20 Male with granuloma on hand
Differential Diagnosis

Å ? Granuloma, Necrobiotic - granuloma annulare, Rheumatoid nodule
Å ? Epithelioid sarcoma
EMA
Classical Epithelioid sarcoma

- Distal extremities of Young adults
- Unknown histogenesis
- Slow growing but aggressive tumour, recurrence 80% at 10 years
- Can look clinically and pathologically very innocuous
Epithelioid sarcoma

- Immuno; Cytokeratin and EMA Pos.
- CD34 pos in 50% [unlike carcinomas].
- Negative for CD31, p63,
- INI 1 neg 90% [unlike carcinomas]
INI 1

A Tumour suppressor gene Hsnf5/SMARCB1/INI1 is inactivated.

A INI 1 loss seen in Epithelioid sarcoma, Malignant Rhabdoid Tumour, some Myoepithelial carcinomas of soft tissue [Epithelioid soft tissue tumours].
Shave of wart by GP
?wart
Biopsy? Scar on finger
AE1/AE3
Epithelioid Sarcoma

- Beware small biopsies
- Watch out for odd granuloma annulare on Hands and feet
32 Female with recurrent persistent thickened area over base of second finger.
Biopsy from finger
CD34
CD68
Differential diagnosis

- Reactive histiocytic lesion with iron deposition.
- Low grade sarcoma
Haemosiderotic Fibrolipomatous Tumour [HFLT, formerly HFLL]

Beware small biopsies from hands and feet with ‘histiocytes’ and iron.
CD34

Â Very useful immuno.
Â Should be in your panel.
Â Has an eclectic range of positive lesions.
CD 34, consistently positive;

- Vascular Tumours, including Kaposis’
- GIST [80%]
- Solitary fibrous tumour [SFT]
- DFSP
- Breast specialist stromal tumours; PASH, F.A., Phyllodes, myofibroblastoma’s.
- Adipocytic tumours, benign and malignant
- Nerve sheath Tumours
- Other; Epithelioid sarcoma, LMS[25%]
- Haemopoitic tumours, AML, ALL.
CD 34 Negative

- Carcinomas of all types [expt Trichilemmomas, NUT tumours]
- Melanoma [very rare cases +]
- Fibromatosis
- Nodular Fasciitis
40 Male with progressive mass on palm of Hand ? Fibromatosis.
Differential diagnosis

• Fibro-histiocytic tumour eg dermatofibroma
• Liposarcoma as lipoblasts present
• Lymphoma
• Other fibrosarcoma