

## Images in Clinical Oncology-II

### ANGIOSARCOMA OF SPINE



Fig 1: CAT scan spine showing lytic lesion in the dorsal vertebra



Fig 2 : CAT scan showing Para vertebral soft tissue mass

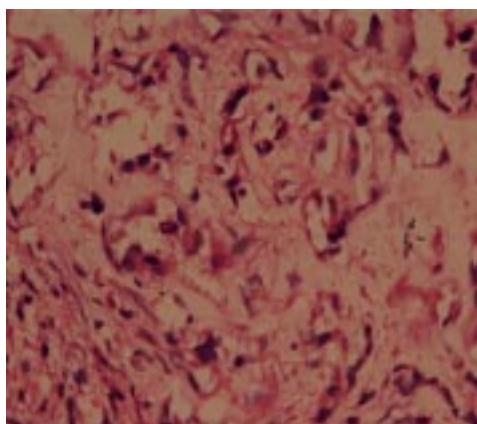


Fig3: Photomicrograph of lymph node biopsy showing endothelial cells producing vascular channels (40 x)

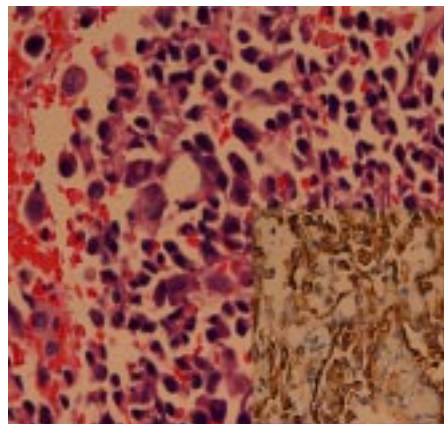


Fig 4: Photomicrograph of bone marrow biopsy showing dense clumps of irregular moderate anaplastic cells positive for CD 34 (inlet) 40 x

A 34-year male was seen in April 2003 with history of backache in dorsal area of 6 months duration. x-ray spine / CT Scan spine showed osteolytic lesion in L1 vertebrae with destruction of bilateral transverse process. FNAC of lesion showed Giant cell tumour and histopathology revealed Haemangioma. Decompression and posterior instrumentation was done. Patient was asymptomatic for 2 and half years. He developed low backache in March 2006. He also gave history of loss of weight and loss of appetite. Examination revealed pallor and bilateral inguinal lymphadenopathy (size 2x2 cm). CAT scan spine showed extensive lytic lesions seen involving the lower dorsal and lumbar vertebrae (Fig 1) with pre and para vertebral soft tissue mass (Fig 2). CAT scan abdomen showed multiple hypodense focal lesions in both lobe of liver. Bone marrow aspiration showed small cluster of metastatic cells. Lymph node (Fig 3) and bone marrow biopsy (Fig 4) revealed features suggestive of Angiosarcoma. The tumour cells were immunoreactive to CD31 and CD34 (inlet of fig 4) markers.

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