CALIFORNIA TUMOR TISSUE REGISTRY
LOS ANGELES COUNTY - UNIVERSITY OF SOUTHERN CALIFORNIA

MONTHLY STUDY SLIDES
PERINATAL TUMORS
MARCH 1980

For
PROTOCOL

325 H38
CLINICAL ABSTRACT:

History: A 23 month old female was noted by her mother to have right lower quadrant fullness. The child had always been in good health and currently was asymptomatic. There was no history of nausea, vomiting, change in bowel habits, abdominal pain or weight loss.

Physical examination: The only abnormality detected was a firm, non-tender mass measuring 3" x 5" in the right lower quadrant of the abdomen.

Laboratory data: All routine studies were within normal limits. An IVP revealed a large noncalcified mass arising from the posterolateral aspect of the abdominal wall displacing the right ureter medially. The right kidney appeared normal.

SURGERY: (5/28/77)

An exploratory laparotomy discovered a 9 x 12 cm. retroperitoneal mass firmly adherent to the right iliac crest with "involvement" of the underlying muscle. Sharp dissection was required for its removal.

GROSS PATHOLOGY:

The specimen was an irregularly shaped mass weighing 170 grams and measuring 11 x 7 x 5 cm. The external surface showed numerous encapsulated lobulations. Cut section revealed the tumor to be homogenously white, soft and divided into small lobules by fine fibrous septae.

FOLLOW-UP:

Three months following surgery there was no evidence of recurrence, but the patient has since been lost to follow-up.
CLINICAL ABSTRACT:

History: A three month old male presented with gross hematuria of several hours duration. Also, a large abdominal mass was noted on the left side. The baby was the product of a normal full term pregnancy. He had previously been in good health. An IVP showed a large mass replacing the left kidney and pushing the collecting system superiorly.

SURGERY: (12/13/73)

A left nephrectomy and adrenalectomy was performed.

GROSS PATHOLOGY:

The kidney was distorted by a large tumor measuring 9 x 6 x 4.5 cm. and consisting of lobules of soft, glistening, yellow white tissue with foci of hemorrhage and necrosis. The tumor "invaded" adjacent renal tissue. Residual renal parenchyma lacked a corticomedullary junction and there was a dilated calyceal system. Tumor did not appear to involve the renal capsule nor the hilar vessels. The adrenal was unremarkable.

FOLLOW-UP:

As of October 1975 the patient free of disease.
CONTRIBUTOR: James W. Redwine, M. D.  
Harbor City, California  

MARCH 1980 - CASE NO. 3  

TISSUE FROM: Peritonem  

ACCESSION NO. 14253  

CLINICAL ABSTRACT: 

History: This term female infant was delivered stillborn by cesarian section after a prolonged labor. The head was delivered but further progress was prevented by a soft tissue disproportion. Death was felt to have occurred at the time of delivery. The pregnancy had been otherwise uneventful.

AUTOPSY: 

There was a pronounced bulge in the left flank. The left kidney and adrenal gland were stretched over a 9 cm. retroperitoneal, paravertebral tumor. The tumor was encapsulated, firm and variegated red-yellow tan. The sectioned surfaces were very friable. There was no evidence of invasion of contiguous structures and no osseus metastases were found grossly.
History: This 3 lb. 8 oz. female infant was born to a 42 year old gravida VI para V mother who had a positive VDRL. There was polyhydramnios and premature rupture of membranes. The infant's apgar score was 1 and she lived for 30 minutes. Cord blood VDRL was negative.

Autopsy:

Attached to the gluteal area of the infant was an 11 x 10 x 8 cm. tumor mass which on sectioning was solid, tan, and had scattered cartilagenous-like foci, areas of hemorrhage, and smaller darkly pigmented areas. Portions were cystic with 0.3 to 2.0 cm. cysts containing clear mucoid material. The mass originated 0.3 cm. from the coccyx but showed no communication with the spinal column and no intrapelvic extension. Near the proximal end of the tumor was a large dilated vascular space that was confluent with both internal iliac veins and branches to the inferior vena cava.
CONTRIBUTOR: Dennis Shillam, M. D.  
Pasadena, California

MARCH 1980 - CASE NO. 5

TISSUE FROM: Parotid area, recurrent tumor

ACCESSION NO. 7942

CLINICAL ABSTRACT:

History: When first seen by a physician at age six months, this child had a gradually enlarging mass in the parotid area.

FIRST SURGERY: (August 1955)

A large tumor was found which extended posteriorly and was intimately associated with the internal carotid artery sheath, extended beneath the mandible posteriorly, and was adherent to the skull near the styloid process and auditory canal. The postauricular twig of the facial nerve was dissected free of the dome of the tumor, but the medial and interior branches entered the mass, which had the appearance of a mixed tumor but was more firm and fibrous, deep in the neck.

SECOND SURGERY: (November 1955)

A 7 x 4 x 3 cm. recurrent tumor mass extending from the pharyngeal region to the base of the skull was removed.

GROSS PATHOLOGY: (Recurrent mass)

The outer surface was rubbery, marked by numerous 1 to 1.5 cm. nodules, and surrounded by a fine connective tissue membrane. The cut surface bulged from beneath the capsule and in places had a fatty consistency, in others it was purple-red. The main mass, composed of white hard fibrous tissue, was separated from the nodular portion by dense bands of grey-white connective tissue.

FOLLOW UP:

The patient was lost to follow-up.
CONTRIBUTOR: William M. Talbert, M. D.
Long Beach, California

TISSUE FROM: Scalp
ACCESSION NO. 23154

MARCH 1980 - CASE NO. 6

CLINICAL ABSTRACT:

History: A two month old Oriental girl was found to have a scalp nodule which was present from birth. An x-ray showed it to be calcified.

SURGERY:

What was thought to be a calcified sebaceous cyst was removed in August 1978.

GROSS PATHOLOGY:

The specimen consisted of a hard coarsely and irregularly lobulated 2.8 x 2.1 x 0.5 cm. mass with a fine fibrous capsule surrounding it. On sectioning, it was filled with a friable gritty yellow-white material.

FOLLOW-UP:

As of February 1980 the child is healthy and no new nodules have appeared.
CONTRIBUTOR: Stephen H. Kassel, M. D. 
Fresno, California

TISSUE FROM: Liver

ACCESSION NO. 22380

CLINICAL ABSTRACT:

History: This two day old male infant had bloody stools and an abdominal mass. Ultrasound showed a solid mass, and an aortogram showed a radiolucent mass in the upper half of the abdomen displacing the gastrointestinal tract. VMA studies were normal.

SURGERY: (10/19/76)

A well demarcated liver tumor was removed. The baby had a stormy postoperative course but recovered and was discharged ten days later.

GROSS PATHOLOGY:

The tumor was 8.5 x 7.5 x 6 cm. and weighed 190 gm. It was covered by a smooth glistening membrane interrupted in areas by fibrous tags, was somewhat bosselated, and was purple to light tan. On sectioning, the surface bulged slightly and was composed of quite friable light tan to dark reddish brown tissue.

FOLLOW-UP:

An alpha-fetoprotein from October 26, 1976 was positive (quantitated it was greater than 18,500 units). As of July 27, 1979 the baby was free of neoplasm and doing well.
CLINICAL ABSTRACT:

History: A stillborn female was delivered by Caesarean section on December 29, 1972. The mother was a 30 year old Caucasian whose expected date of confinement was in January 1973. She had vaginal spotting during the first trimester but no other problems. The fetus had a greatly enlarged abdomen but no other problems.

AUTOPSY:

The remarkable finding in this 3530 gm. macerated fetus was a large 6 cm. pelvic mass which, along with a bladder dilated to 8 cm, displaced the abdominal viscera upward and compressed the urethra. There was bilateral hydroureter and hydronephrosis. The uterus and adnexae were perched on top of the mass. The uterus had a thin wall and a considerably dilated cavity containing thick yellow opaque fluid. The tubes and ovaries appeared normal, but the vagina was compressed by the mass. The tumor itself was firm, roughened, ovoid, and well circumscribed but not clearly encapsulated. It had a light tan, glistening, slightly bulging, fairly homogenous cut surface.
CONTRIBUTOR: E. M. Courier, M. D.  
Fullerton, California  

MARCH 1980 - CASE NO. 9  

TISSUE FROM: Left kidney  
ACCESSION NO. 23026  

CLINICAL ABSTRACT:  

History: A renal mass was found in a five week old Caucasian male infant.  

SURGERY: (July 1978)  

A mass was removed which occupied approximately two-thirds of the left kidney and was 5.2 cm. in greatest diameter.  

GROSS PATHOLOGY:  

A pale gray-white fleshy mass with focal areas of hemorrhage, degeneration and semi-cystic change showed no distinct encapsulation, though grossly the margin was very sharp. The remaining kidney was distorted; the entire mass and kidney weighed 74 gm.  

FOLLOW-UP:  

The only problem was a bowel obstruction from post-op adhesions in January 1979 and surgery at that time showed no recurrent tumor. As of January 31, 1980 the child is doing fine with no evidence of a recurrence.
History: This four month old Black female infant was seen because of a prominent abdomen which had rapidly enlarged in one week, but had been present since birth.

Physical examination: The abdomen was protuberant and there was an 8 x 10 cm non-mobile non-tender firm smooth mass occupying the right upper quadrant.

Surgery: (June 1961)

After radiation, which did not appreciably reduce the tumor size, and after two biopsies a huge retroperitoneal mass which displaced the entire abdominal contents to the left was removed. The tumor could be dissected free from all surrounding structures that were compressed by it. Throughout surgery, manipulation of the tumor mass caused cardiac arrhythmias which ceased when the tumor was replaced in its bed. During closure of the abdomen after removing the tumor, the infant died when a cardiac arrest responded to neither closed nor open cardiac massage.
CONTRIBUTOR: J. N. Carberry, M. D. Lynwood, California

MARCH 1980 - CASE NO. 11

ACCESSION NO. 20543

TISSUE FROM: Neck

CLINICAL ABSTRACT:

**History:** This 3550 gm. stillborn female was delivered in December 1973 by Cesarean section when a large neck mass prevented a breech extraction. The 26 year old gravida III para II mother had recently been discharged in false labor and after removal of 4,000 cc. of amniotic fluid because of severe hyramnios.

**AUTOPSY:**

The external examination showed a large tumor mass that distorted and extended the neck bilaterally, but was more pronounced on the right. It distended the skin in a somewhat lobulated fashion and was polyploid inferior to the chin with skin ulceration. One large lobulated 1110 gm. mass measuring 20 x 16 x 11 cm. was removed with some difficulty. The posterior pharynx was involved and distorted the esophagus was distorted but not involved, and the trachea was compressed. On sectioning the tumor was composed of irregular ill-defined cysts, some with walls and containing yellow seromucinous fluid, and solid tan fleshy areas with prominent areas of necrosis and hemorrhage.
CLINICAL ABSTRACT:

History: This ten month old male infant was in good health until two weeks prior to admission when his mother noted lumps in his abdomen associated with constipation and decreasing urine output. A retrograde urethrogram showed complete obstruction of the bladder neck.

COURSE:

A biopsy and suprapubic cystostomy were performed on June 16, 1973, followed by a left cutaneous ureterostomy. His condition gradually deteriorated and he expired on June 25, 1973.

AUTOPSY:

A large 15 x 15 x 12 cm. firm mass was found in the region of the prostate which displaced the abdominal organs upward. The kidneys showed early hydronephrosis.
STUDY GROUP CASES

FOR

MARCH 1980

CASE NO. 1 - ACC. NO. 22539

LOS ANGELES: Lipoblastomatosis - 10

CENTRAL VALLEY: Mesenchymoma - 7

FRESNO: Cellular lipoma - 2; liposarcoma - 3; lipoblastoma - 1

SACRAMENTO: Myxolipoma - 3; lipoblastoma - 3; chondromyxolipoma - 2

BAKERSFIELD: Lipoblastoma - 6; well differentiated liposarcoma (myxoid) - 2; mesenchymoma - 1

LONG BEACH: Lipoblastoma - 6

SAN BERNARDINO: Lipoblastoma (lipoblastomatosis) - 10

OHIO: Lipoblastoma - 2

SOUTH BAY: Lipoblastomatosis - 4

SEATTLE: Lipoblastoma - 6

SAN FRANCISCO: Lipoma - 11

MARTINEZ: Mesenchymoma - 13

RENO: Lipoma - 13

OAKLAND: Lipoblastomatosis - 8; well-differentiated liposarcoma - 2

SAN FERNANDO: Lipoblastomatosis - 9; well differentiated liposarcoma - 1

FILE DIAGNOSIS:

Lipoblastomatosis, retroperitoneal mass 1580-8880

REFERENCES:

Cancer 32:482, 1973
J. Ped. Surg. 6:742
AJSP 4:163-174, April 1980
CASE NO 2 - ACC. NO. 20421 MARCH 1980

LOS ANGELES: Monophasic nephroblastoma - 5; congenital mesoblastic nephroma (fetal renal hamartoma, leiomyomatous hamartoma) - 5

CENTRAL VALLEY: Leiomyosarcoma - 3; fibrosarcoma - 2; Wilm's tumor - 2

FRESNO: Mesoblastic nephroma - 5; cellular leiomyosarcoma - 2

SACRAMENTO: Mesoblastic nephroma - 8

BAKERSFIELD: Schwannoma - 2; leiomyosarcoma - 3; nephroblastoma - 3 sarcomatoid Wilm's - 1

LONG BEACH: Mesoblastic nephroma - 4; malignant mesoblastic nephroma - 1 Wilm's - 1

SAN BERNARDINO: Leiomyosarcoma - 5; nephroblastoma - 4; mesoblastic nephroma - 1

OHIO: Leiomyosarcoma - 2

SOUTH BAY: Congenital mesoblastic nephroma - 2; monophasic Wilm's - 2

SEATTLE: Monophasic nephroblastoma - 6

SAN FRANCISCO: Wilm's tumor - 7; fetal hamartoma or congenital mesoblastic nephroma - 5

MARTINEZ: Fibrosarcoma - 8; mesoblastic nephroma - 4; monophasic Wilm's tumor - 1

RENO: Fetal hamartoma - 13

OAKLAND: Congenital mesoblastic nephroma (leiomyomatous hamartoma) - 10

SAN FERNANDO: Congenital mesoblastic nephroma (fetal renal hamartoma) - 6; fibrosarcoma - 4

FILE DIAGNOSIS:

Congenital mesoblastic nephroma, kidney 1890-8963

REFERENCES:

Cancer 31:462, 1973
Archives Path. 96:66, 1973
AJSP 4:185-190, April 1980
LOS ANGELES: Neuroblastoma - 8; ganglioneuroblastoma - 2
CENTRAL VALLEY: Neuroblastoma - 5; Wilm's tumor - 2
FRESNO: Neuroblastoma - 4; alveolar rhabdomyosarcoma - 1; Wilm's tumor - 1; nephroblastoma - 1
SACRAMENTO: Neuroblastoma - 8
BAKERSFIELD: Neuroblastoma - 9
LONG BEACH: Neuroblastoma - 6
SAN BERNARDINO: Neuroblastoma - 10
OHIO: Neuroblastoma - 2
SOUTH BAY: Neuroblastoma - 4
SEATTLE: Neuroblastoma - 6
SAN FRANCISCO: Neuroblastoma - 11
MARTINEZ: Neuroblastoma - 13
RENO: Wilm's tumor - 8; neuroblastoma - 5
OAKLAND: Neuroblastoma - 10
SAN FERNANDO: Neuroblastoma - 9

FILE DIAGNOSIS:
Neuroblastoma, retroperitoneum, peritoneum 1580-9503
CASE NO. 4 - ACC. NO. 20966  

MARCH 1980

LOS ANGELES: Immature solid teratoma - 6; teratoma, NOS - 3

CENTRAL VALLEY: Teratoma - 7

FRESNO: Immature teratoma - 7

SACRAMENTO: Sacrococcygeal teratoma - 8

BAKERSFIELD: Sacrococcygeal teratoma - 9

LONG BEACH: Immature teratoma - 6

SAN BERNARDINO: Immature teratoma - 10

OHIO: Sacrococcygeal teratoma - 2

SOUTH BAY: Immature teratoma - 4

SEATTLE: Sacrococcygeal teratoma - 6

SAN FRANCISCO: Sacrococcygeal teratoma - 11

MARTINEZ: Sacrococcygeal immature teratoma - 13

RENO: Teratoma - 13

OAKLAND: Sacrococcygeal teratoma, immature (potentially malignant) - 10

SAN FERNANDO: Sacrococcygeal teratoma - 10

FILE DIAGNOSIS:

Immature sacrococcygeal teratoma, region of lower sacrum 1714-9083

REFERENCES:

Cancer 26:523, 1970
J. Ped. Surg. 10:183, 1975
CASE NO. 5 - ACC. NO. 7942

MARCH 1980

LOS ANGELES: Fibromatosis - 8; fibroma - 1

CENTRAL VALLEY: Desmoid - 1; fibromatosis - 2; fibroma - 1; embryonal hemangioma - 1; neurofibroma - 1

FRESNO: Juvenile fibromatosis - 6; hemangioendothelioma - 1

SACRAMENTO: Fibromatosis - 6; elastofibroma - 2

BAKERSFIELD: Aggressive fibromatosis - 8; fibrous variant, mixed tumor - 1

LONG BEACH: Fibromatosis - 6

SAN BERNARDINO: Congenital fibromatosis - 9; benign schwannoma - 1

OHIO: Fibromatosis - 2

SOUTH BAY: Aggressive fibromatosis - 4

SEATTLE: Neurofibroma - 4; neurosarcoma - 2

SAN FRANCISCO: Fibromatosis (aggressive) - 11

MARTINEZ: Congenital localized fibromatosis - 13

RENO: Juvenile fibromatosis - 13

OAKLAND: Aggressive fibromatosis (desmoid) - 9; unclassified fibrous tumor, presumably non-metastasizing, recurrent - 1

SAN FERNANDO: Neurofibroma - 3; aggressive fibromatosis - 7

FILE DIAGNOSIS:

Fibromatosis, parotid area, recurrent tumor  1420-7390
CASE NO. 6 - ACC. NO. 23154

MARCH 1980

LOS ANGELES: Leiomyoma with calcification - 9

CENTRAL VALLEY: Degenerated calcifying leiomyoma - 5; calcifying fibroma - 2

FRESNO: Calcified leiomyoma - 6; neurofibroma with calcification - 1

SACRAMENTO: Calcifying fibromatosis - 2; fibroma - 4; fibrous hamartoma - 2

BAKERSFIELD: Leiomyoma with dystrophic calcification - 8; juvenile aponeurotic calcifying fibroma - 1

LONG BEACH: Leiomyoma with ossification - 6

SAN BERNARDINO: Calcified leiomyoma - 10

OHIO: Leiomyoma with calcification - 1; neurilemmoma with calcification - 1

SOUTH BAY: Ossifying leiomyoma - 4

SEATTLE: Fibrosarcoma low-grade, ? congenital - 6

SAN FRANCISCO: Calcified fibroma - 10; calcified leiomyoma - 1

MARTINEZ: Vascular calcifying leiomyoma - 10; juvenile aponeurotic fibromatosis - 3

RENO: Calcified hamartoma - 13

OAKLAND: Benign calcified mesenchymal tumor - 10

SAN FERNANDO: Meningioma, smooth muscle tumor - 9; spindle - 1

FILE DIAGNOSIS:

Leiomyoma, calcified, scalp 1734-8890
CASE NO. 7 - ACC. NO. 22380  MARCH 1980

LOS ANGELES:  Hepatoblastoma - 9

CENTRAL VALLEY:  Hepatoblastoma - 4; hepatoma - 3

FRESNO:  Hepatoblastoma - 5; liver cell carcinoma - 2

SACRAMENTO:  Hepatoblastoma - 6; hepatocellular carcinoma - 2

BAKERSFIELD:  Hepatoblastoma - 9

LONG BEACH:  Hepatoblastoma - 6

SAN BERNARDINO:  Hepatoblastoma - 7; embryoma - 3

OHIO:  Hepatoblastoma - 2

SOUTH BAY:  Hepatoblastoma - 4

SEATTLE:  Hepatoblastoma - 4; infantile hemangioendothelioma of the liver, Type II - 2

SAN FRANCISCO:  Hepatoblastoma - 11

MARTINEZ:  Hepatoblastoma - 12

RENO:  Hepatoblastoma - 13

OAKLAND:  Hepatoblastoma, epithelial type - 10

SAN FERNANDO:  Hepatoblastoma (note foci of hematopoiesis) males affected. Two histologic variants: epithelial (fetal and embryonal) and mixed epithelial-mesenchymal - 10

FILE DIAGNOSIS:

Hepatoblastoma, liver 1550-8973
CASE NO. 8 - ACC. NO. 20140

MARCH 1980

LOS ANGELES: Embryonal rhabdomyosarcoma (sarcoma botryoides type) - 9
CENTRAL VALLEY: Mesenchymoma - 4; schwannoma - 1; sarcoma botryoides - 2
FRESNO: Rhabdomyosarcoma - 5; neurilemmoma - 1; leiomyosarcoma - 1
SACRAMENTO: Sarcoma botryoides - 6; schwannoma - 2
BAKERSFIELD: Fetal rhabdomyoma - 9
LONG BEACH: Rhabdomyosarcoma - 5; leiomyoma - 1
SAN BERNARDINO: Embryonal rhabdomyosarcoma - 9; rhabdomyoma - 1
OHIO: Embryonal rhabdomyosarcoma - 2
SOUTH BAY: Sarcoma botryoides - 4
SEATTLE: Embryonal rhabdomyosarcoma (sarcoma botryoides) - 6
SAN FRANCISCO: Rhabdomyosarcoma - 11
MARTINEZ: Sarcoma botryoides (embryonal rhabdomyosarcoma) - 12
RENO: Embryonal rhabdomyosarcoma - 13
OAKLAND: Embryonal rhabdomyosarcoma (sarcoma botryoides) - 10
SAN FERNANDO: Embryonal rhabdomyosarcoma, botryoides type - 10

FILE DIAGNOSIS:

Embryonal rhabdomyosarcoma, pelvis 1889-8913
FILE DIAGNOSIS:

Mature teratoma, retroperitoneum, 1580-9080
CASE NO. 11 - ACC. NO. 20543
MARCH 1980

LOS ANGELES: Immature teratoma - 9

CENTRAL VALLEY: Benign teratoma - 6; malignant teratoma - 1

FRESNO: Teratoma with immature neural elements - 7

SACRAMENTO: Immature teratoma - 8

BAKERSFIELD: Teratoma - 9

LONG BEACH: Immature teratoma - 6

SAN BERNARDINO: Teratoma - 10

OHIO: Teratoma (epignathus) - 2

SOUTH BAY: Teratoma, NOS - 1; immature teratoma - 3

SEATTLE: Teratoma - 6

SAN FRANCISCO: Mediastinal teratoma - 11

MARTINEZ: Cervical immature teratoma - 12

RENO: Teratoma - 13

OAKLAND: Teratoma, immature (potentially malignant) - 10

SAN FERNANDO: Teratoma, embryonal - 10

FILE DIAGNOSIS:

Immature teratoma, neck 1710-9081
CASE NO. 12 - ACC. NO. 20375

MARCH 1980

LOS ANGELES: Rhabdomyosarcoma - 9

CENTRAL VALLEY: Sarcoma - 1; malignant mesenchymoma - 1; embryonal rhabdomyosarcoma - 2

FRESNO: Rhabdomyosarcoma - 5; mesenchymoma - 2

SACRAMENTO: Embryonal rhabdomyosarcoma - 8

BAKERSFIELD: Rhabdomyosarcoma - 9

LONG BEACH: Rhabdomyosarcoma - 6

SAN BERNARDINO: Embryonal rhabdomyosarcoma - 10

OHIO: Rhabdomyosarcoma - 2

SOUTH BAY: Embryonal rhabdomyosarcoma - 4

SEATTLE: Embryonal rhabdomyosarcoma - 6

SAN FRANCISCO: Rhabdomyosarcoma - 11

MARTINEZ: Sarcoma botryoides (embryonal rhabdomyosarcoma) - 11 ganglioneuroma - 1

RENO: Rhabdomyosarcoma - 13

OAKLAND: Embryonal rhabdomyosarcoma - 10

SAN FERNANDO: Embryonal rhabdomyosarcoma - 10

FILE DIAGNOSIS:

Rhabdomyosarcoma, prostate

REFERENCES:

Arch. Otolaryng. 79:619, 1964
Am. J. Dis. Child. 113:222, 1967
Annals Otolaryng. 78:165, 1979

1859-8913