



SARCOMA ALVEOLAR DE PARTES BLANDAS

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SeAP-IAP



+ CASO

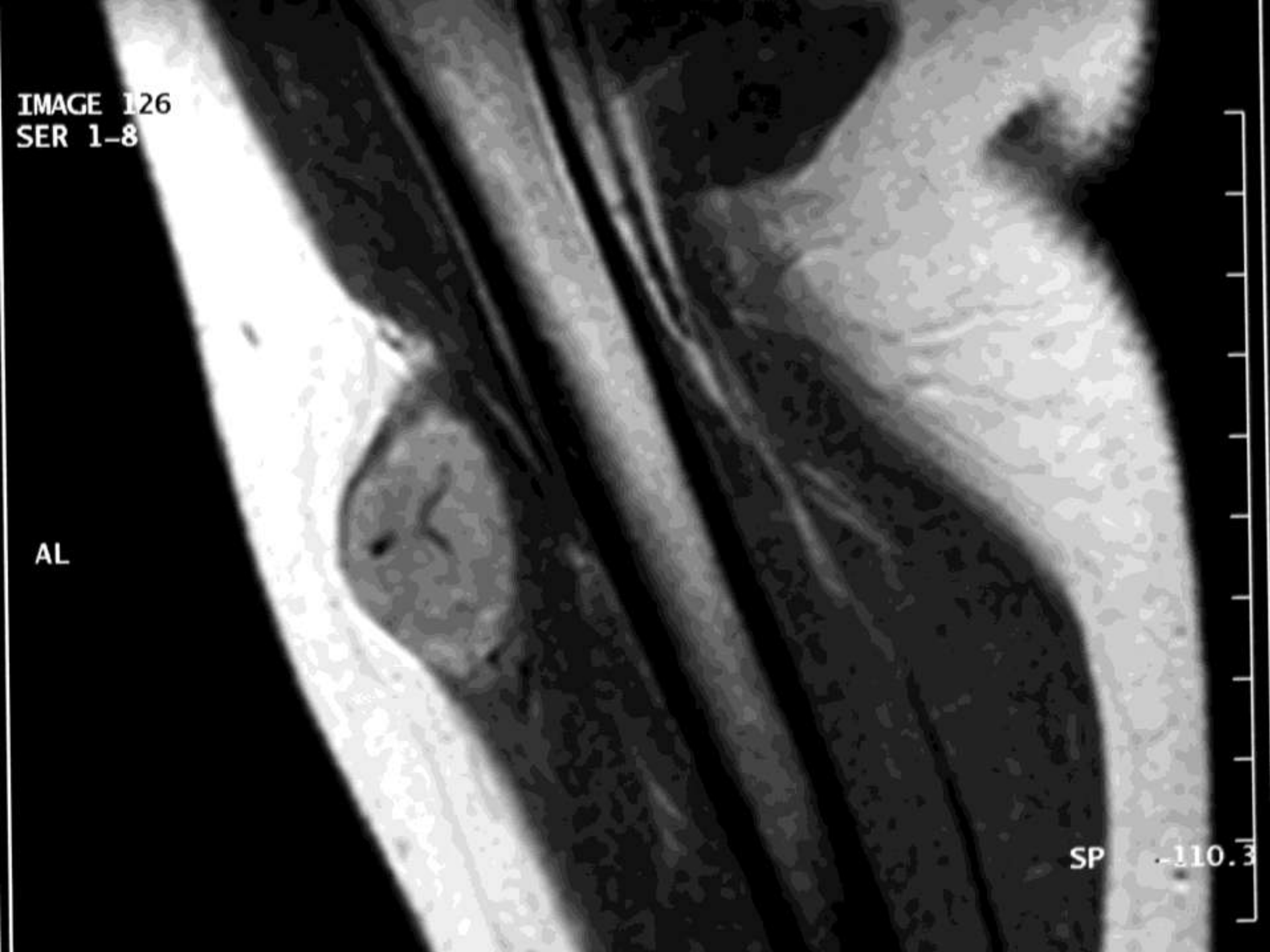


- Una niña de 13 años acude a consulta por presentar un progresivo aumento de volumen, de unos 8 meses de evolución, en el brazo derecho
- La RMN reveló una tumoración de 3 x 2 cm localizada en el músculo bíceps derecho sin afectación de planos óseos
- El estudio de extensión descartó la presencia de enfermedad metastásica

IMAGE 126
SER 1-8

AL

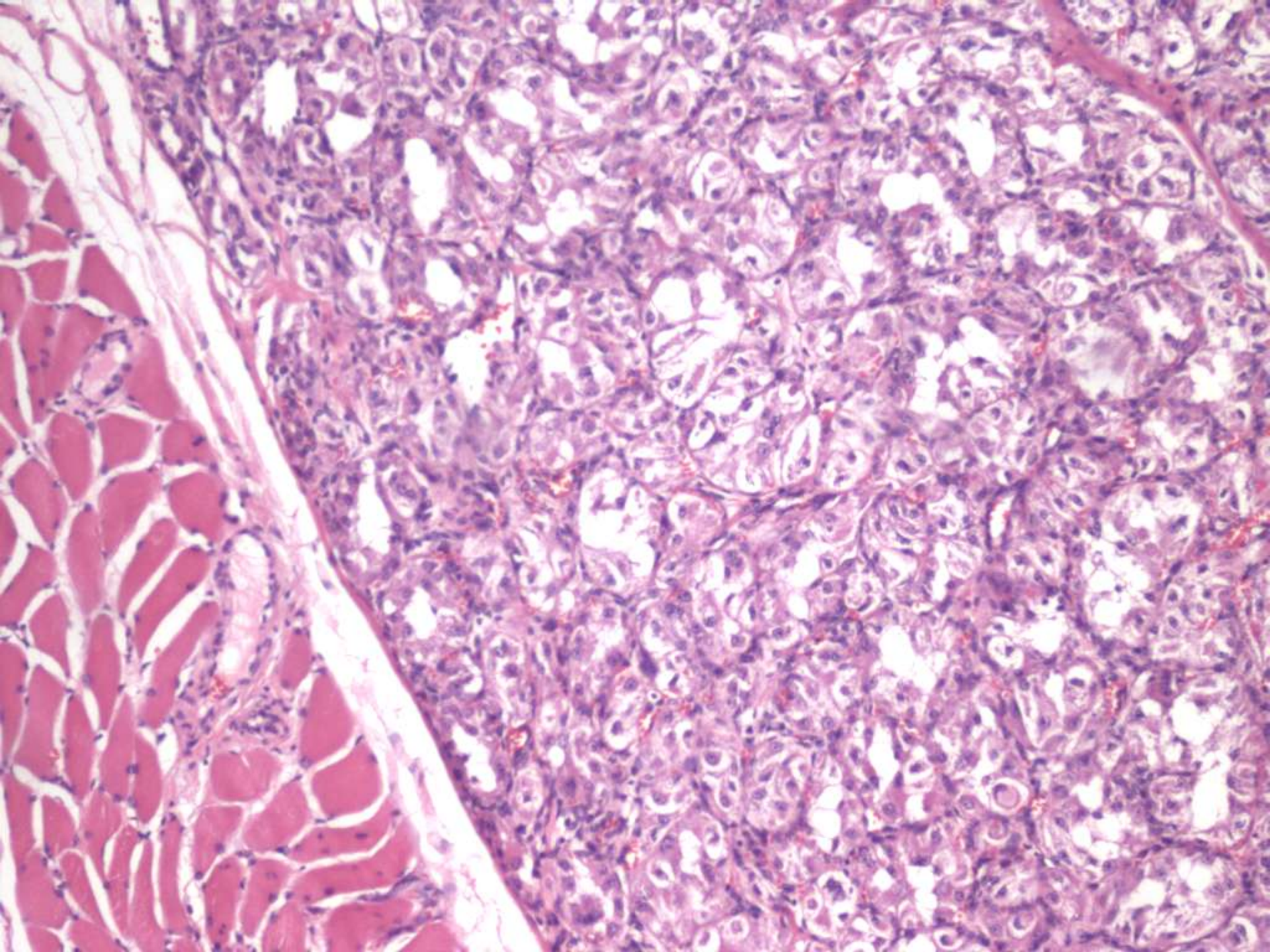
SP -110.3

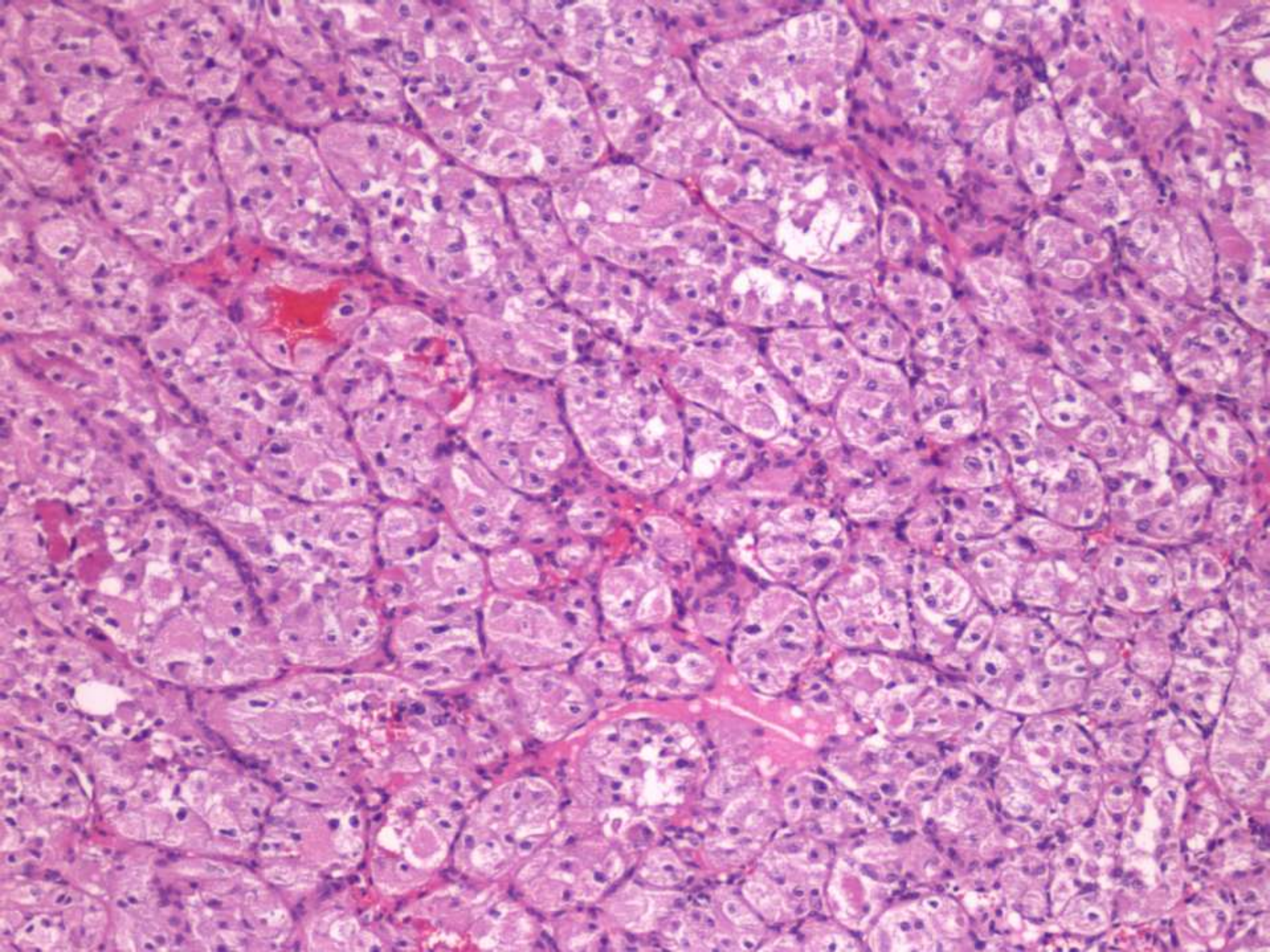


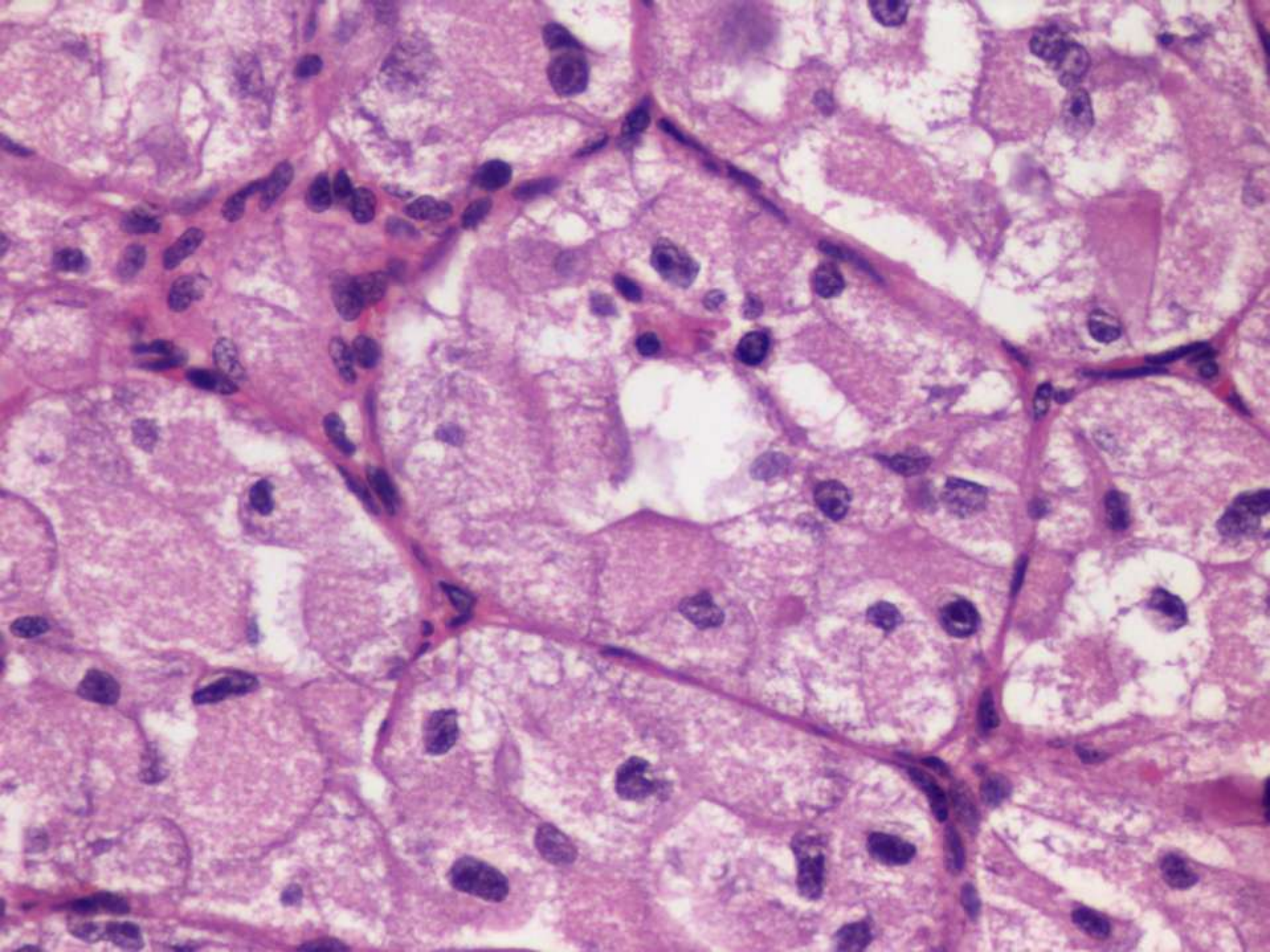
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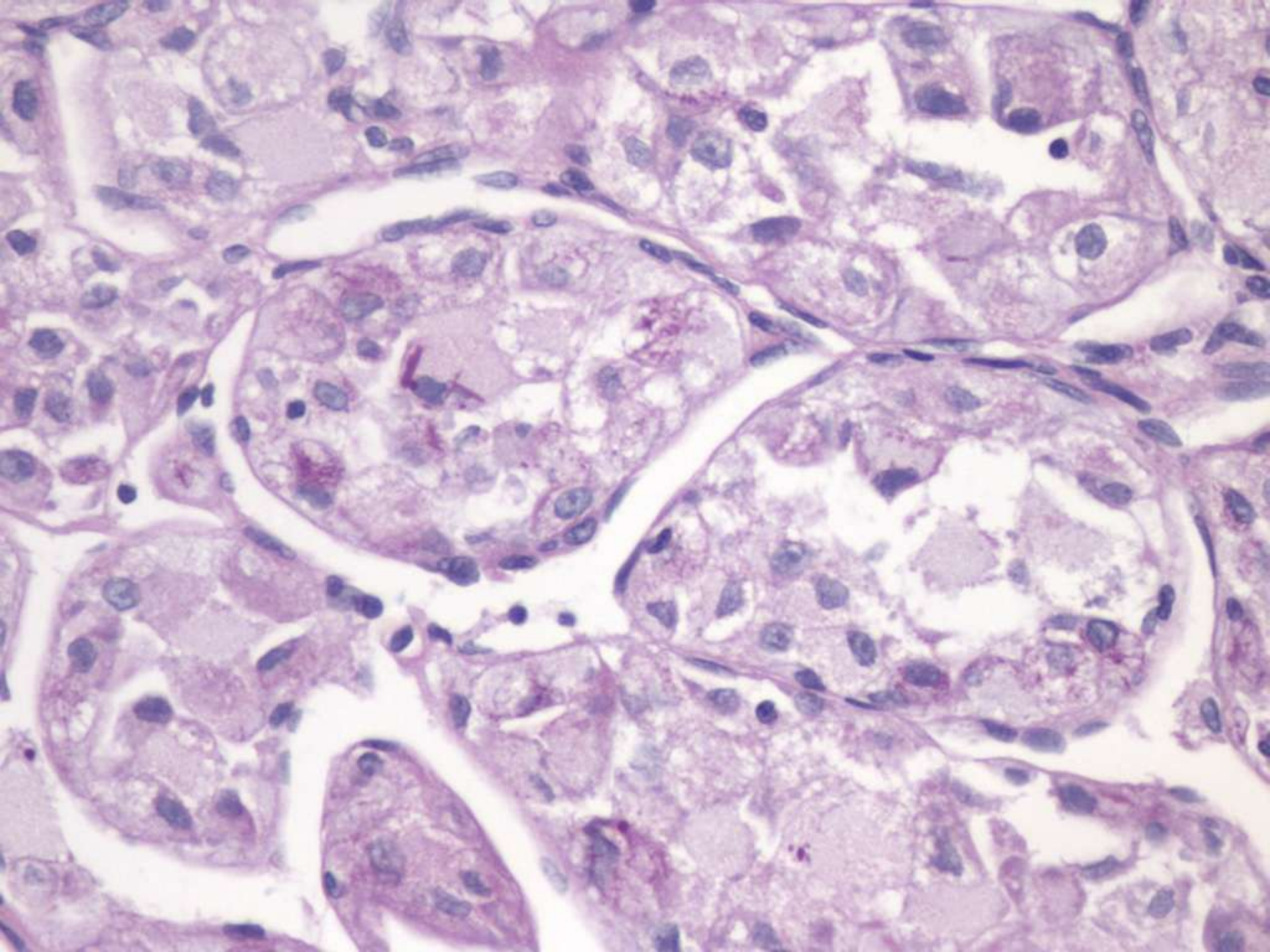


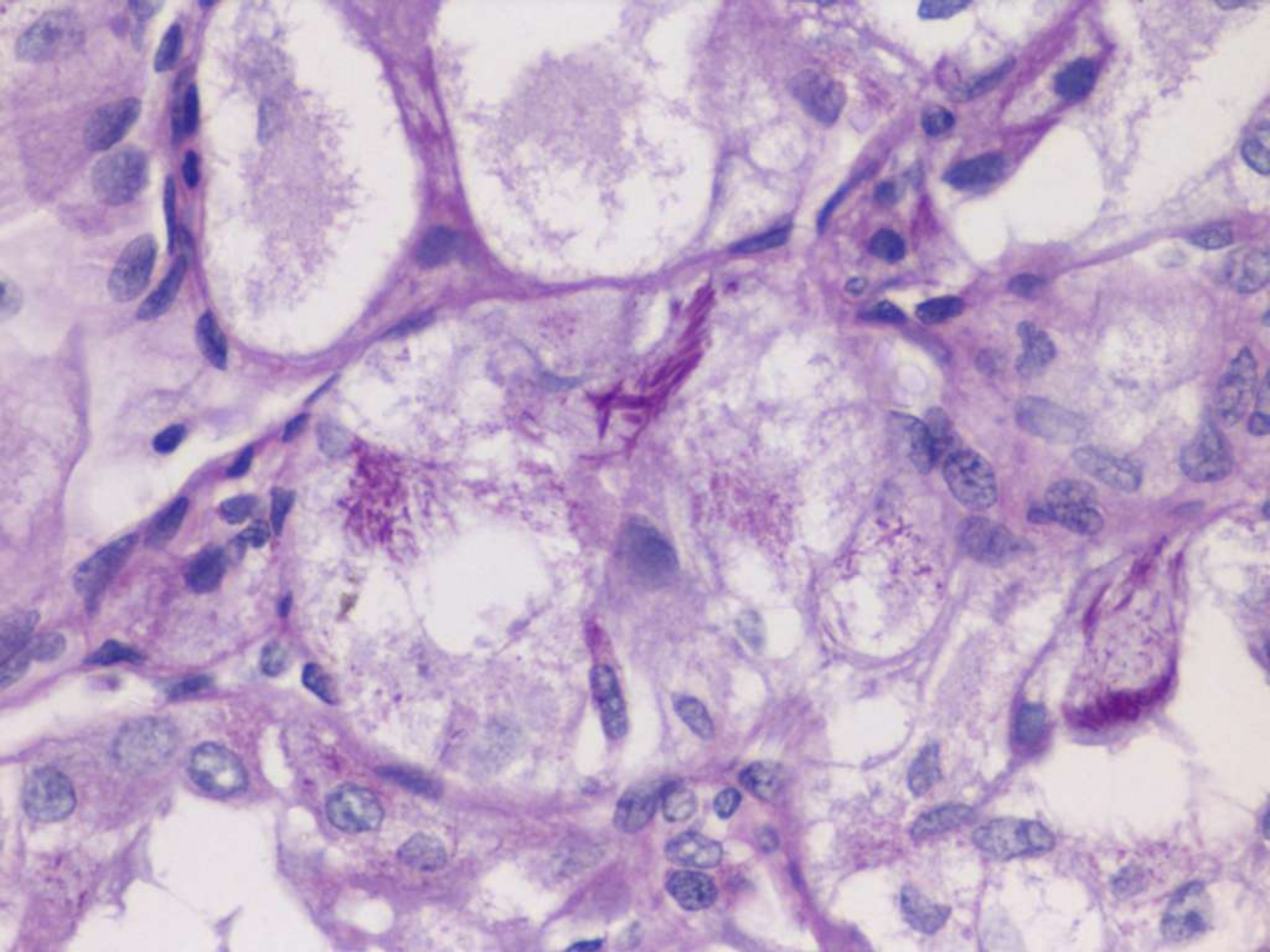
- Se realizó PAAF de la lesión con posterior extirpación quirúrgica con márgenes libres
- Los hallazgos citológicos fueron los típicos del Sarcoma Alveolar de Partes Blandas
- La histología confirmó el diagnóstico

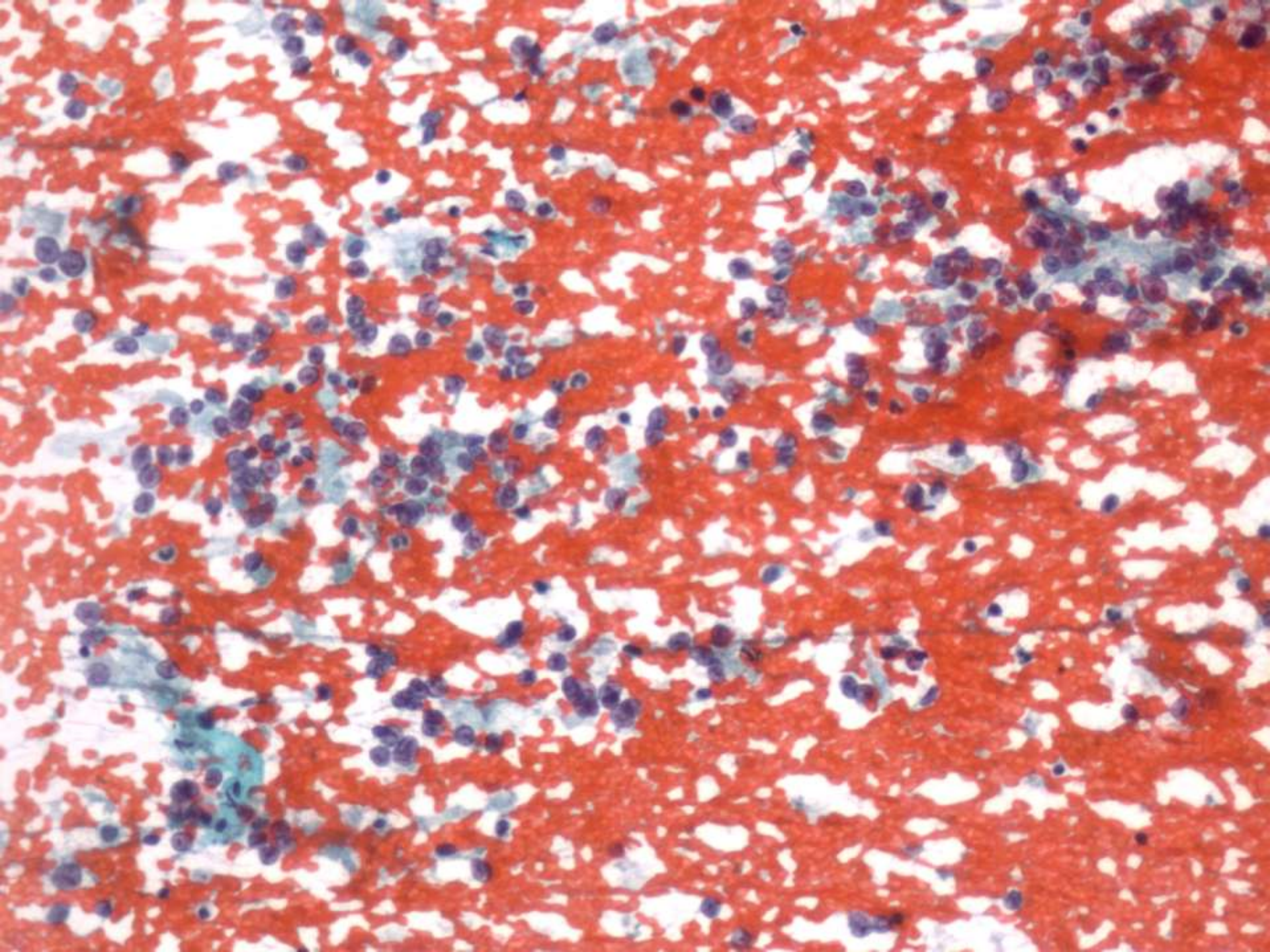


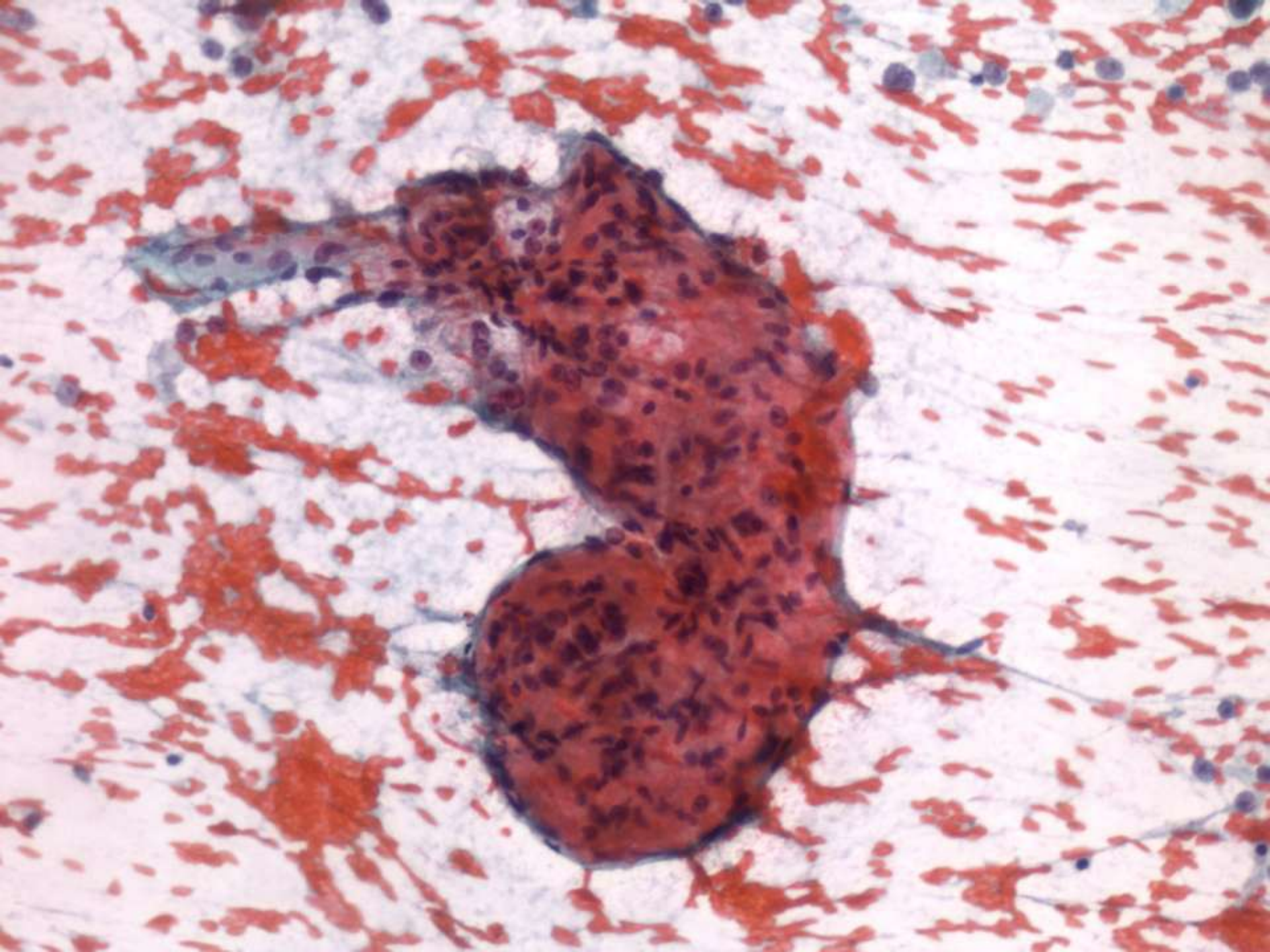


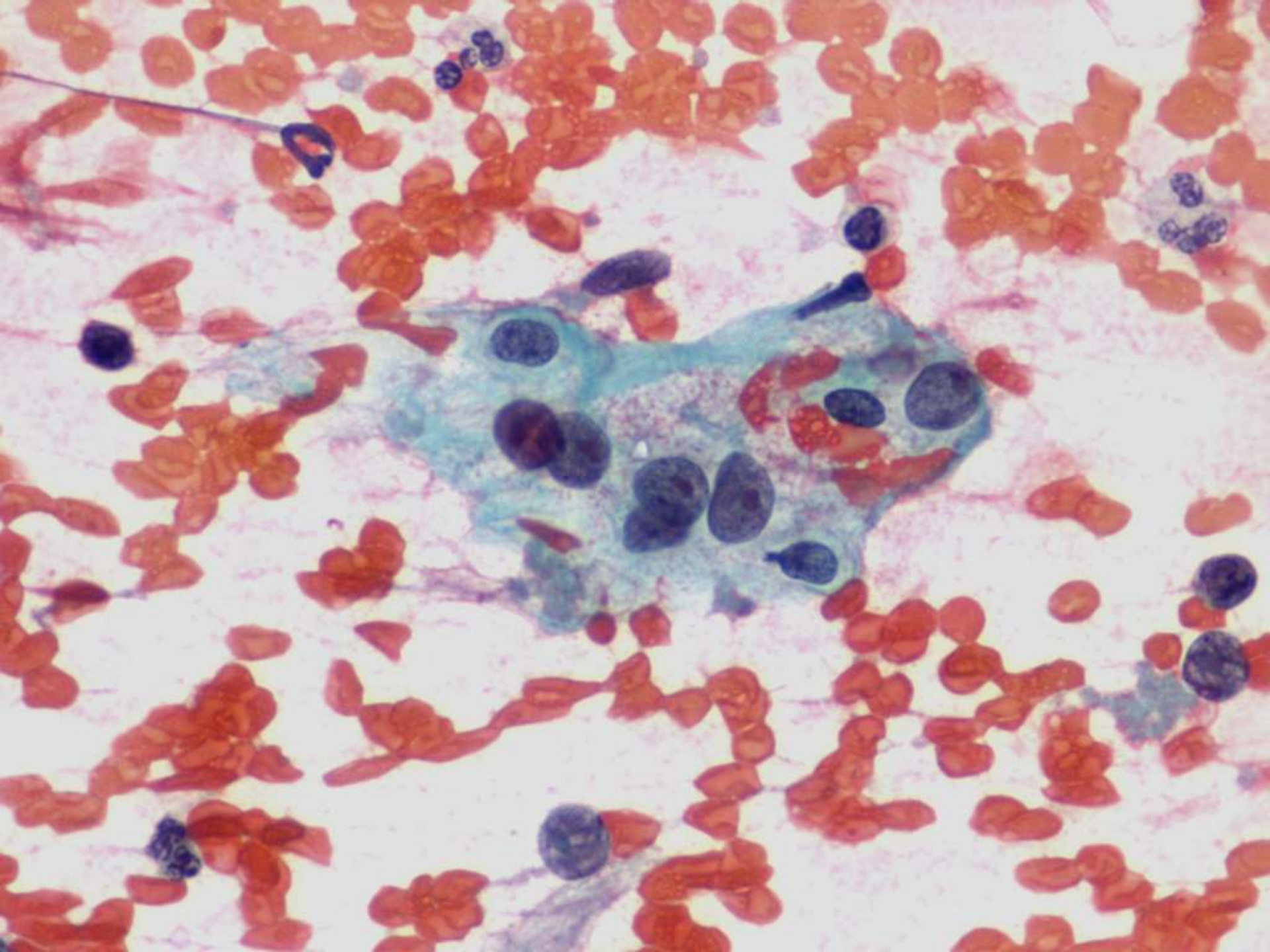


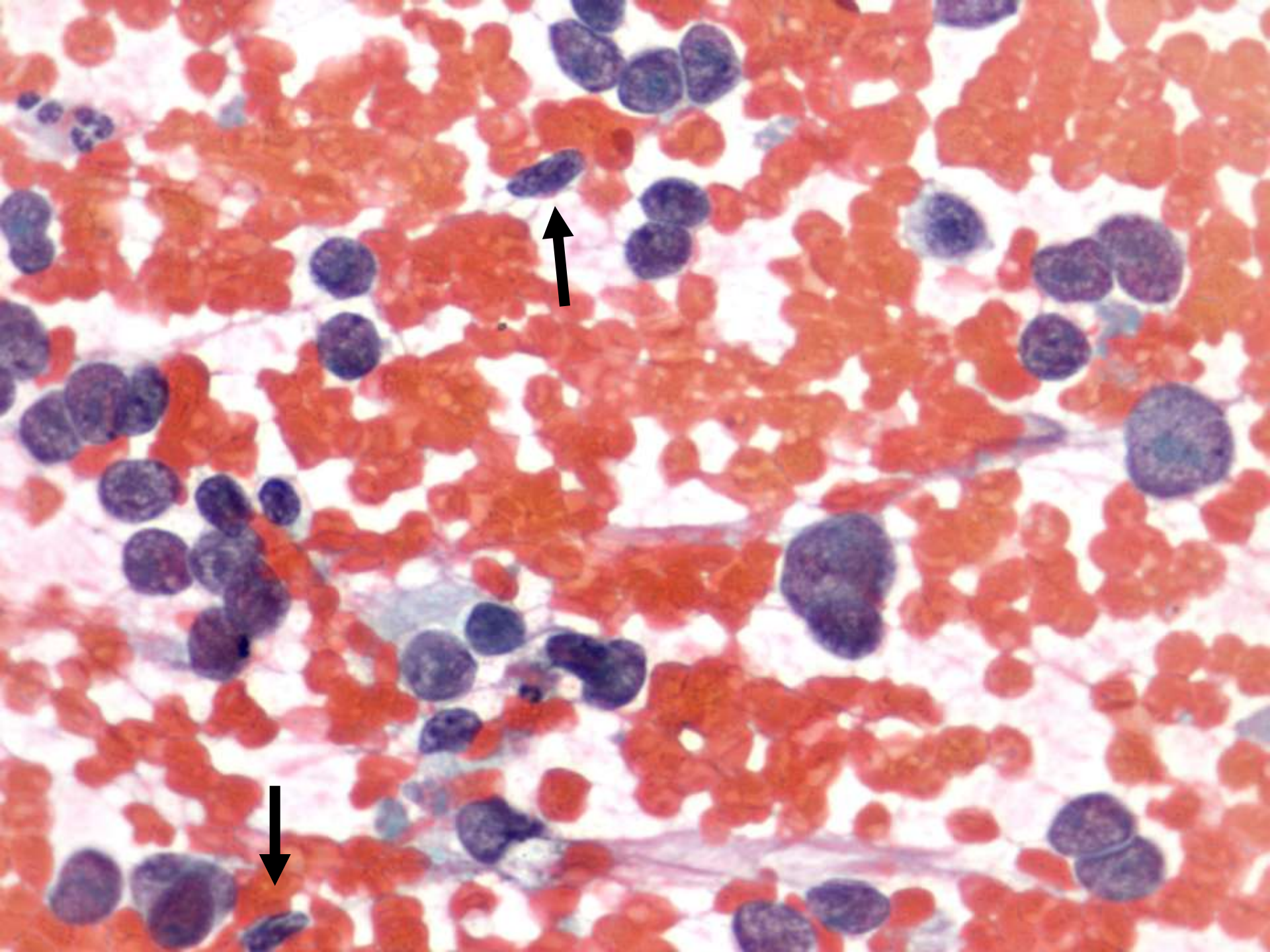


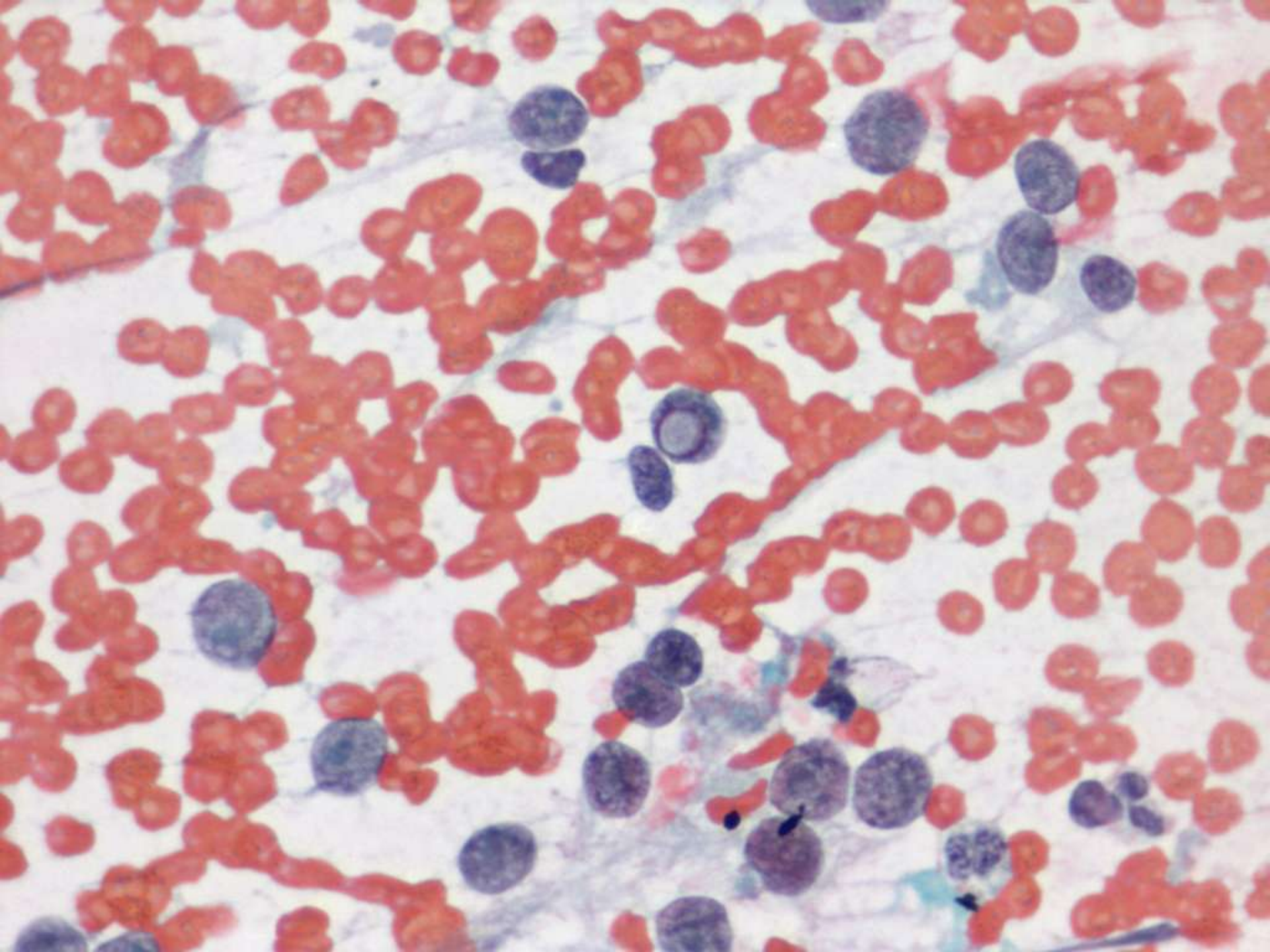


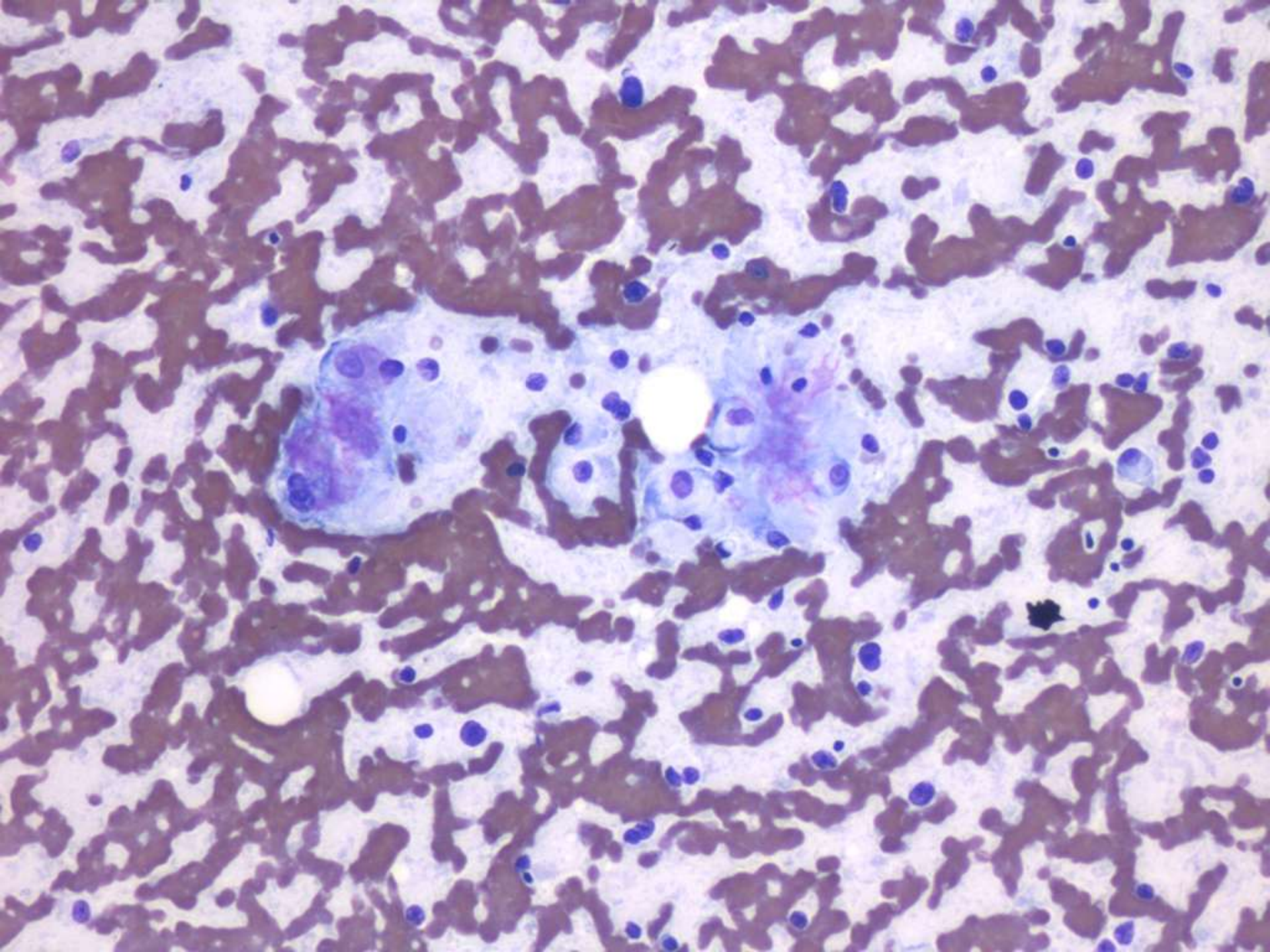


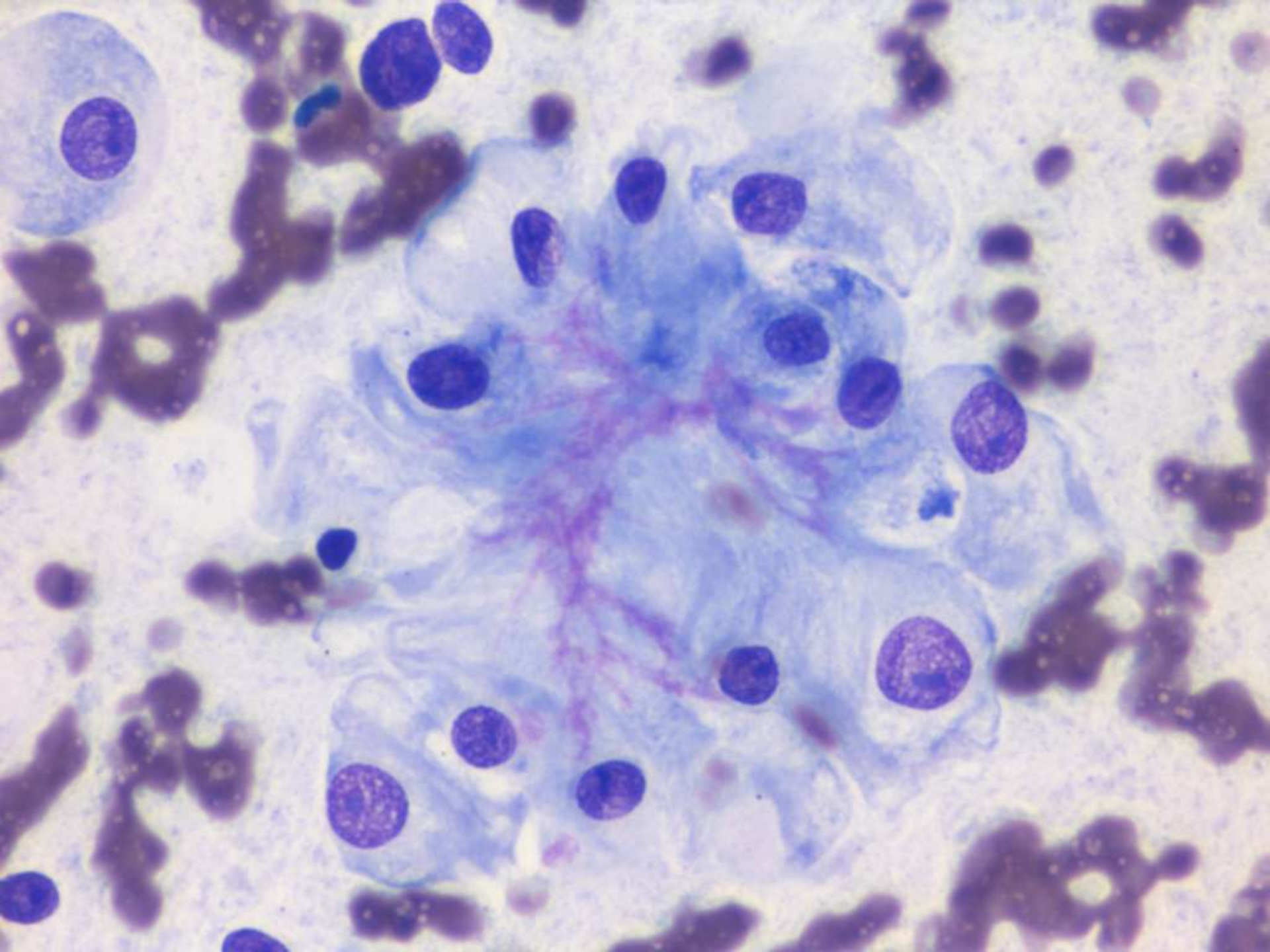


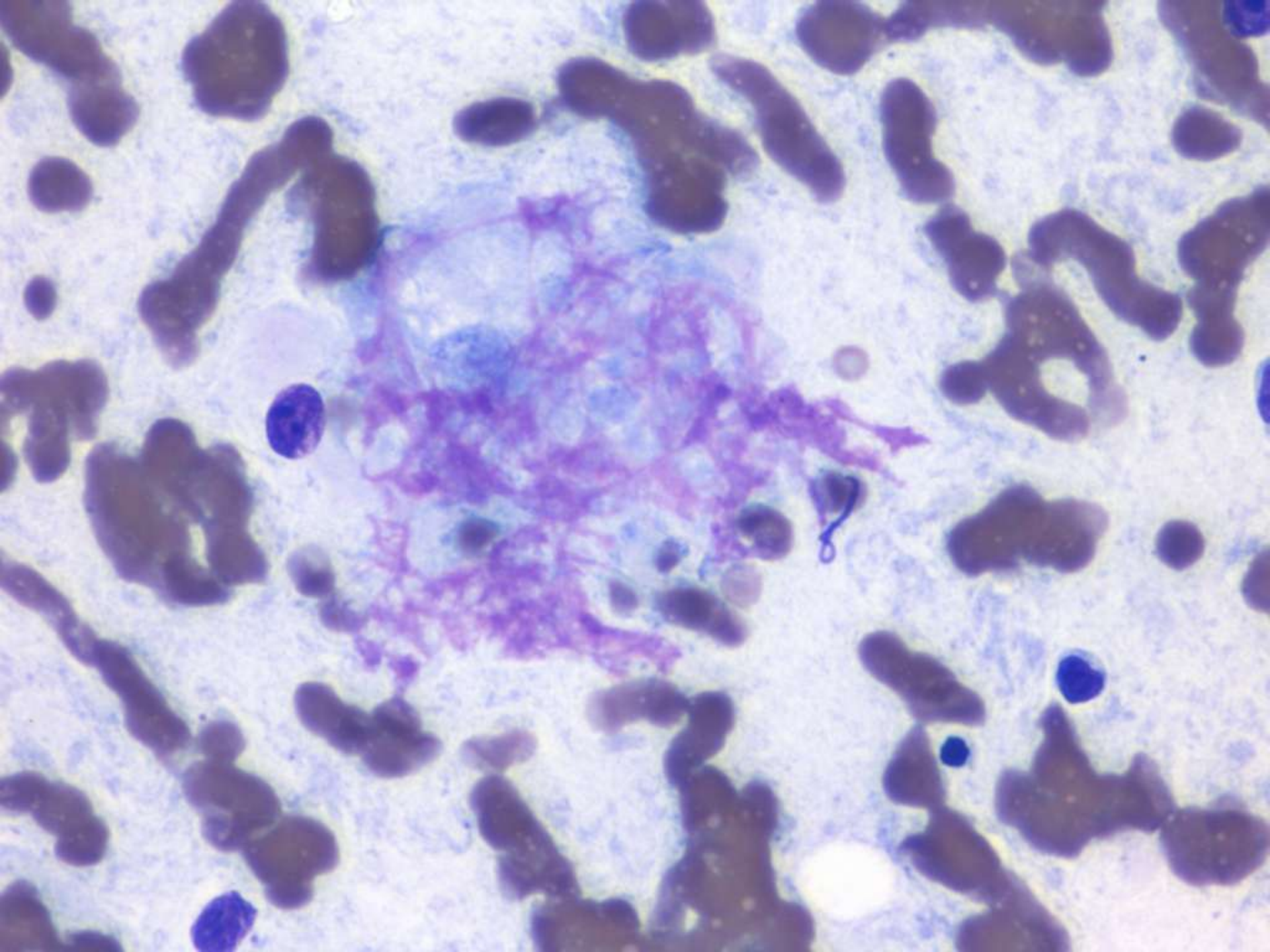


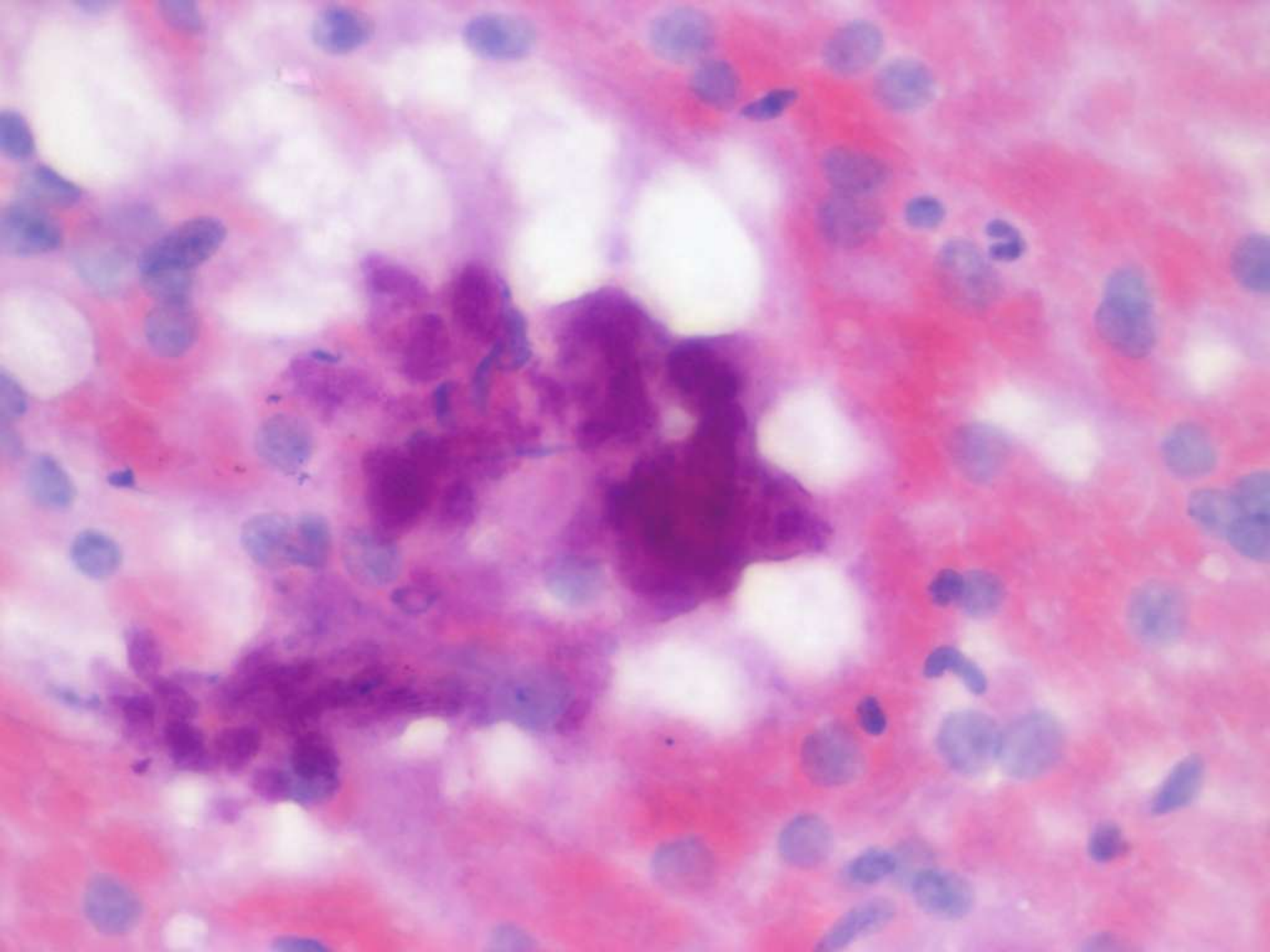


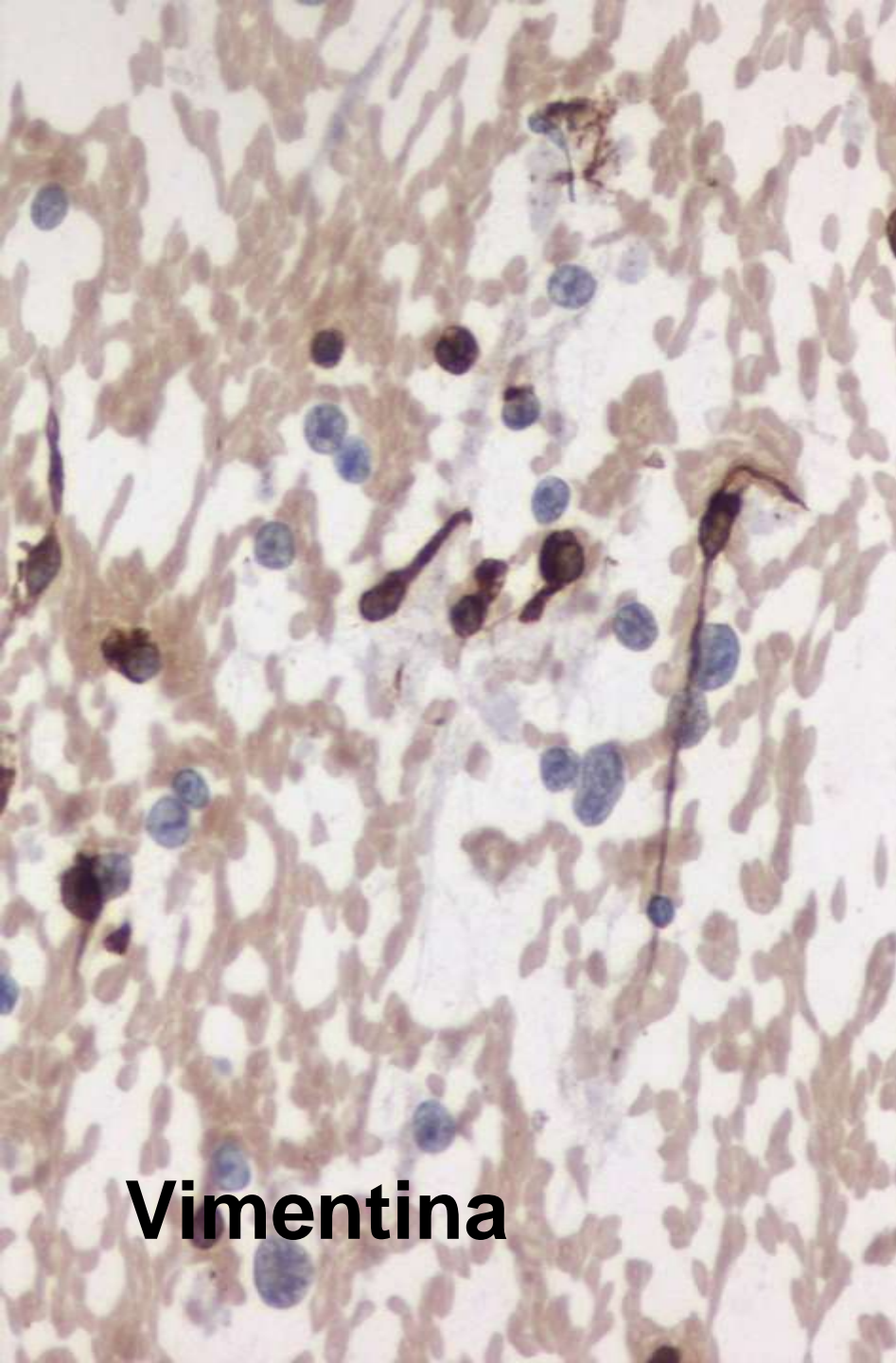




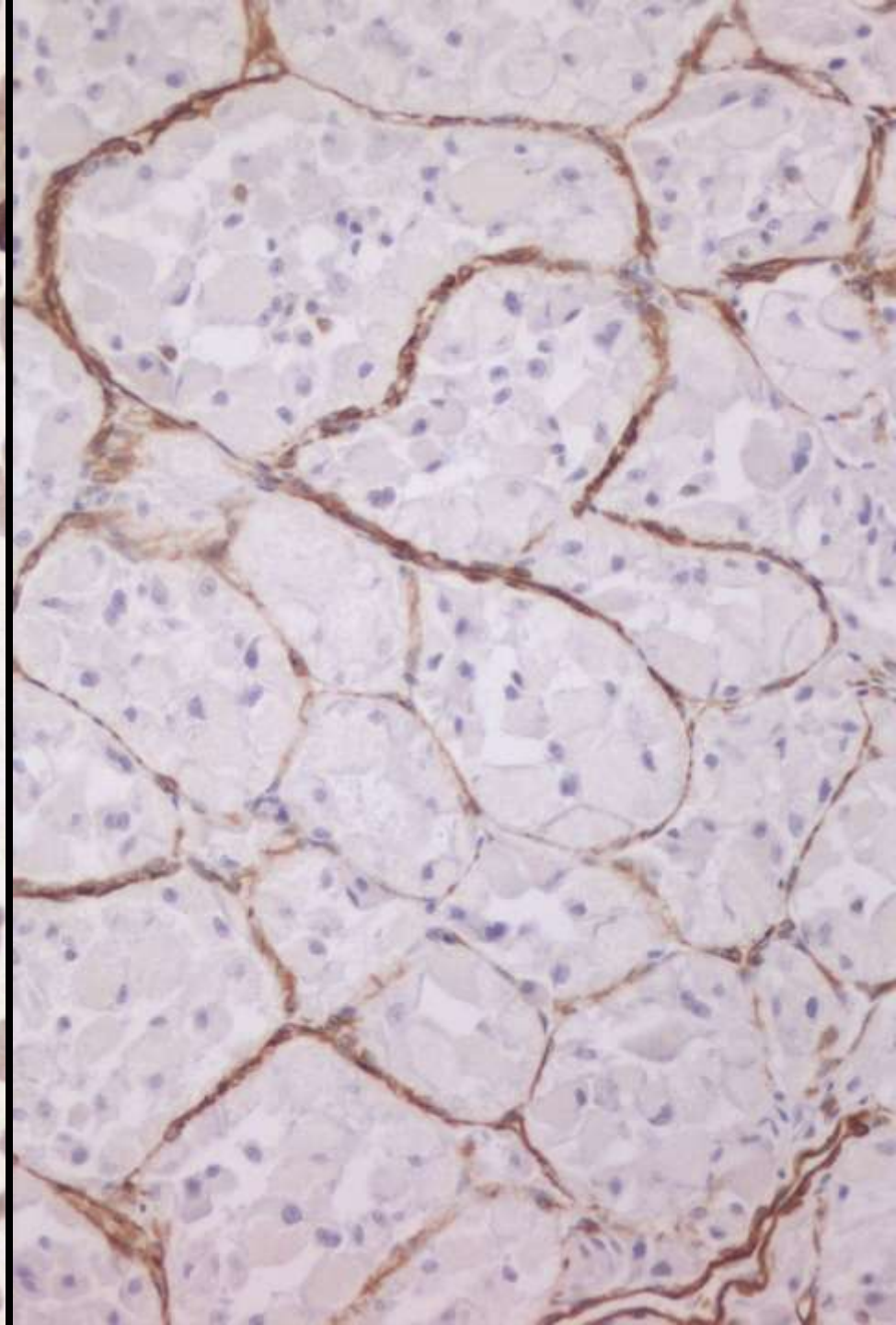


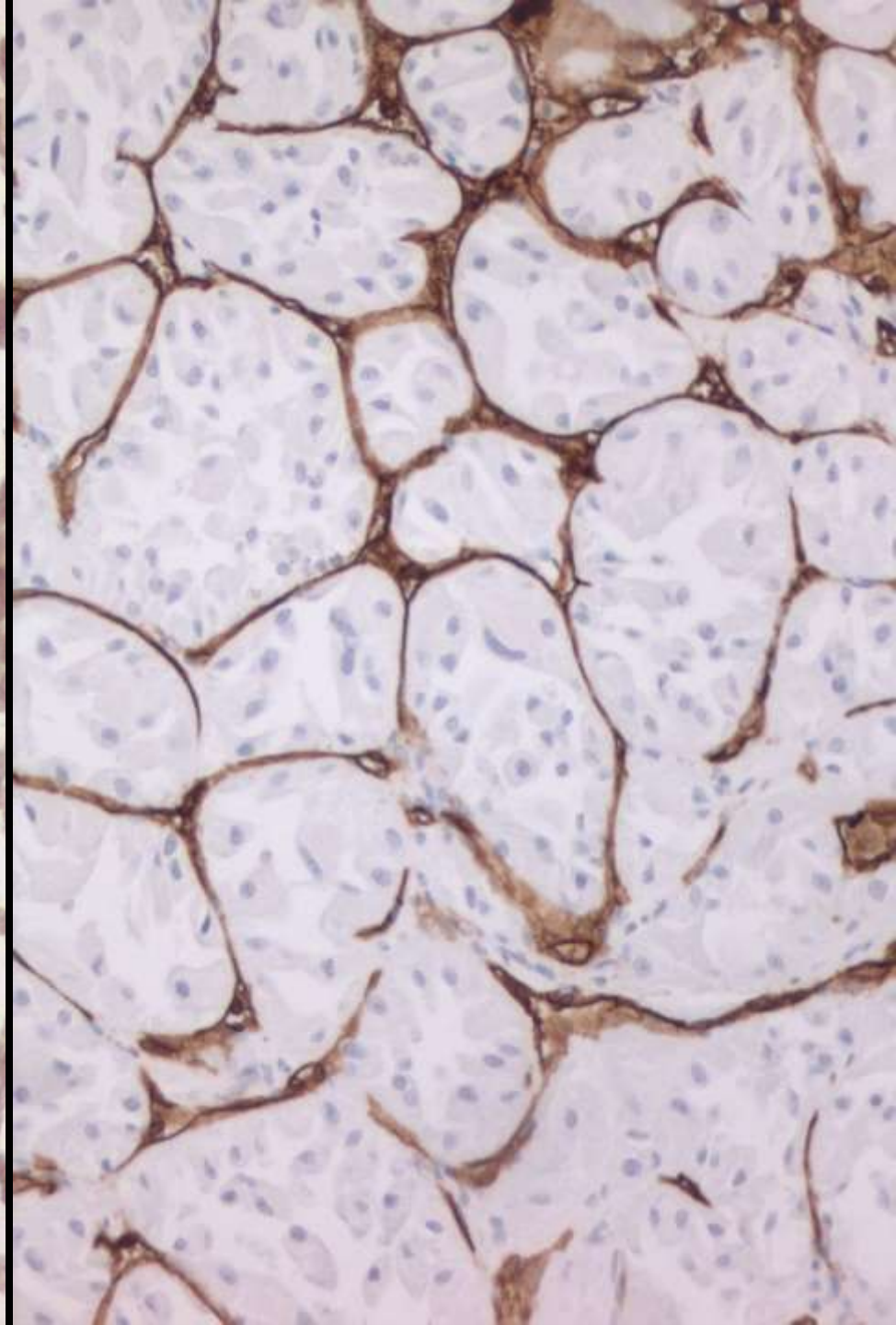
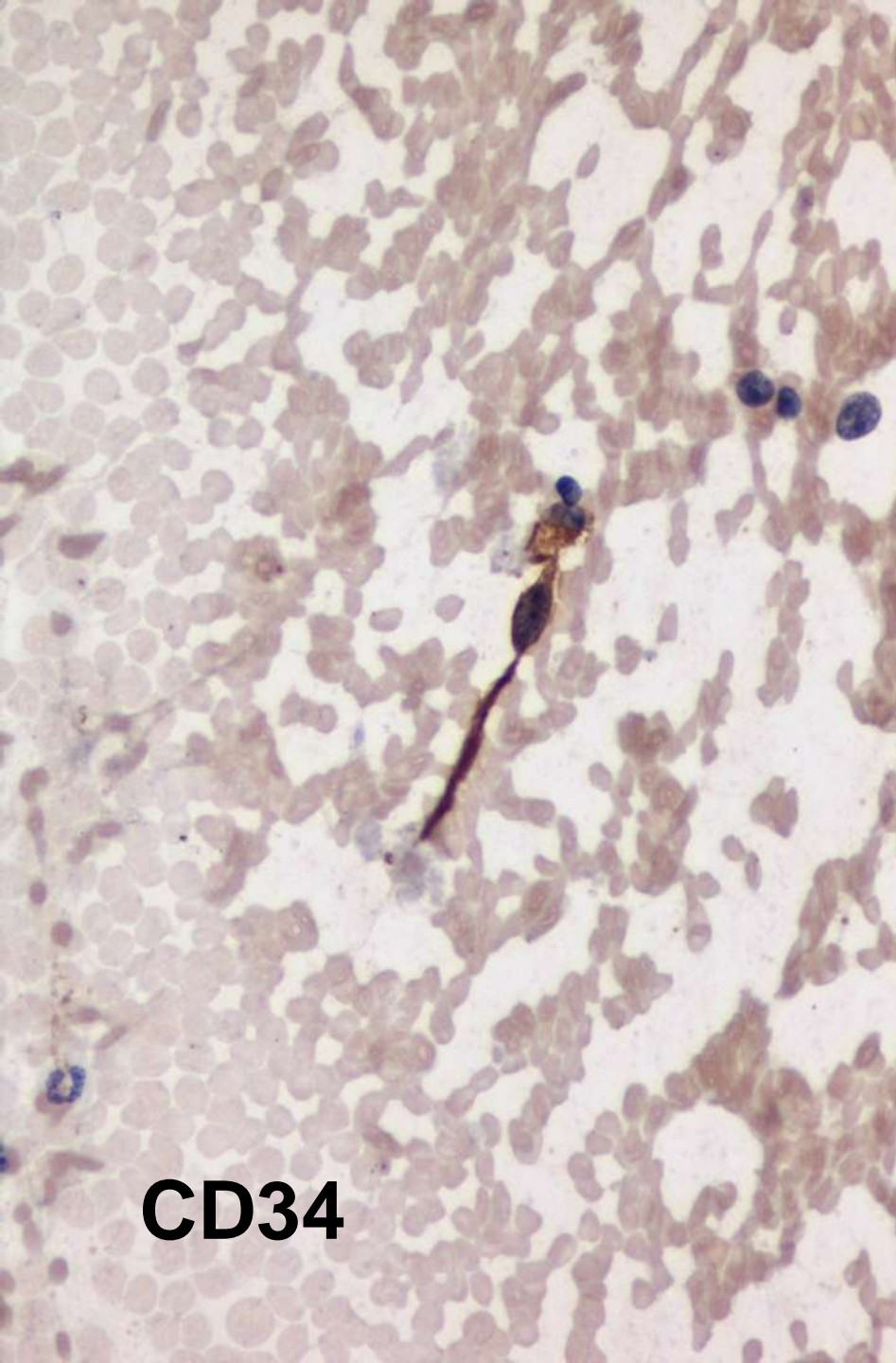


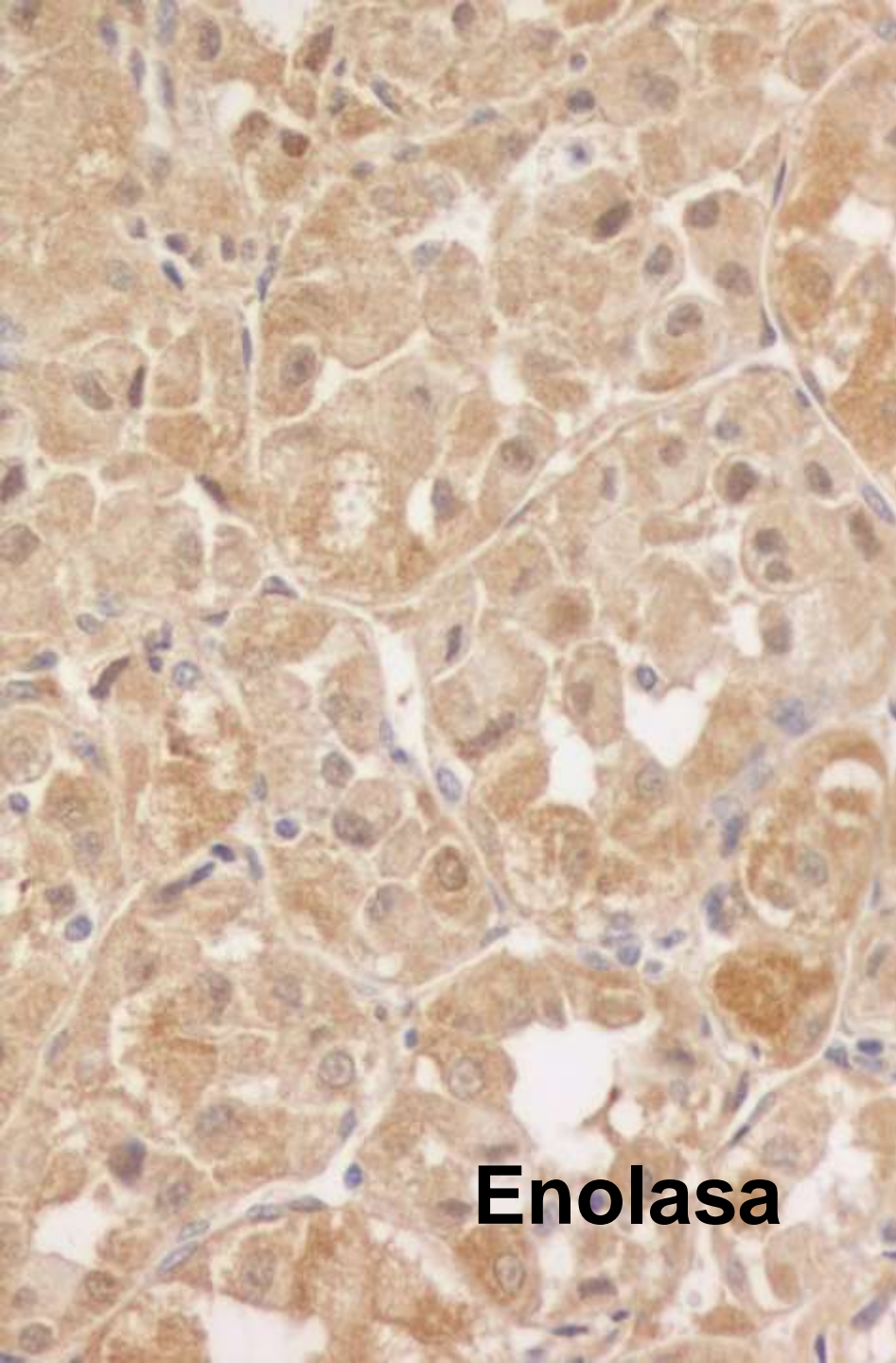




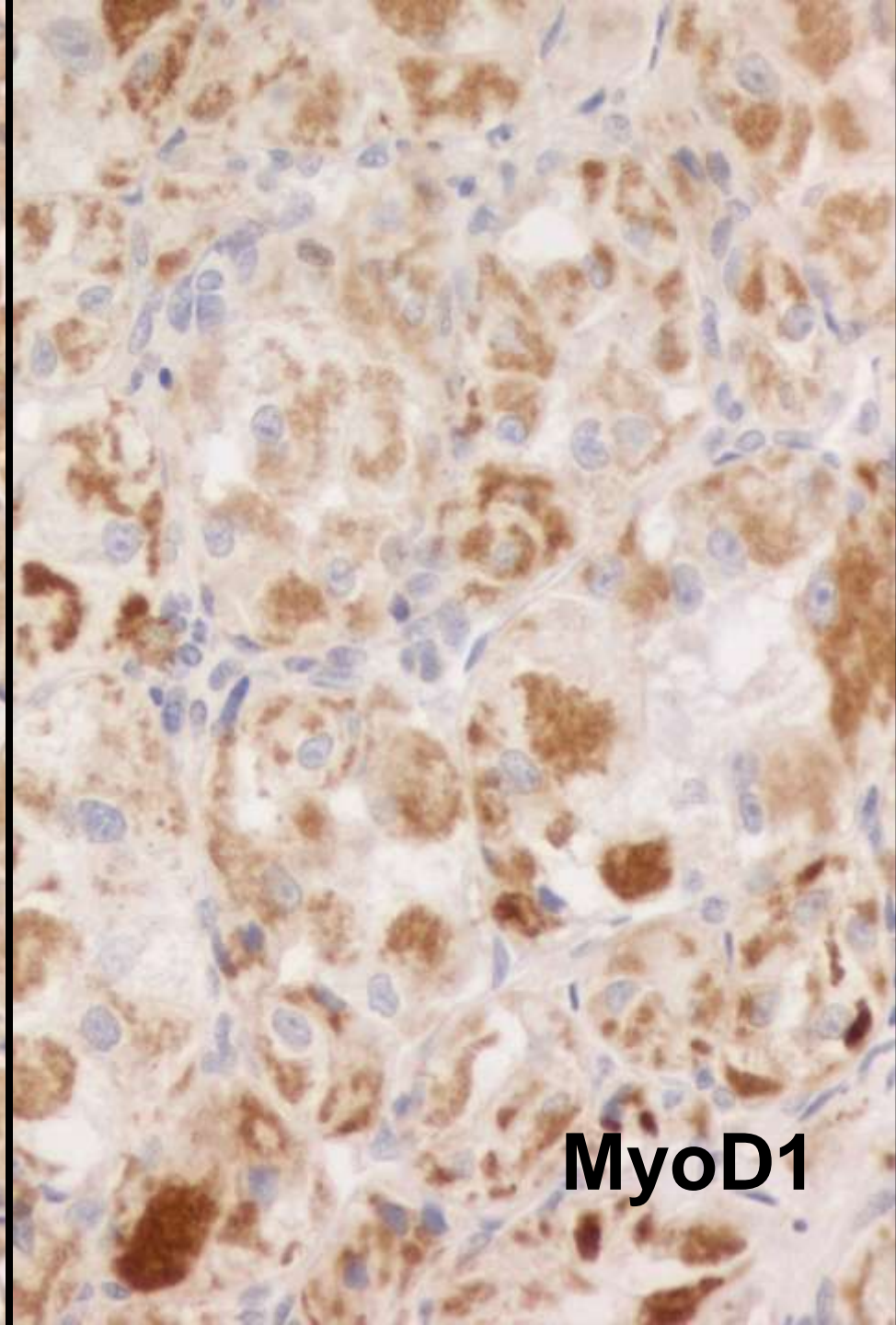
Vimentina







Enolasa



MyoD1

+ IHQ - negativos

- Citoqueratinas
- EMA
- S100
- Cromogranina A
- CD99
- Actina HHF35
- Desmina



+ Diagnóstico Diferencial

- Sarcoma epiteliode
- Sarcoma de células claras
- Histiocitosis
- Tumor de células granulares
- Carcinoma de células renales
- Paraganglioma
- Melanoma



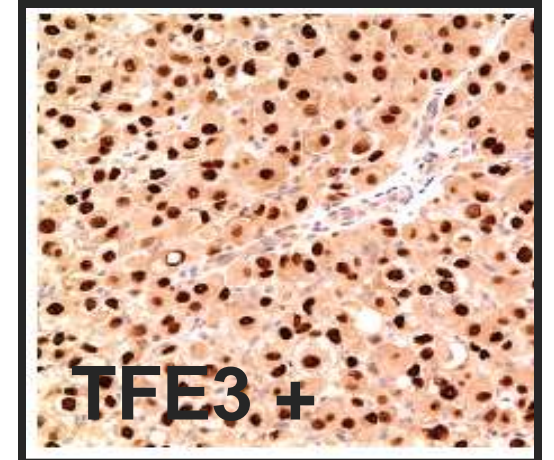
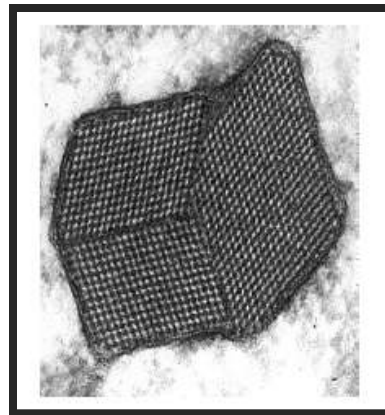
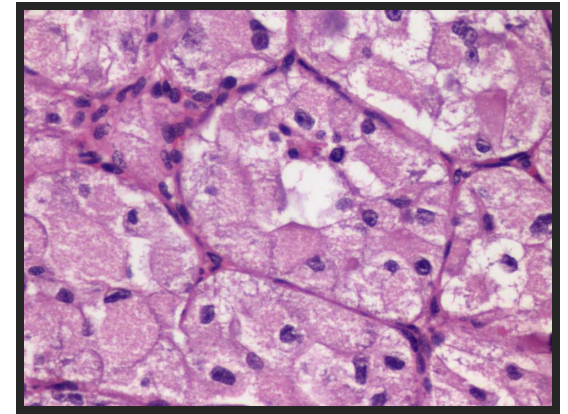
+ SAPB - clínica, epidemiología....



- Descrito en 1952 por *Christopherson et al*
- Menos del 1% de los sarcomas de partes blandas
- Tumor de histogénesis incierta
- Niños y adultos jóvenes, M > H, extremidades inferiores
- Curso clínico insidioso
- Metástasis tardías (pulmón, cerebro, hueso)

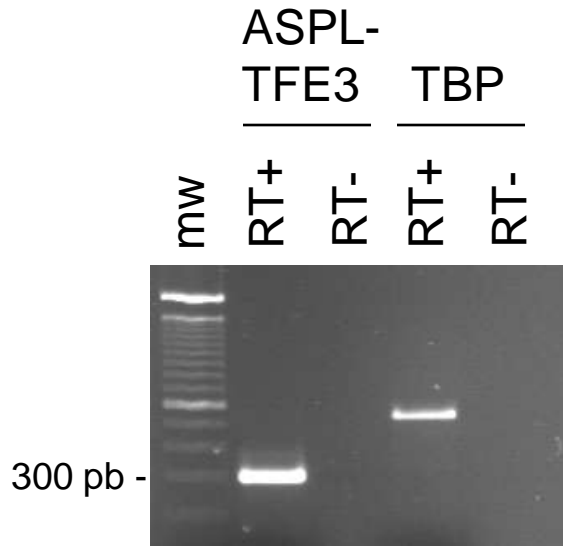
+ SAPB - diagnóstico

- Historia clínica
- Estudios radiológicos (RMN)
- PAAF o biopsia
 - IHQ
 - Ultraestructura
 - Genética

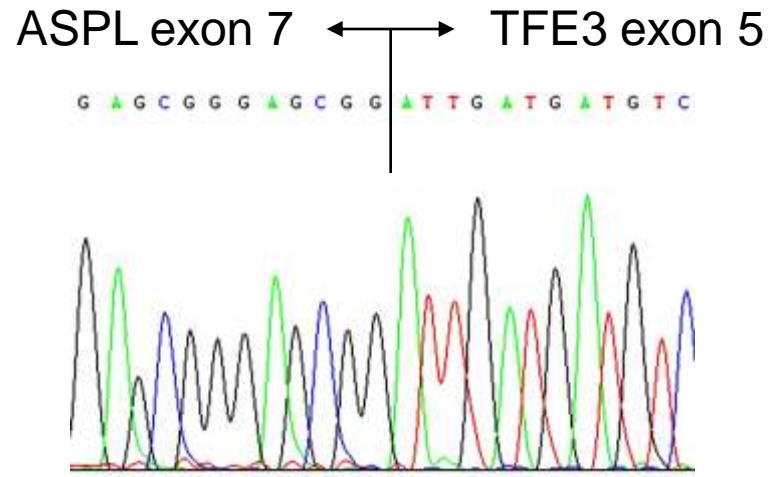




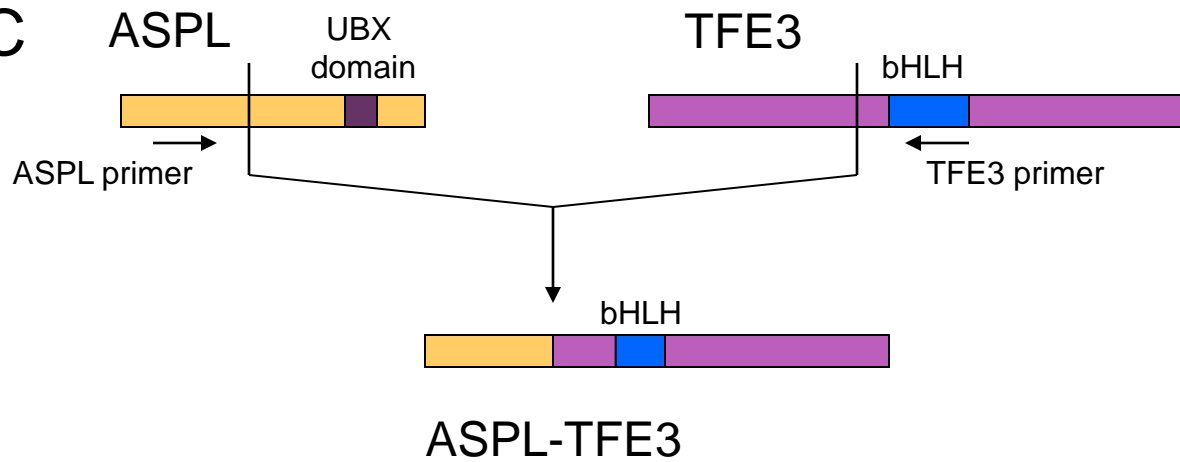
A



B



C





SAPB - tratamiento y pronóstico

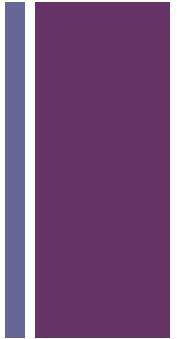


- La extirpación completa con márgenes libres debe ser considerada la terapia de elección
- El principal factor pronóstico es la posibilidad de realizar una resección quirúrgica completa
- Ningún rasgo histopatológico permite predecir el pronóstico
- Factores favorables: menor edad, enfermedad localizada y pequeño tamaño del tumor



PAAF en SAPB

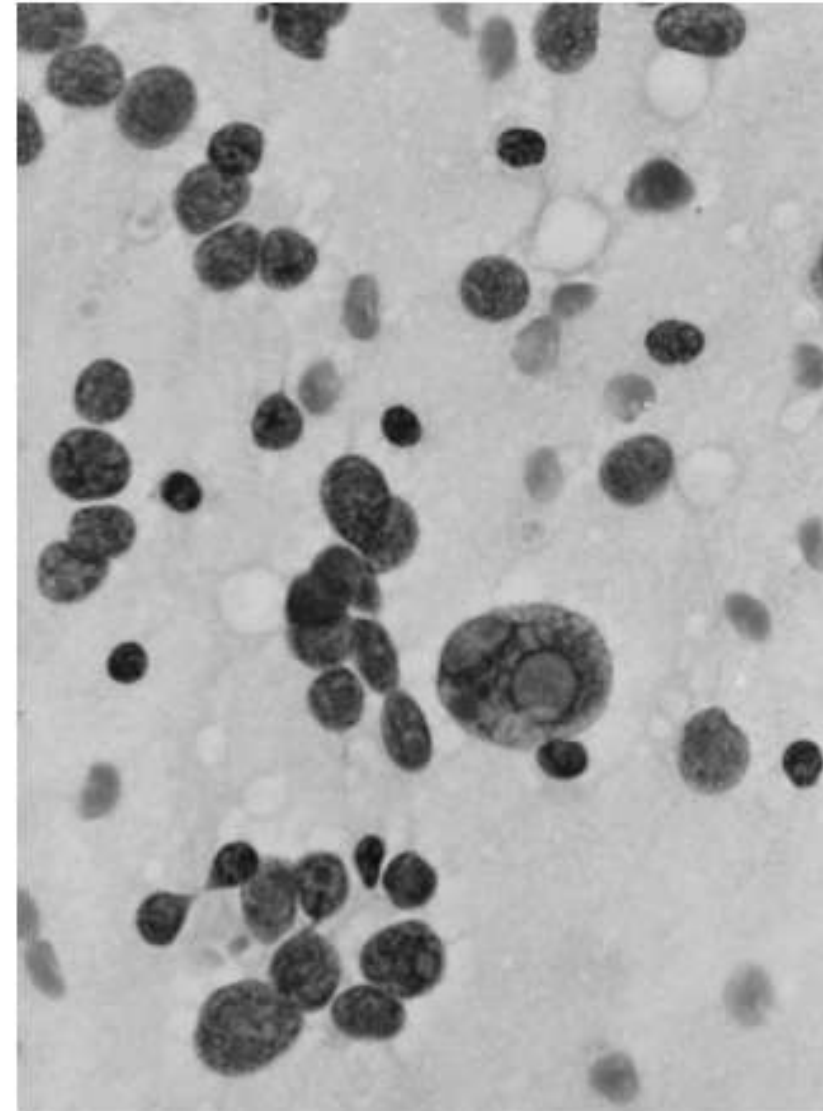
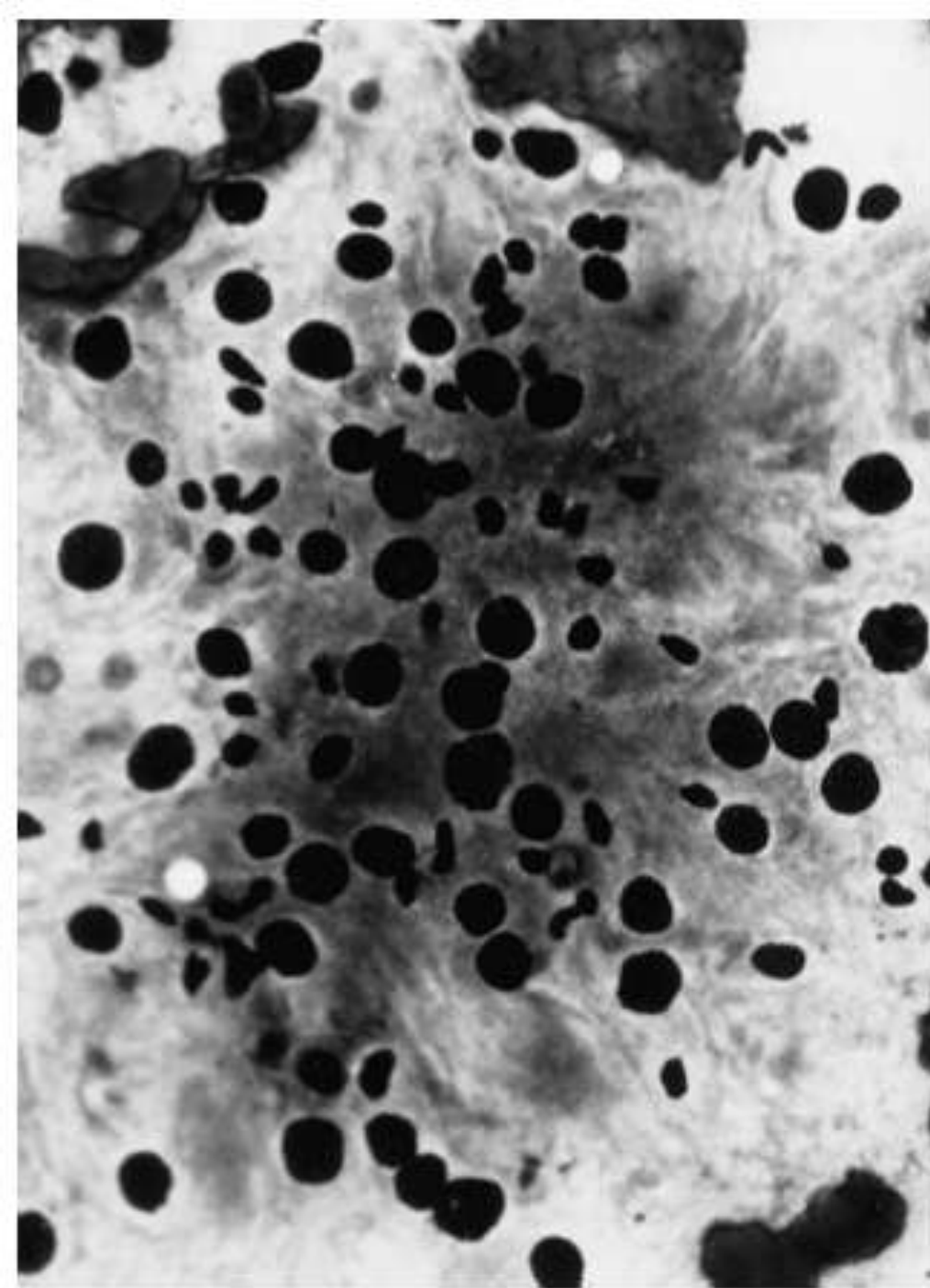
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Cytologic Features of Alveolar Soft Part Sarcoma: Report of Three Cases

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Cytopathology of Alveolar Soft Part Sarcoma

A Report of 10 Cases

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Cancer Cytopathology December 25, 2009

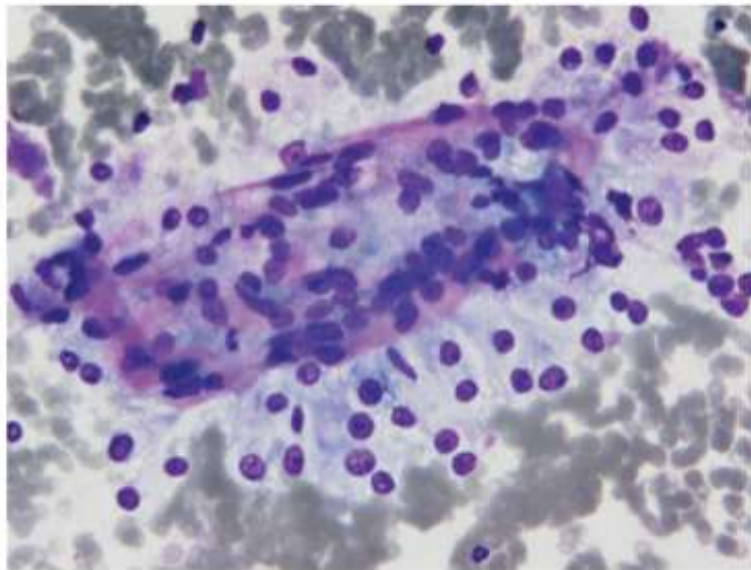


FIGURE 1. Cells are distributed in a vague acinar arrangement with a circular strand of metachromatic staining basement membrane-like stroma (Romanowsky stain, original magnification $\times 40$).

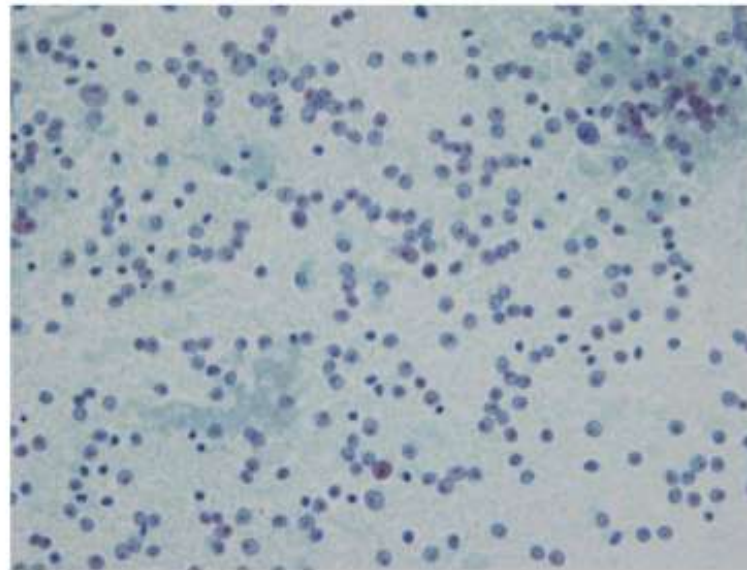


FIGURE 2. Cell fragility leads to a sheet of numerous, dissociated, large, bare nuclei with discrete acidophilic macronucleoli. Note the fragmented granular cytoplasm in the smear background (Papanicolaou stain, original magnification $\times 20$).

+ SAPB - conclusiones



- El reconocimiento de los rasgos citológicos típicos del SAPB en PAAF permite realizar un diagnóstico preciso de la lesión
- La IHQ permite excluir otras entidades consideradas en el diagnóstico diferencial
- La ultraestructura y la genética son un complemento valioso en el diagnóstico específico de este tumor