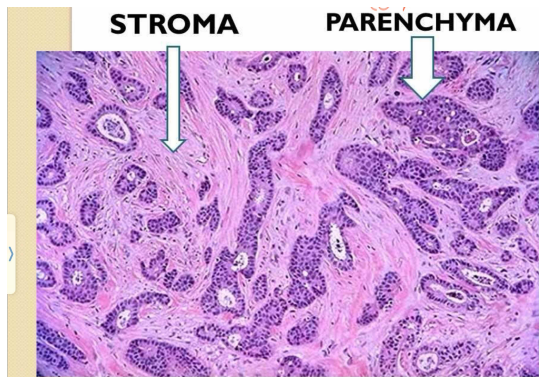


paranchyma: connective tissue → classification by stroma → blood vessel spreading cancer



تصنيفات الparanchyma على حسب نوع type of cancer
 OMA ← benign connective
 Sarcoma ← malignant connective



HEPATIC ADENOMA

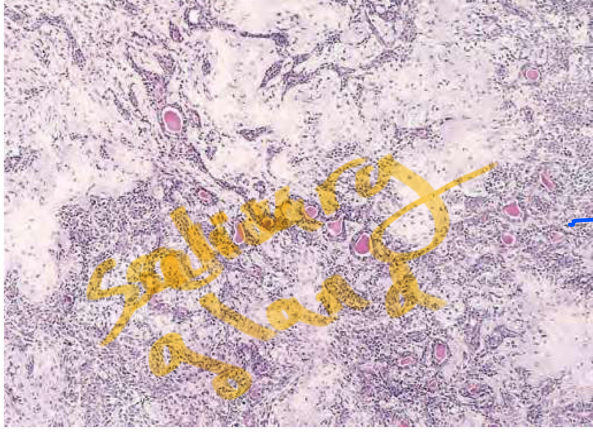
Adenoma → gland
 cancer ال موقع ال يكون فوق ال (glands) ، شدة قلة الخلية البنية ال (gland)

* benign + * epithelial

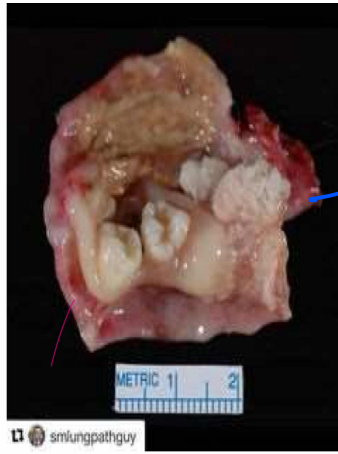
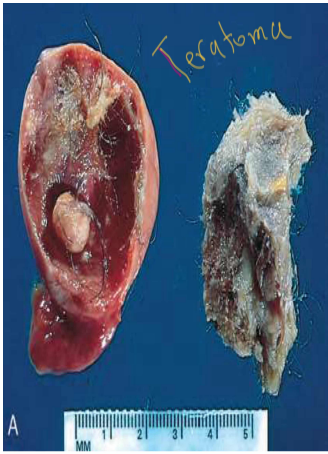


polyp* → مثل ال (GI) ، و خاص بوضع ال epithelial (mucous) ال (مخاطبة)

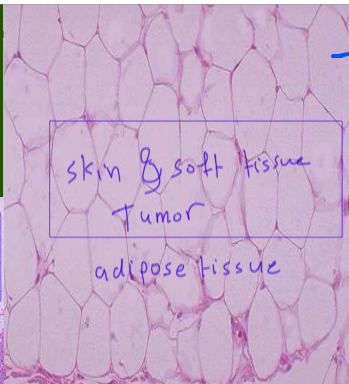
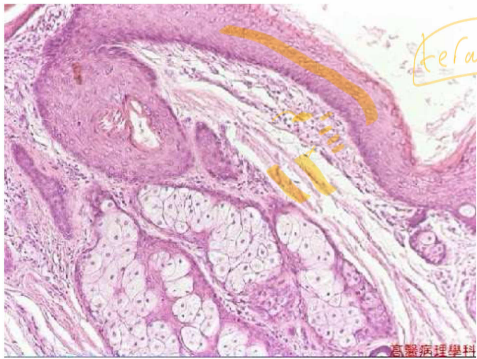
pleomorphic adenoma .



pleomorphic adenoma → هذا ال cancer يكون poly أو mixed (epithelial) و (connective) و قد واحد فقط هو salivary gland



Teratoma:- هذا ال cancer يتلخ من ال 3 layers germ cell
 (miso, ecto, endo
 وعلته ألاتي فيه (teeth, hair, bone)



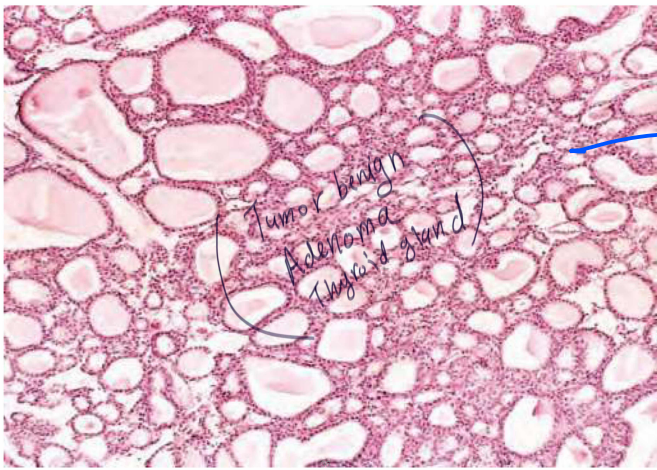
Lipoma → cancer in Adipos tissue

لكنه امي يجروه انه well differentiate ليعني ما يقدر ا يفر عن ال (in divisional cell) الخلية الا صلبة.





Leiomyoma :-
 → Cancer بنوع (benign) و خاص
 با Smooth muscle زي uterus

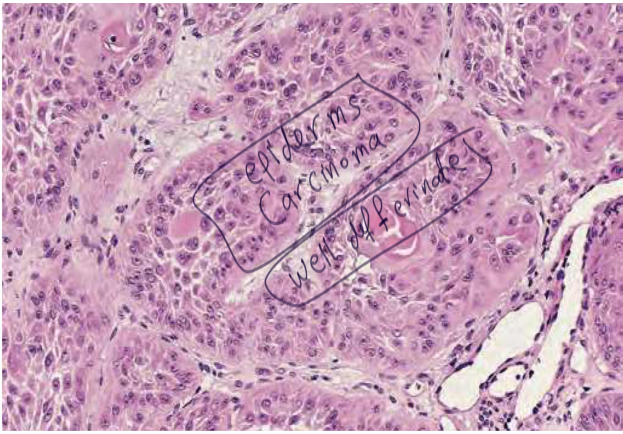


Adenoma of thyroid gland :-
 هذا Cancer بهو well differentiate
 و كثير يبيح individual
 انه ينتج (more hormones) مع ان
 Normal

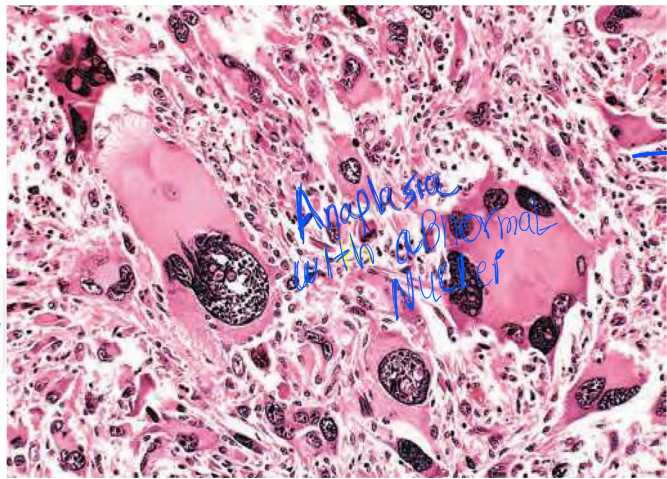


Adenocarcinoma :-
 in Colon
 هذا Cancer بهو well differentiate
 و تكثر منه well differentiate
 Normal

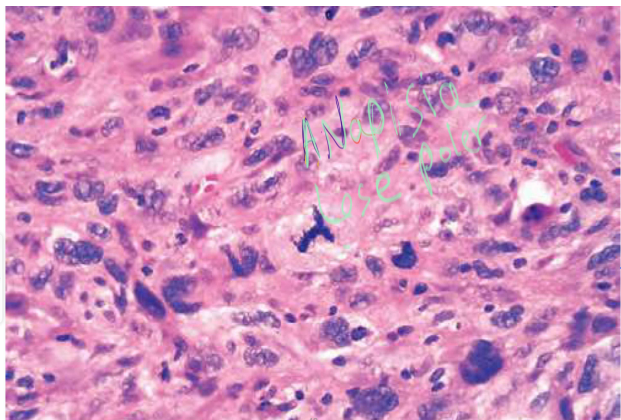
هو جوديه اكثر اي با Glands
 و اس squamous epithelium



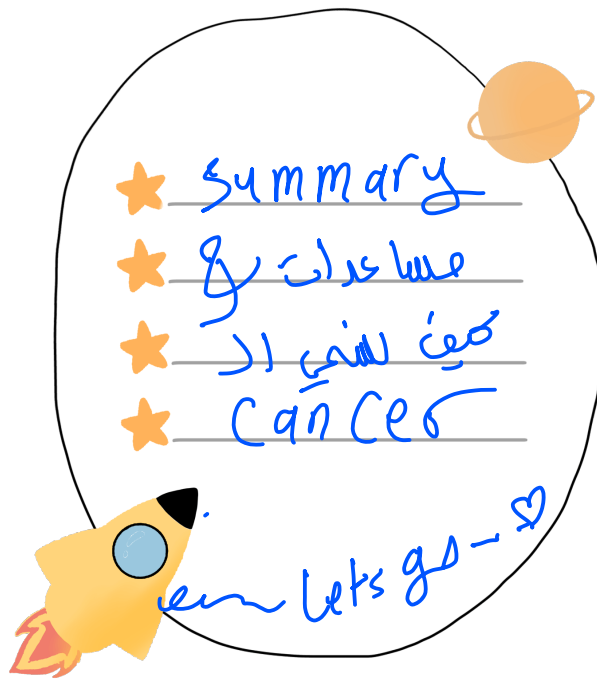
→ epiderms carcinoma :-
well differentiate .



→ Anaplasia :- *
Lack of differentiate
و لاقون فيه (more changes in normal)
مثل ان
Largia shape ← nucleus
high chromatin ←



→ Anaplasia :-
نكون في ان cell أكثر من nucleus
و يكون فاقد ان polarity
ان percentage بالنسبة لا cytoplasm
و ان Normal 1:1
1:4 / 1:6
1:1

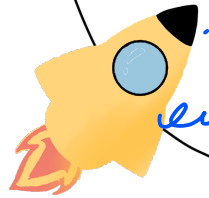


★ summary

★ g: classmate

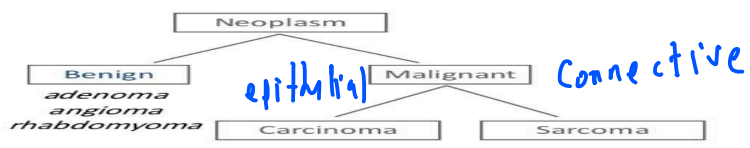
★ العلماء

★ Cancer

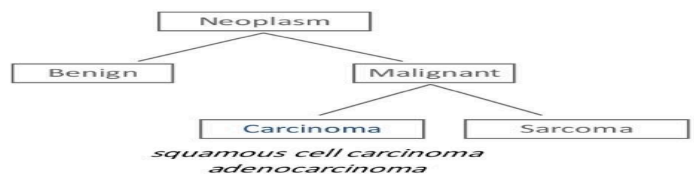


em lets go -

Nomenclature

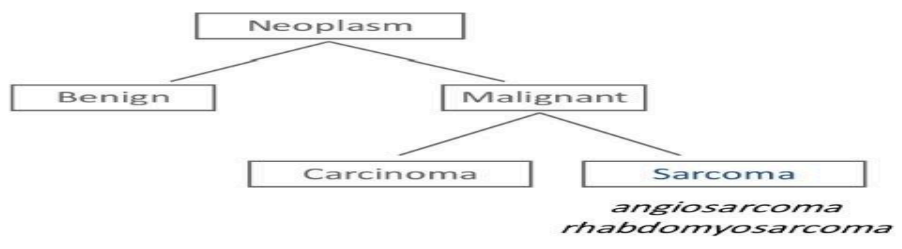


Nomenclature



adenocarcinoma

Nomenclature



Know these names!

Tissue of origin	Benign	Malignant
Fibrous tissue	Fibroma	Fibrosarcoma
Fat	Lipoma	Liposarcoma
Cartilage	Chondroma	Chondrosarcoma
Bone	Osteoma	Osteogenic sarcoma
Blood vessels	Hemangioma	Angiosarcoma
Mesothelium		Mesothelioma
Hematopoietic cells		Leukemia
Lymphoid cells		Lymphoma
Squamous epithelium	Squamous cell papilloma	Squamous cell carcinoma
Glandular epithelium	Adenoma Papilloma Cystadenoma	Adenocarcinoma Papillary adenocarcinoma Cystadenocarcinoma
Smooth muscle	Leiomyoma	Leiomyosarcoma
Skeletal muscle	Rhabdomyoma	Rhabdomyosarcoma
Melanocytes	Nevus	Melanoma

Naming of Benign tumors

(1) Benign mesenchymal tumor. (Cell of origin of tumor + Suffix **Oma**)

*Fibrous tissue(**fibroma**): (benign tumor of fibrous tissue)

*Cartilage (**chondroma**): benign tumor of cartilage

*Bone ,osteoid (**osteoma**)

* Smooth muscle:(**leiomyoma**)

*Lipocytes (**lipoma**).

Exceptions :Exception to above mentioned rules include tumors that are always malignant such as :

Lymphoma: Malignant tumor of lymphoid tissue .

Melanoma :Malignant tumor of melanocytes .

Seminoma & dysgerminoma : Malignant tumors of primitive germ cells.

2-Malignant connective tissue tumors: (Sarcoma) :

Prefix (origin)+ suffix (sarcoma) .

e.g. Bone :Osteosarcoma ,

Adipose tissue : Liposarcoma,

Blood vessels : Angiosarcoma,

Smooth muscle :Leiomyosarcoma,

Skeletal muscle :Rhabdomyosarcoma .

Cartilage : Chondrosarcoma .

الحوا ليغ
الي ركن عليها
الدكتور + فونغ
سؤال



■ *Non neoplastic masses :*

1-**Hamartoma** : Tumor like malformation (mass or nodule) in which there is abnormal mixing of normal native tissue components of the organ ,either in the form of change in quantity or arrangement of tissue elements: e.g. **Lung Hamartoma** ,most haemangioma, melanocytic nevi.: usually develop during fetal development .

2-**Choristoma** : Mass composed of normal cells or tissue found in a wrong location (*Ectopia*) : Different types of tissue, ectopic to the region. e.g. Meckle's Diverticulum,(ectopic pancreatic &gastric tissue) , Salivary tissue in lymph nodes .

■ Both are present at birth & do not have malignant potential

47

Cytological Features of Dysplasia

- *1-Increased nuclear size: ↑ N/C ratio(nuclear/cytoplasmic)*
- *2- Pleomorphism* :Variation in nuclear & cell size and shape .
- *3-Loss of cell differentiating features (Giant cells & bizarre cells with multiple nuclei)*.
- *4- Hyperchromatism* :Increased nuclear DNA content .
- *5-Mitosis*: Often numerous : increase proliferative activity & distinctly atypical (tripolar)
- *6-Cellularity* :Increase degree of cellularity ..
- *7-Loss of polarity* in an epithelial surface (loss of orientation &disarray of tissue architecture).
- *8-Prominent nucleoli*.

61

أنا أريدك، لعلو

كل أسئلة كذا

ها هي المجازة

لينا lets go...♡



(Mohammad kh Abu lemon) اسئلة من
A 4 The lack of metastases suggests a lower stage and a better prognosis.

physician notes a 3 cm firm, irregular, non-movable mass located in the upper outer quadrant of her left breast on physical examination. A fine needle aspiration of this mass is performed. Cells obtained from the mass are examined cytologically and are consistent with infiltrating ductal carcinoma. The mass is removed with lumpectomy along with an axillary lymph node dissection

586 Mohammad kh Abu lemon, 11:03 PM

(Mohammad kh Abu lemon) اسئلة من
اختبار سرى
Which of the following findings will best predict a better prognosis for this patient?

- 31% The tumor cells are strongly estrogen receptor positive
- 39% No metastases are found in the sampled lymph nodes
- 8% Flow cytometric analysis demonstrates aneuploidy and a high S-phase
- 7% She has one relative who had a similar type of breast cancer
- 15% The tumor has a high grade

أجاب 157 شخصًا

582 Mohammad kh Abu lemon, 11:03 PM

15% (Mohammad kh Abu lemon) اسئلة من
اختبار سرى
Metastasis would be an even better indicator, but invasion suggests malignancy more than the other items listed here

أجاب 157 شخصًا

582 Mohammad kh Abu lemon, 11:03 P

(Mohammad kh Abu lemon) اسئلة من
اختبار سرى
A study is performed to analyze characteristics of malignant neoplasms in biopsy specimens. The biopsies were performed on patients who had palpable mass lesions on digital rectal examination.

541 Mohammad kh Abu lemon, 11:03 PM

(Mohammad kh Abu lemon) اسئلة من
اختبار سرى
Of the following microscopic findings, which is most likely to indicate that the neoplasm is malignant?

- 10% Pleomorphism
- 4% Atypia
- 62% Invasion
- 16% Increased nuclear/cytoplasmic ratio
- 8% Necrosis

أجاب 177 شخصًا

582 Mohammad kh Abu lemon, 11:03 PM

(Mohammad kh Abu lemon) اسئلة من
اختبار سرى
Which of the following is the best interpretation of a neoplasm with this stage I designation?

- 17% Is unlikely to be malignant
- 6% Has probably arisen from epithelium
- 11% May spread via lymphatics
- 8% Has an in situ component
- 58% Is well-differentiated and localized

أجاب 208 أشخاص

1K Mohammad kh Abu lemon, 11:13 PM



1

8) Not a malignant trauma:

- A) Papilloma
- B) Leukemia
- C) Melanoma

الطبيب الجراحة
لجنة

ANSWER: A

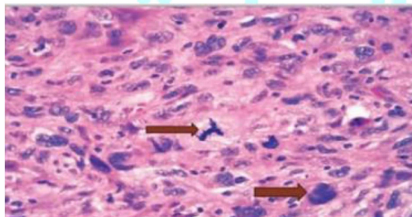
12)



- A) Salivary cancer
- B) Ovarian cystic teratoma

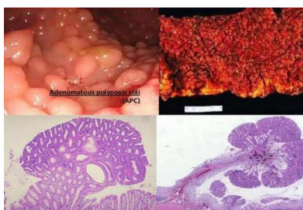
ANSWER: B

14) Example of:



- A) Typical mitosis
- B) Typical mitosis tripolar
- C) Atypical mitosis tripolar

ANSWER: C



- A) Adenomatous non-polyposis Coli
- B) Adenomatous polyposis coli

ANSWER: B

كل التوفيق أكثر +
مازم لادعوي كثير



Done By : Rama AL Bustanji