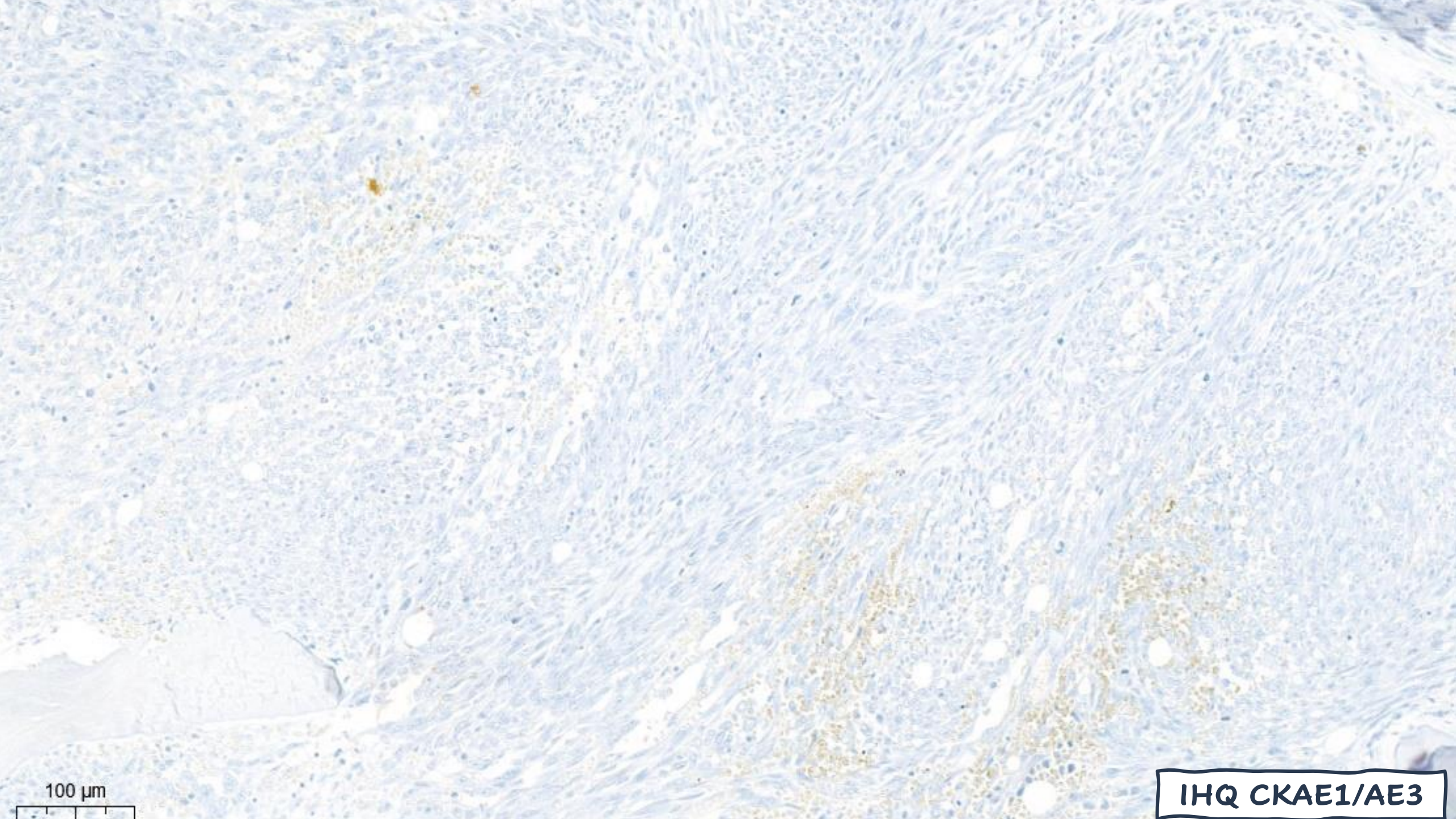
CARCINOMA
(Metaplásico de mama)

MELANOMA

LEIOMIOSARCOMA

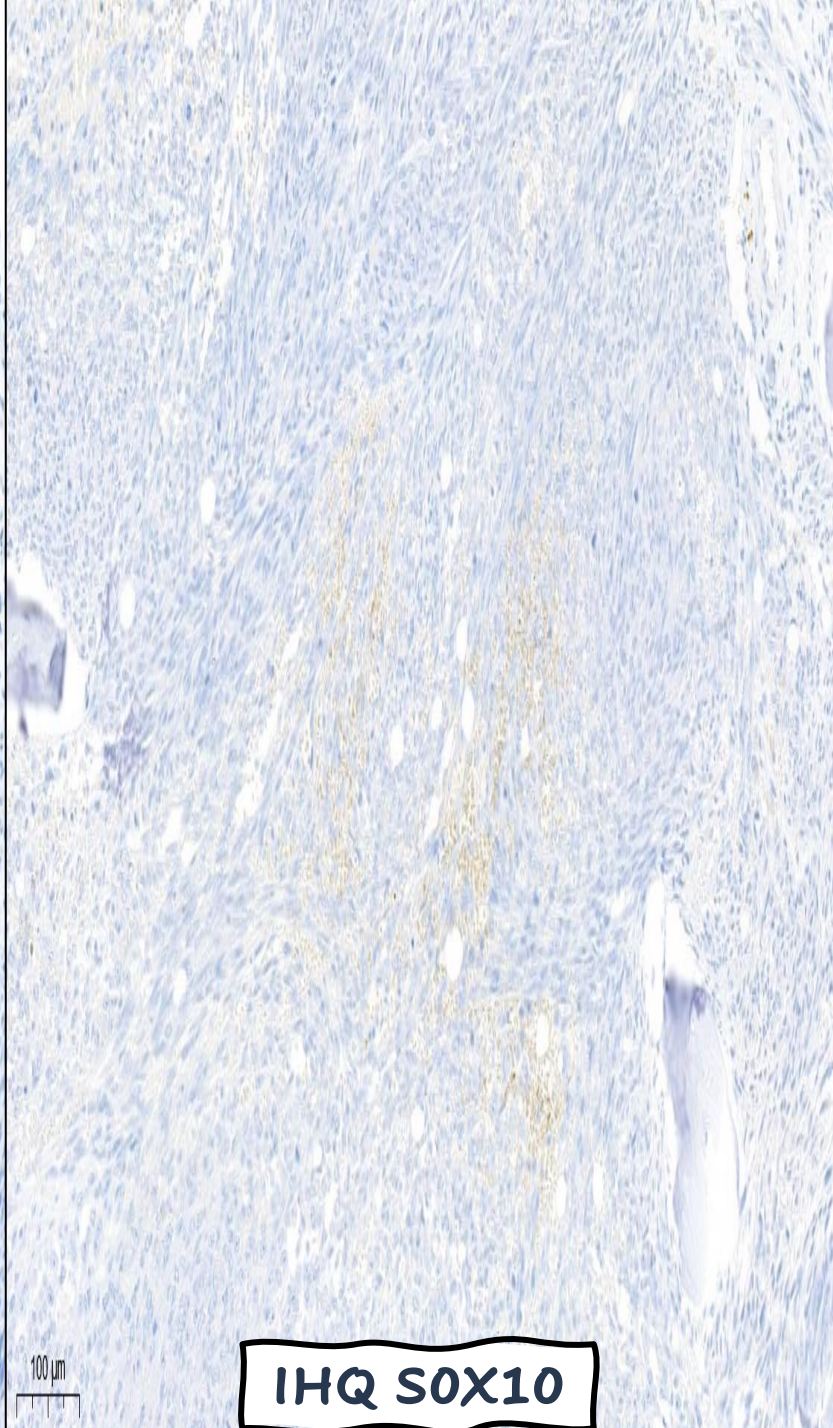
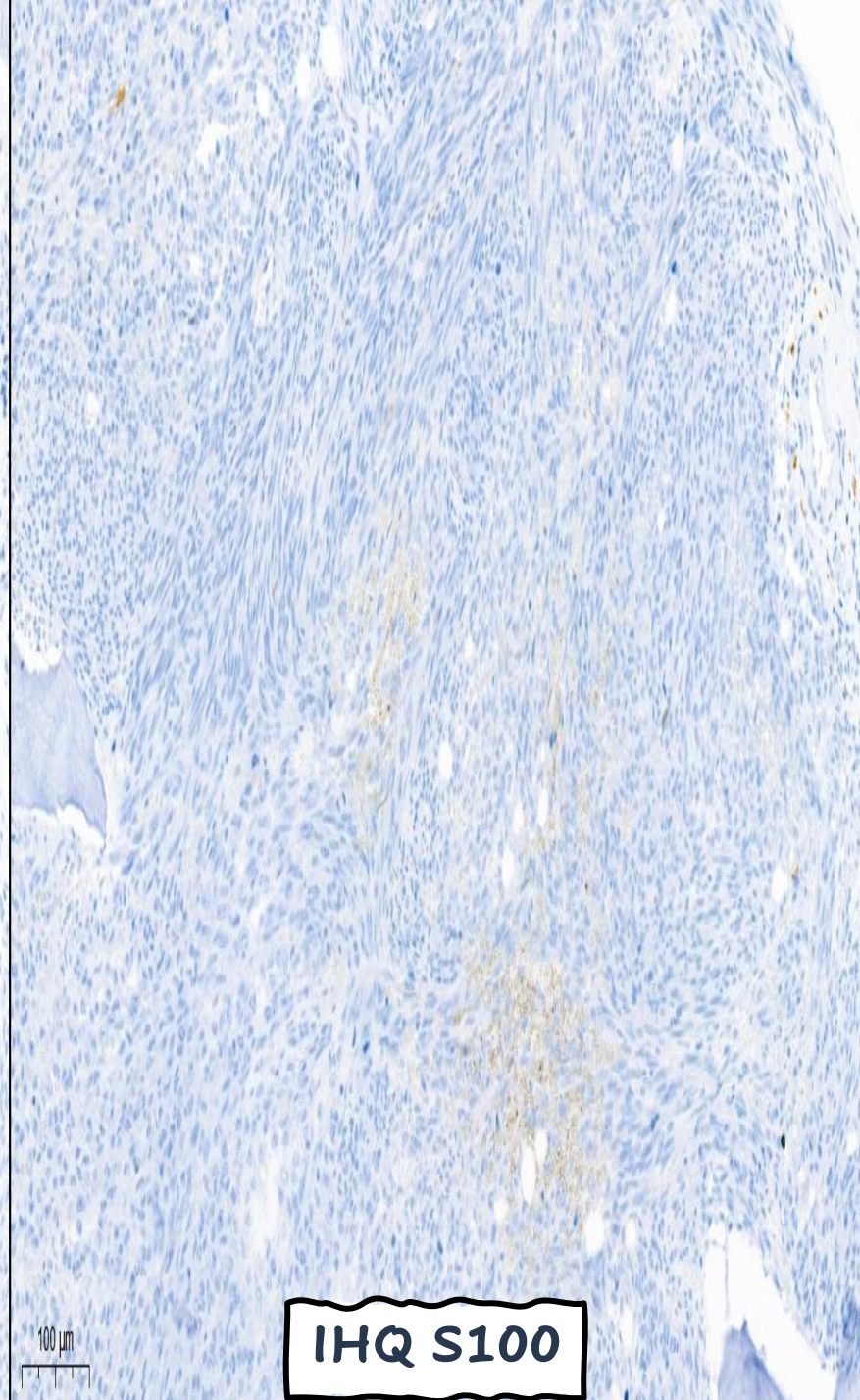
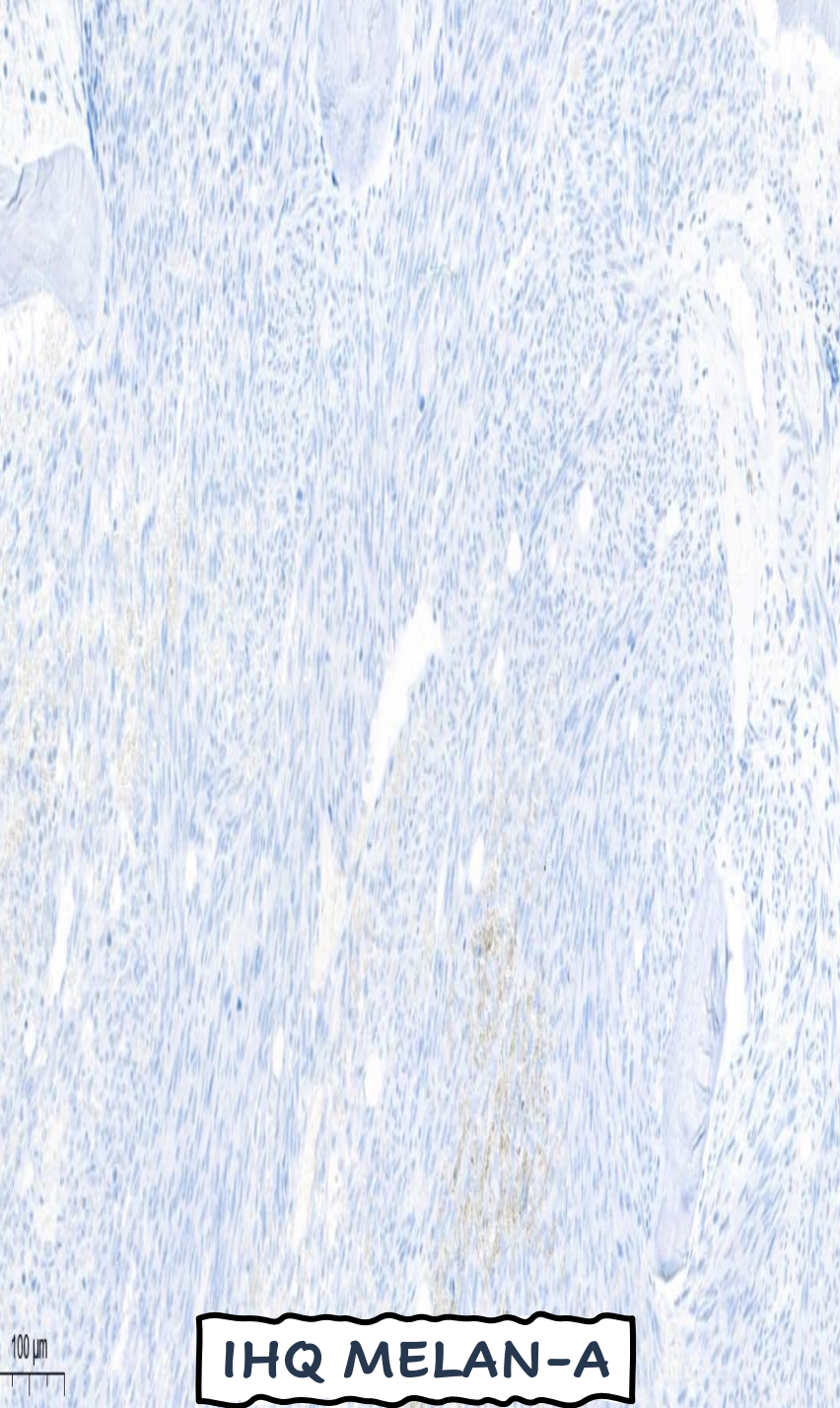
TUMOR MALIGNO DE VAINA DE NERVIIO PERIFÉRICO

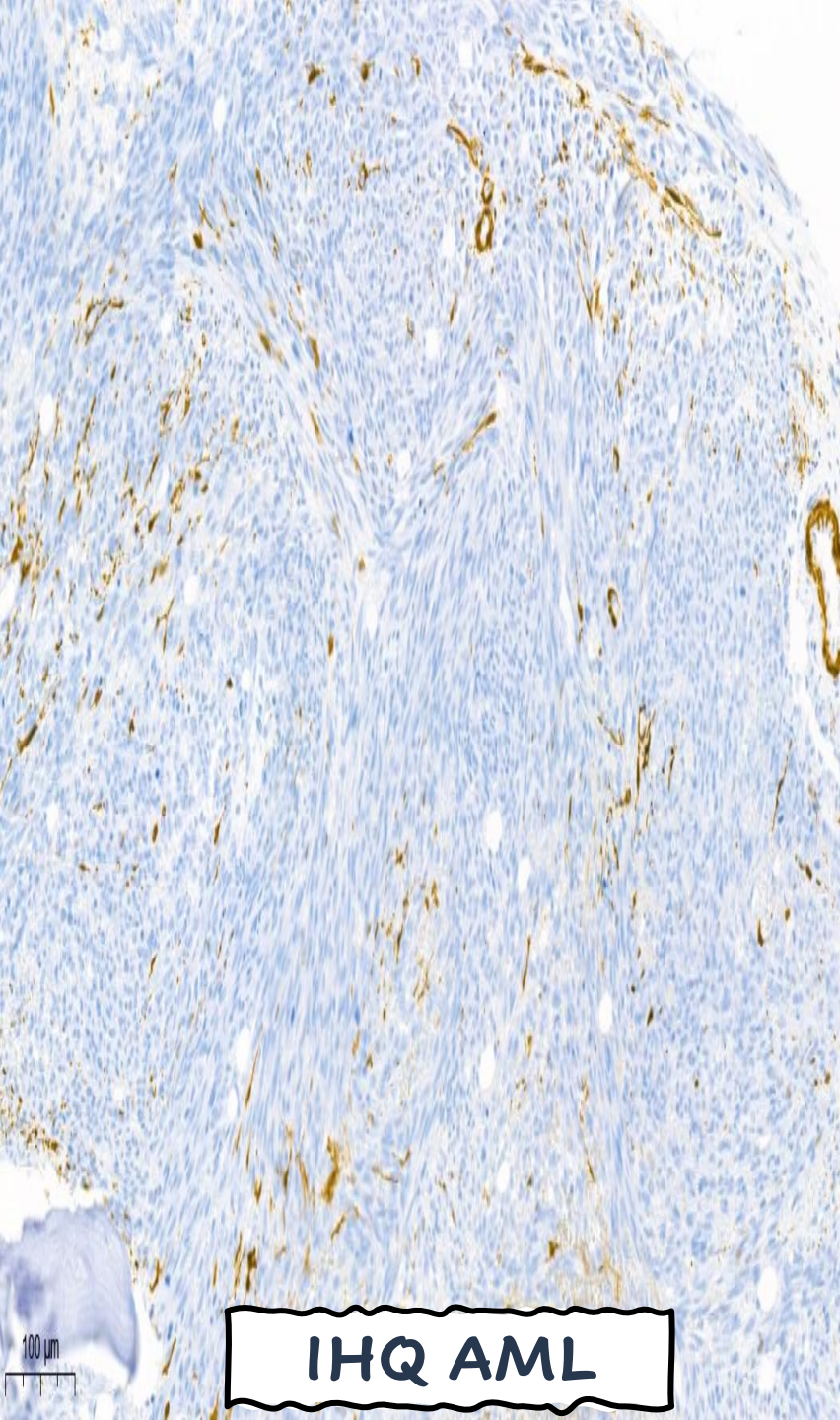
ANGIOSARCOMA



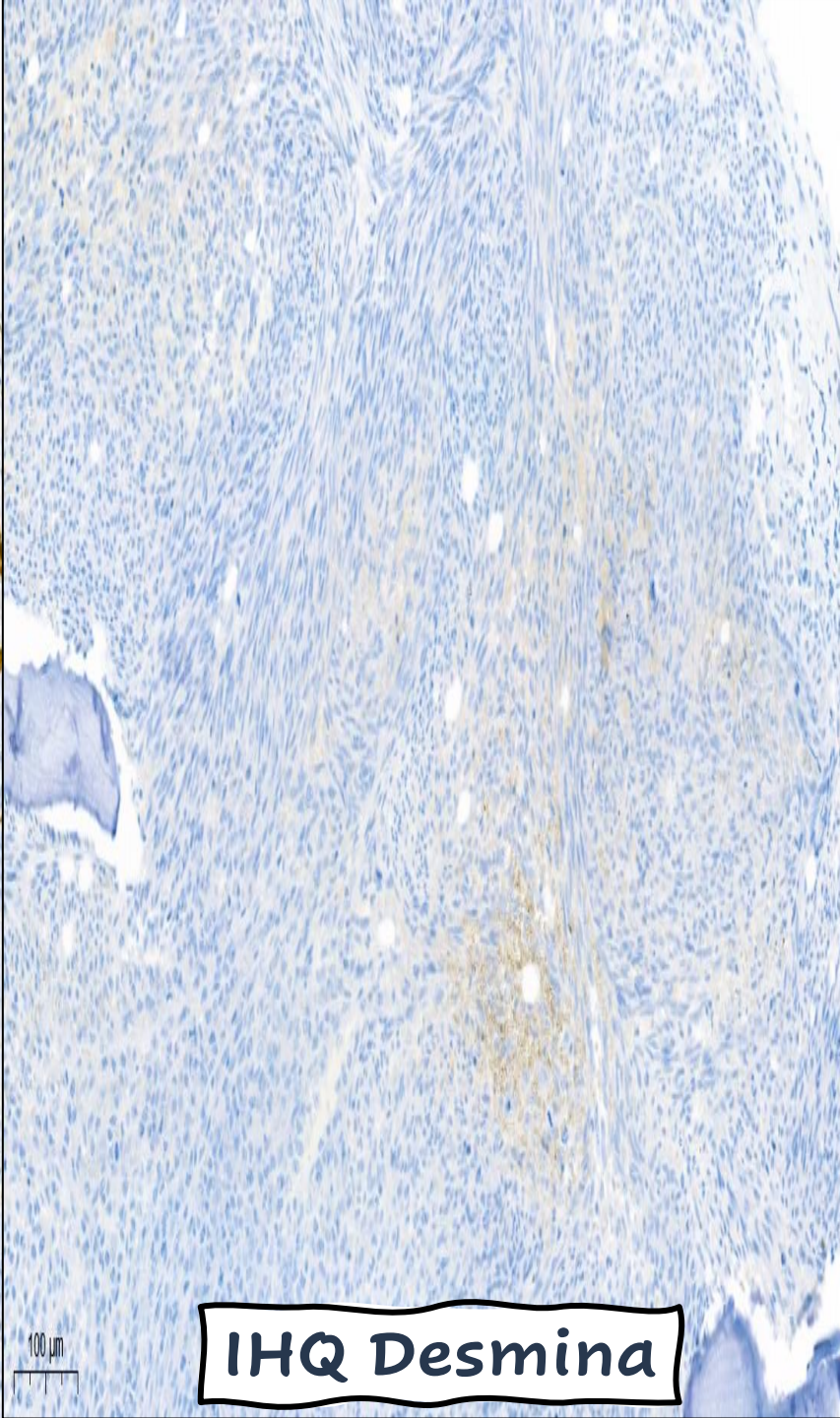
100 μm

IHQ CKAE1/AE3

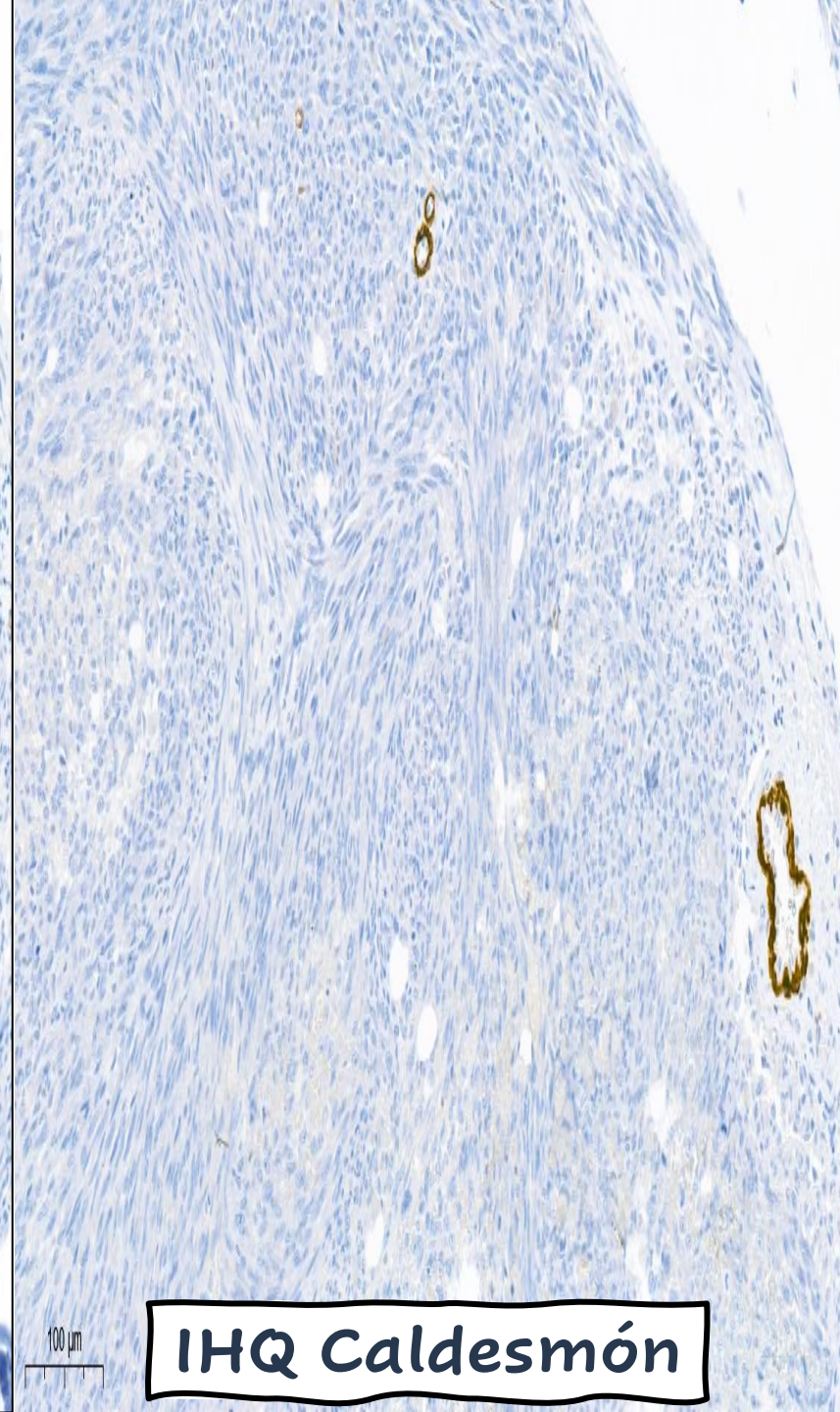




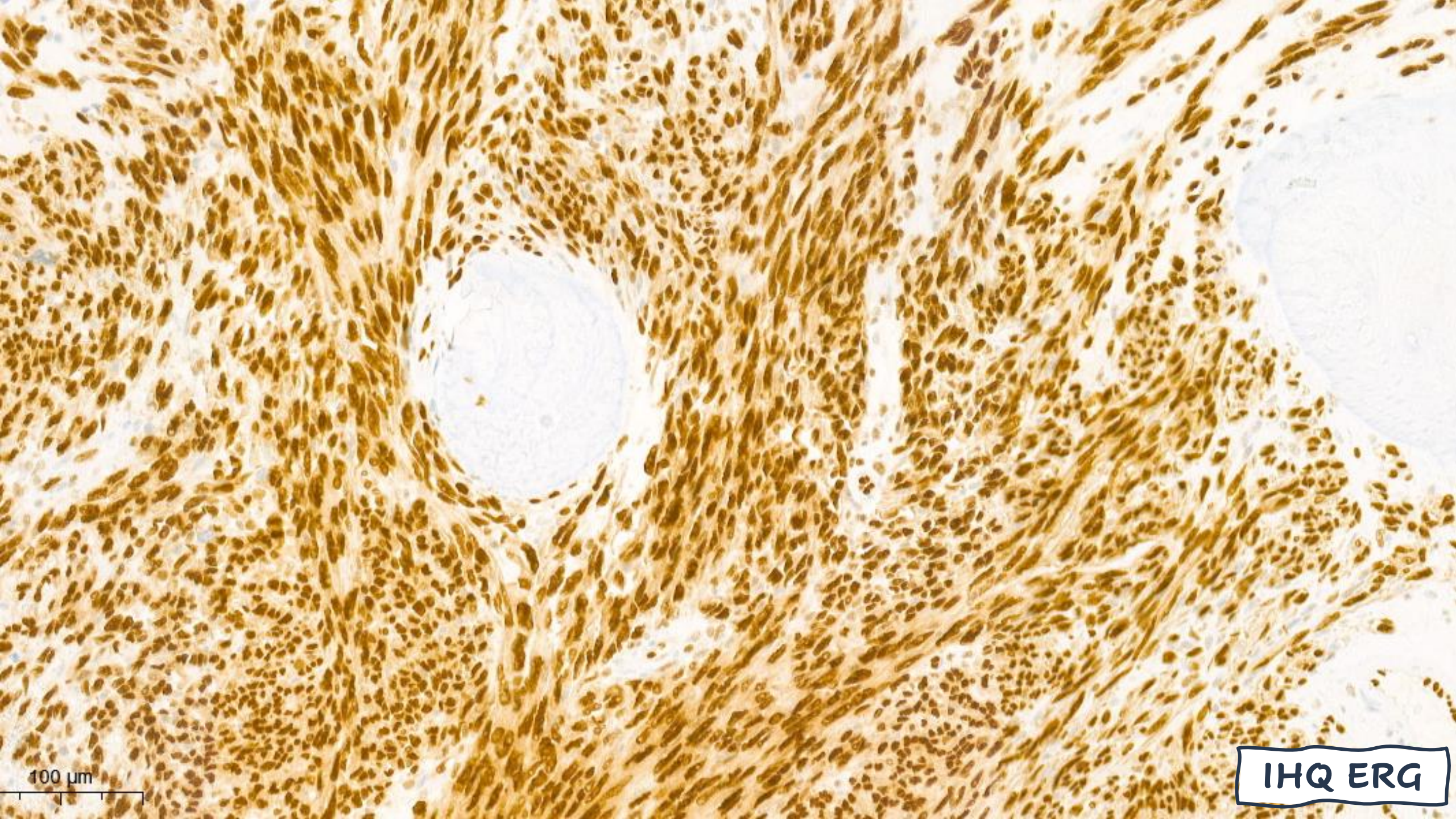
IHQ AML



IHQ Desmina

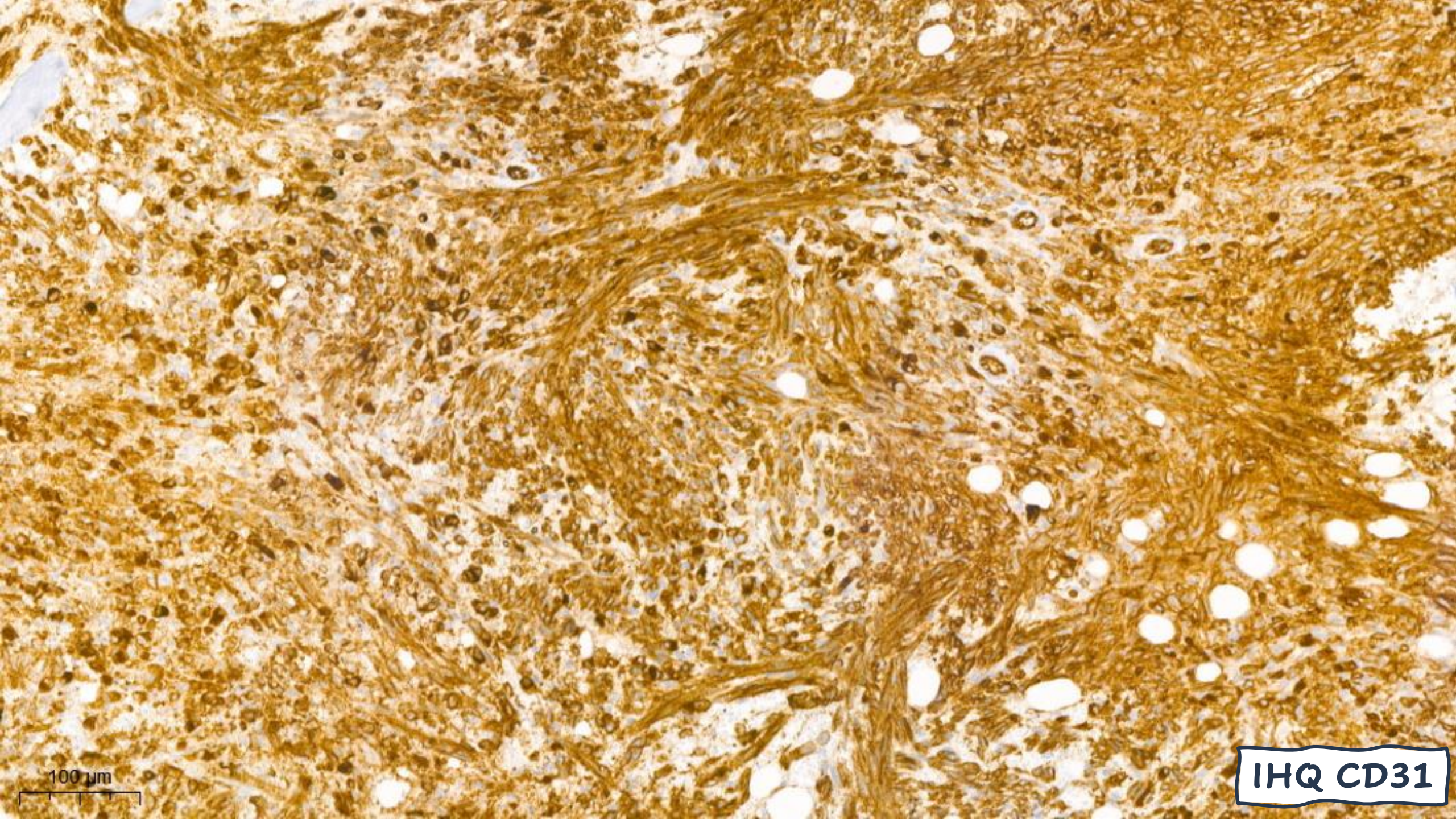


IHQ Caldesmón



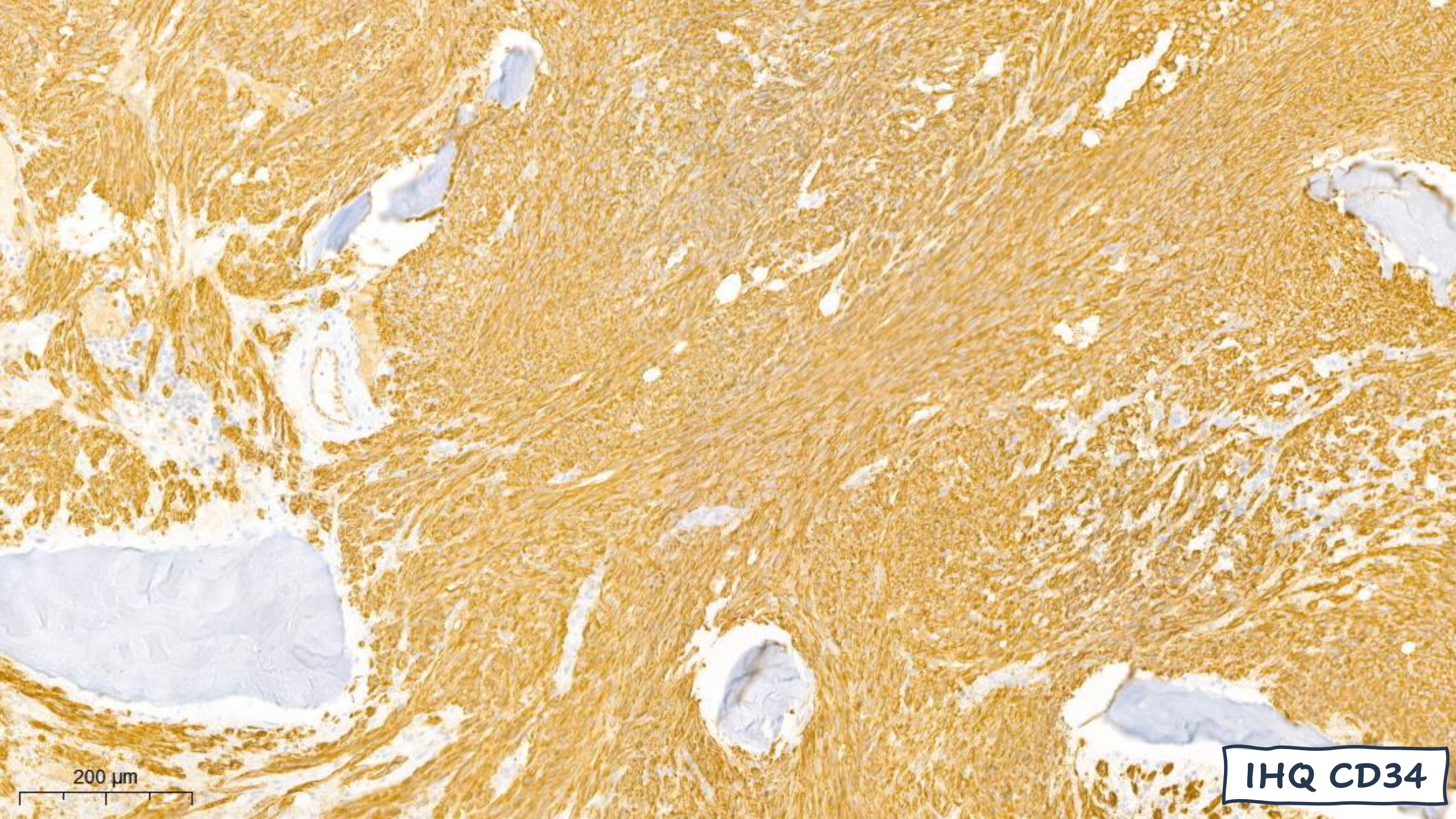
100 μm

IHQ ERG



100 μ m

IHQ CD31



200 μ m

IHQ CD34

DIAGNÓSTICO

CARCINOMA
(Metaplásico de mama)

MELANOMA

LEIOMIOSARCOMA

TUMOR MALIGNO DE VAINA DE NERVIO PERIFÉRICO

ANGIOSARCOMA

ANGIOSARCOMA

Neoplasia vascular maligna de comportamiento **agresivo**, tendencia a realizar **metástasis a distancia** y con **mal pronóstico**.

Localización:

50% cutáneos, tejidos blandos, mama, hueso, otras vísceras

Clínica:

Masas mal definidas, **dolorosas** +/- **hemorragia aguda**, y analíticamente +/- anemia y coagulopatías.

Etiología:

Incierta en la mayoría de los casos, aunque existe una minoría que son secundarios a **radiación** o a **linfedema crónico**.

Histopatología:

Variable **combinando** desde **áreas bien diferenciadas**, junto a **otras** de **alto grado**, indiferenciadas, de morfología **fusocelular** y/o **epitelioide**.

Alteraciones moleculares:

Genes relacionados con la angiogénesis y receptores específicos vasculares TK (**VEGFR2/3**).

Los angiosarcomas secundarios : **amplificación cMYC** (FISH)

HISTORIA CLÍNICA

ANTECEDENTES MÉDICOS:

❑ Hipertensión arterial, dislipemia, diabetes mellitus

❑ 2007 Meningioma en T8-T9

❑ 2010 Carcinoma infiltrante NOS, triple negativo en mama derecha, con metástasis ganglionares

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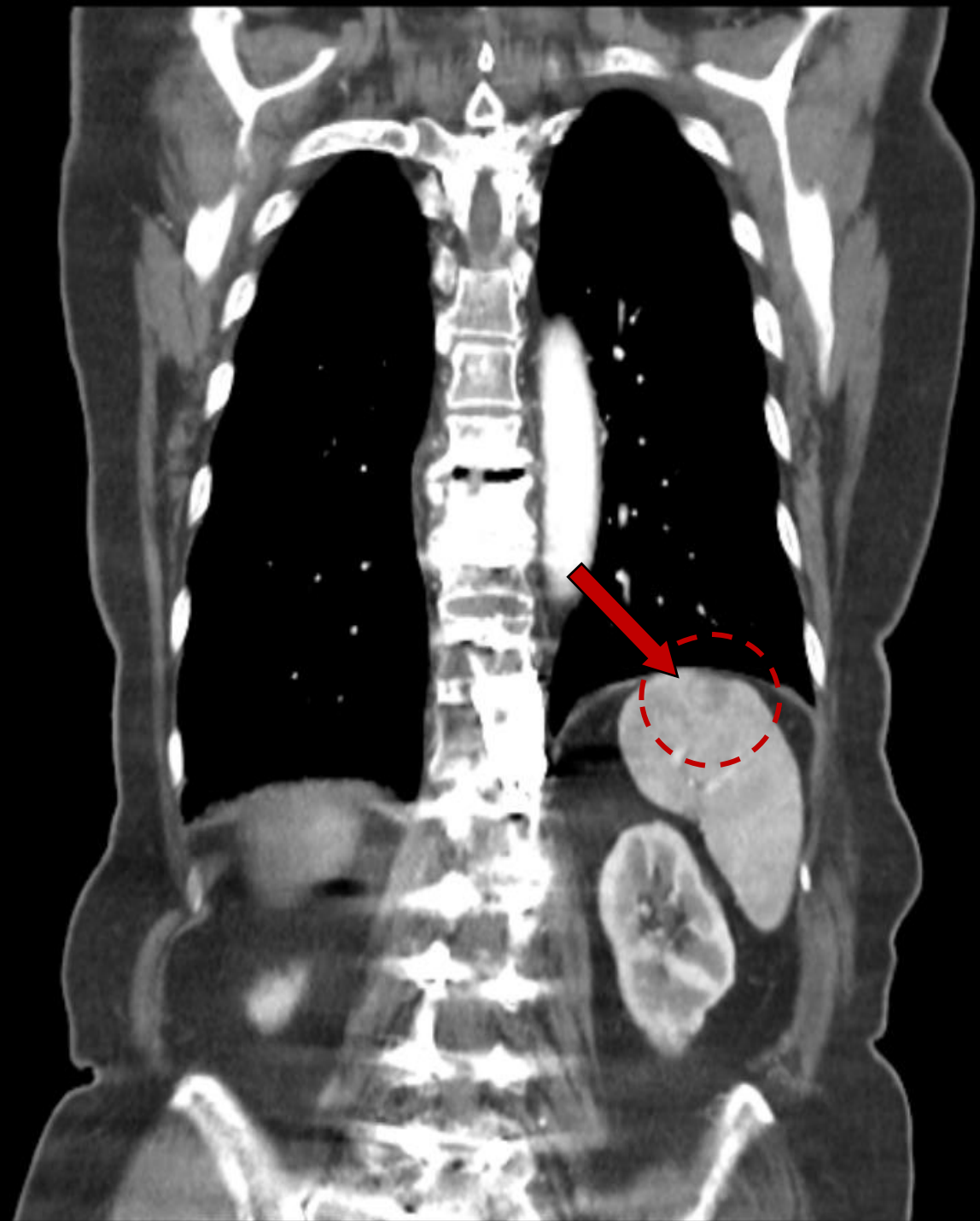
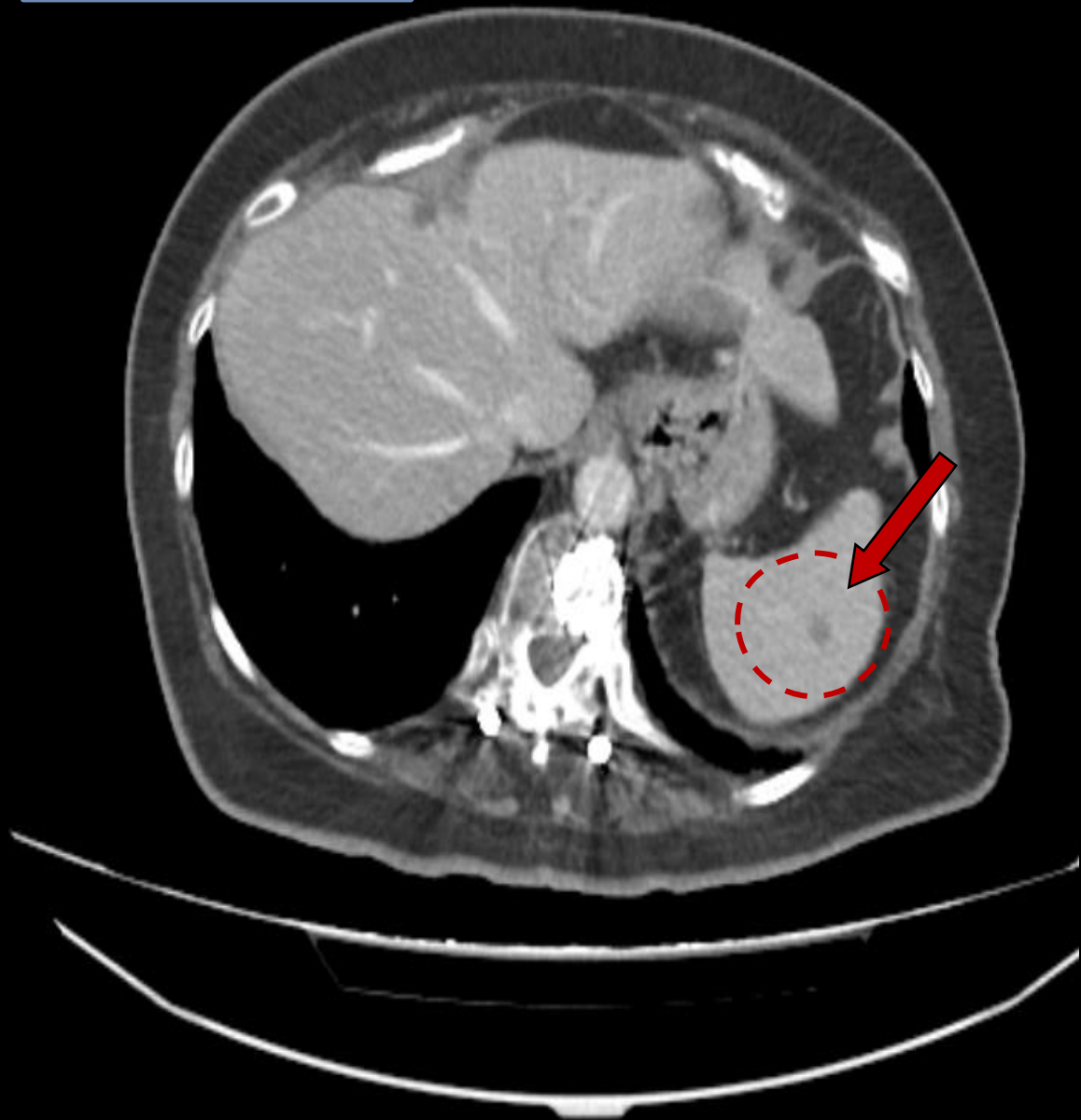


RADIOTERAPIA

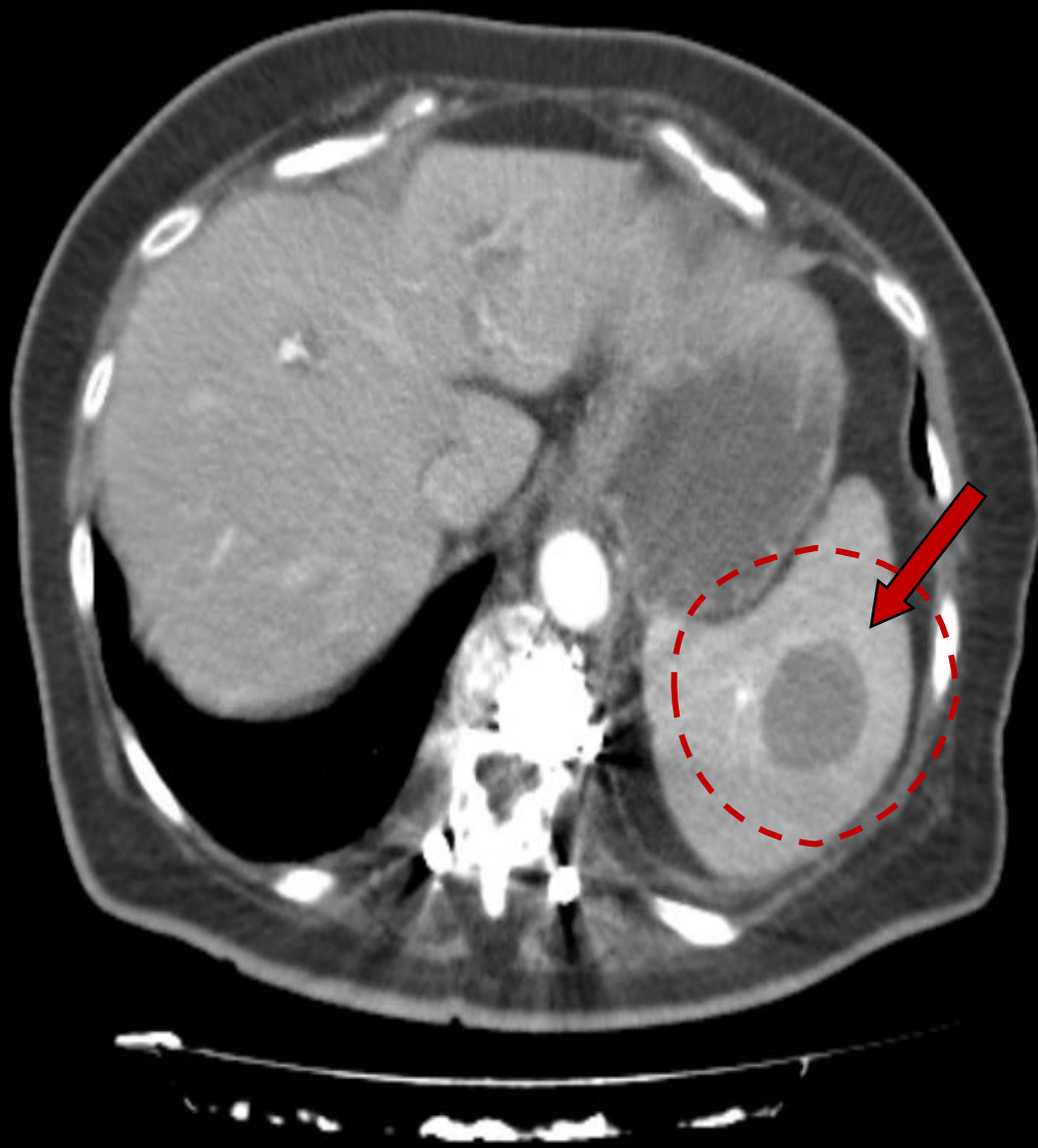


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AXILAR

TAC 2021



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ANGIOSARCOMA PRIMARIO ESPLÉNICO CON INFILTRACIÓN DE MÉDULA ÓSEA

XV.

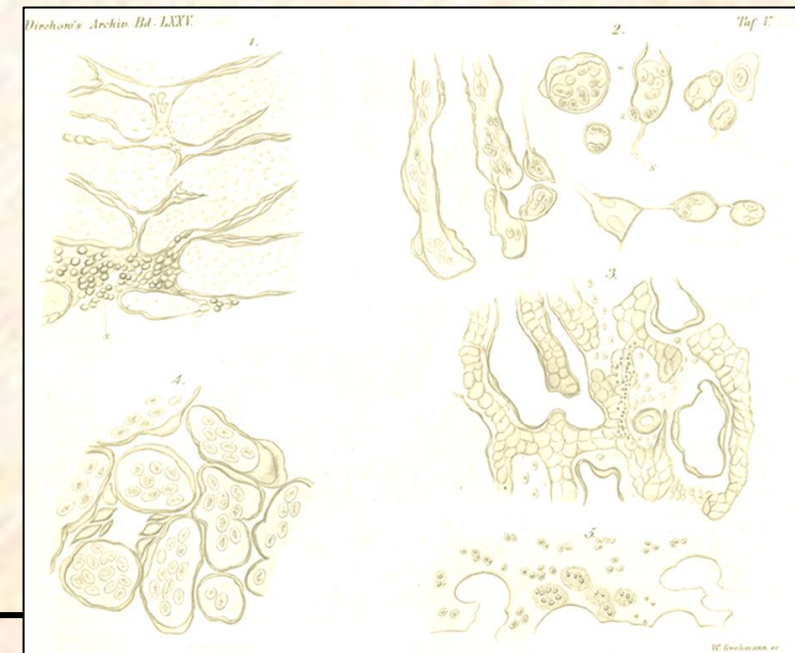
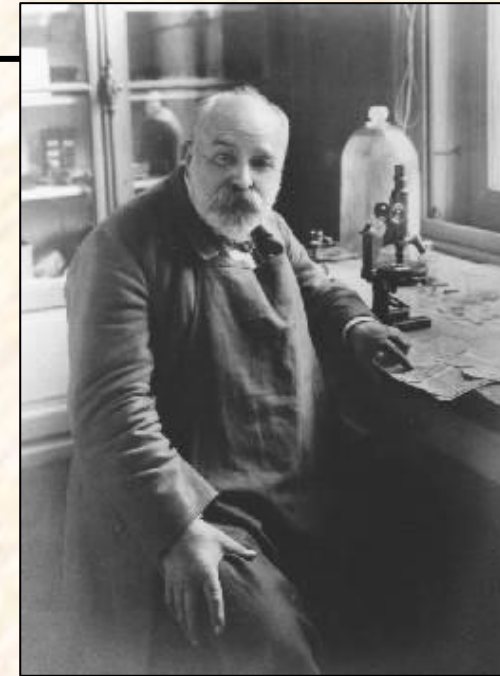
Casuistische Beiträge zur Lehre von den Gefässgeschwülsten.

Von Prof. Theodor Langhans in Bern.

1. Pulsirende cavernöse Geschwulst der Milz mit metastatischen Knoten in der Leber. Tödlicher Verlauf binnen 5 Monaten.

(Hierzu Taf. V.)

Christian Beer, von Trub, 30 Jahre alt¹⁾. B. entstammt einer durch Körperstärke berühmten Schwingerfamilie des Emmenthals; sein Vater war ein berühmter Schwinger, zwei seiner Oheime mehrere Jahre die Schwingerkönige der Schweiz. Seine noch lebende Mutter ist ein Bild blühender Gesundheit. Er selbst, ebenfalls ein guter Schwinger, war von kleinem Wuchs und gedrungenem Körperbau, besass aber grosse Körperstärke und von Jugend auf vortreffliche Gesundheit, die besonders seit der Pubertät nie anders als durch kleine vorübergehende Störungen alterirt wurde. In früher Jugend soll er Scharlach und einmal einen acuten Rheumatismus ohne weitere Folgen überstanden haben.



Primary Angiosarcoma of the Spleen A Clinicopathologic Study of 40 Cases

S. Falk, M.D., J. Krishnan, M.D., and J.M. Meis, M.D.

Journal of Surgical Oncology 2005;92:312–316

Primary Angiosarcoma of the Spleen

JUN-TE HSU, MD,¹ HAN-MING CHEN, MD, PhD,¹ CHIN-YEW LIN, MD,² CHUN-NAN YEH, MD,^{1*}
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²Department of Pathology, Chang Gung Memorial Hospital, Keelung, Taiwan

J Gastrointest Surg (2012) 16:863–867

DOI 10.1007/s11605-011-1773-6

CASE REPORT

Littoral Cell Angioma and Angiosarcoma of the Spleen: Report of Two Cases in Siblings and Review of the Literature

Michael Kranzfelder · Margit Bauer · Thomas Richter ·
Martina Rudelius · Martin Huth · Peter Wagner ·
Helmut Friess · Josef Stadler

Open Access Case Report

DOI: 10.7759/cureus.5804

Splenic Angiosarcoma with Bone Marrow Involvement Initially Diagnosed as Systemic Mastocytosis: A Case Report

Paul Plantinga¹, Sadaf Rahman², Kamilia Rizkalla³, Jessica G. Shepherd⁴, Chai W. Phua⁵

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MOLECULAR AND CLINICAL ONCOLOGY 20: 16, 2024

Metastatic splenic angiosarcoma presenting with anemia and bone marrow fibrosis mimicking primary myelofibrosis: A case report and literature review

MEIQING WU, ZHONGQING LI, LIN LUO, WEIHUA ZHAO and JUN LUO

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Case Report

Splenic Angiosarcoma Diagnosed on Bone Marrow Biopsy: Case Report and Literature Review

Asaph C.J. Levy, MD^{a,*}, Miriam DeFilipp, MD^a, Morgan Blakely, MD^b, Saeed Asiry, MD^c, Susan Jormark, MD^c, Allen Goodman, MD^a

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Int J Clin Exp Pathol 2015;8(11):14040-14044

www.ijcep.com /ISSN:1936-2625/IJCEP0016487

Original Article

Primary splenic angiosarcoma with fever and anemia: a case report and literature review

Rui Deng^{1*}, Weilong Chang^{1*}, Xiuli Wu², Junhua Chen¹, Kaixiong Tao¹, Peng Zhang¹

¹Department of Gastrointestinal Surgery, Union Hospital, Tongji Medical College, Huazhong University of Science and Technology, Wuhan, China; ²Department of Pathology, Union Hospital, Tongji Medical College, Huazhong University of Science and Technology, Wuhan, China. *Equal contributors and co-first authors.

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Case Report

DOI: 10.4274/tjh.2013.0049



Primary Splenic Angiosarcoma Revealed by Bone Marrow Metastasis

Kemik İliği Metastazı ile Açığa Çıkan Primer Splenik Anjiosarkom

Soumaya Anoun¹, Sofia Marouane², Asmae Quessar¹, Said Benchekroun¹

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Pathology – Research and Practice 200 (2004) 551–555

www.elsevier.de/prp

TEACHING CASE

Bone marrow metastasis of angiosarcoma

Chen Wang^{*}, Rola Rabah, Martin Blackstein, Robert H. Riddell

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Received 11 February 2002; accepted 4 May 2004

MOLTES GRÀCIES
