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EFFECTIVENESS OF CORE-NEEDLE BIOPSIES IN THE DIAGNOSIS OF LYMPHOMA: A RETROSPECTIVE AUDIT

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The gold standard for diagnosing and classifying lymphomas is excisional biopsy, however there is a growing trend towards the use of core needle biopsies (CNBs). Because CNB produces only a small amount of tissue and represents a limited sample of the overall tissue architecture, it may not be an appropriate sampling modality for use in patients with suspected lymphomas. To examine the diagnostic utility of CNBs, a retrospective audit was performed covering all CNBs performed over 2019–2020 where lymphoma was likely or formed part of the clinical differentials. A complete diagnosis and/or classification was able to be made on 62% of the reviewed cases, with a further 16% providing a partial or indeterminate diagnosis. While it is important to recognise the limitations of CNBs, these results suggest that they represent a reasonable initial sampling modality in the investigation of lymphoma.

TESTICULAR PLASMA CELL NEOPLASM WITH PLASMABLASTIC FEATURES – A CASE REPORT

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The most common primary adult haematolymphoid malignancy of the testis is diffuse large B cell lymphoma (DLBCL), and other haematolymphoid tumours are not commonly seen in daily practice. Plasmablastic lymphoma (PBL) of the testis is a rare aggressive entity that is typically seen in immunodeficient patients, and commonly stain for plasma cell markers. Testicular plasmacytomas are also uncommon and mainly affect adult men who have been diagnosed with, or subsequently develop, plasma cell myeloma. This case study reports a patient with known multiple myeloma who presented with a two-month history of an enlarging right testicular mass. The tumour was composed of atypical plasmacytoid lymphoid cells with abundant mitoses. Additionally, both morphological and immunohistochemical plasmablastic features were noted. This case highlights the importance of correlating histological, radiological, biochemical and clinical findings to reach a diagnosis.

RETROPERITONEAL LEIOMYOMA – A CASE REPORT

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Leiomyomas are benign tumours of smooth muscle. Uterine leiomyomas are the most common neoplasm in women but they can occur in other sites including skin, nipples, scrotum and labia. They rarely occur in deep soft tissues and can be a diagnostic dilemma. We report a case of a 53-year-old woman with an 85 mm retroperitoneal leiomyoma as an incidental finding on an abdominal ultrasound. The histology showed a well-circumscribed benign appearing undifferentiated spindle cell tumour. A panel of immunohistochemical stains and fluorescence in situ hybridisation studies showed features supporting a diagnosis of benign leiomyoma. Solitary lesions such as this are easily cured with surgical excision.

A RARE CASE OF TUMID LUPUS ERYTHEMATOSUS IN A PATIENT WITH FABRYS DISEASE – CASE REPORT

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Tumid lupus erythematosus (TLE) is a rare subtype of chronic cutaneous lupus, typically presenting as a photosensitive erythematous and oedematous plaque devoid of papulosquamous features.¹ Contrary to the other subtypes of cutaneous lupus erythematosus, TLE is rarely associated with systemic lupus erythematosus and thus has a relative lack of serological abnormalities. In the following case, we describe an individual with a history of Fabry's disease, on immunosuppressive therapy, with a subsequent TLE lesion on his left forearm, confirmed histologically.

Although there is no literature to-date on the coexistence of these two conditions, it is important to raise awareness of this possible occurrence to ensure that timely diagnosis and appropriate management can ensue.

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UNDERSTANDING THE TUMOUR IMMUNE MICROENVIRONMENT OF STAGE III COLORECTAL CANCER USING MULTIPLEXED IMAGING MASS CYTOMETRY

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Background/Aim: The tumour immune microenvironment is spatially heterogeneous and plays a crucial role in cancer progression and response to therapy. Current histopathological