Case 3

- ♦ 73 y/o, female
- ♦ Cough and left chest pain for a few days
- ♦ Smoking (-)
- ♦ PHx:
 - ♦ Type 2 diabetes mellitus
 - ♦ Hypertension
 - ♦ NSTEMI, acute decompensated heart failure, coronary artery disease with TVD s/p PCI (2017/03/06)
 - ♦ Chronic kidney disease
- ♦ Lab:
 - ♦ WBC 9140 /uL
 - ♦ CRP 0.43 mg/Dl
- ♦ Image:
 - ♦ 2017/03/21 Chest CT (No C)





2017/03/21

Pathology

♦ Diagnosis:

Lung, lower lobe, left, CT-guided biopsy, mucinous adenocarcinoma

Lung, lower lobe, left, VATS lobectomy, invasive mucinous adenocarcinoma

Pleura, lower lobe, left, VATS lobectomy, carcinoma involved (P1)

Bronchus, margin, VATS lobectomy, no carcinoma involvement

Lymph node, regional, N1 (No.10. No.11), lymphadenectomy, no metastasis (0/2)

Lymph node, regional, N2 (No.5, No.6, No.7, No.9), lymphadenectomy, no metastasis (0/15)

Lymph node, hilar area, dissected out, no metastasis (0/4)

- Pathologic Staging (pTNM) (AJCC/UICC TNM, 8th edition)
 - Primary Tumor (pT): pT4: Tumor greater than 7 cm in greatest dimension
 - 2. Regional Lymph Nodes (pN): pN0: No regional lymph node metastasis

3. Distant Metastasis (pM): not applicable TNM Stage Groupings: pStage IIIA, pT4 pN0 Mx

- ♦ Additional Pathologic Findings:
 - 1. All the lymph nodes showed no carcinoma involved and proved by negative for CK immunostain.
 - 2. Foci of anthracosis and fibrosis are noted in the lymph nodes.
 - 3. Foci of tumor necrosis and intrapulmomary alveolar spreading are found.
 - 4. The carcinoma revealed immunostudy for positive for CK7, focal positive for TTF-1 and negative for CK20.

Reference :

TH1706857 - EGFR exon 18 mutation: Not detected

EGFR exon 19, 20, 21 mutation: Not detected

TH1706856 - ROS1 expression is negative.

TH1706855 - The ALK expression is negative.

Invasive Mucinous Adenocarcinoma (IMA)

♦ Defined in 2015 WHO classification

- ♦ Tumor cells with goblet or columnar morphology with abundant intracytoplasmic mucin, often showing lepidic predominant growth with little invasion
- ♦ Formerly mucinous bronchioloalveolar carcinoma (BAC) in 2004 WHO classification

♦ HRCT/CT

⋄ Pulmonary nodule or mass

♦ Solid or part solid; peripheral > central

♦ Lobar consolidation

- ♦ CT angiogram sign
- ♦ CT air bronchogram
- ♦ IMA suspected when consolidation does not resolve after 4-6 weeks or appropriate treatment

♦ Diffuse form

- Multiple pulmonary nodules
- ♦ Multifocal ground-glass opacities &/or consolidations
- ♦ Crazy paving: Ground-glass opacities on background of interlobular septal thickening
- Slow growth of localized form
- ♦ Aerogenous spread of multinodular form



