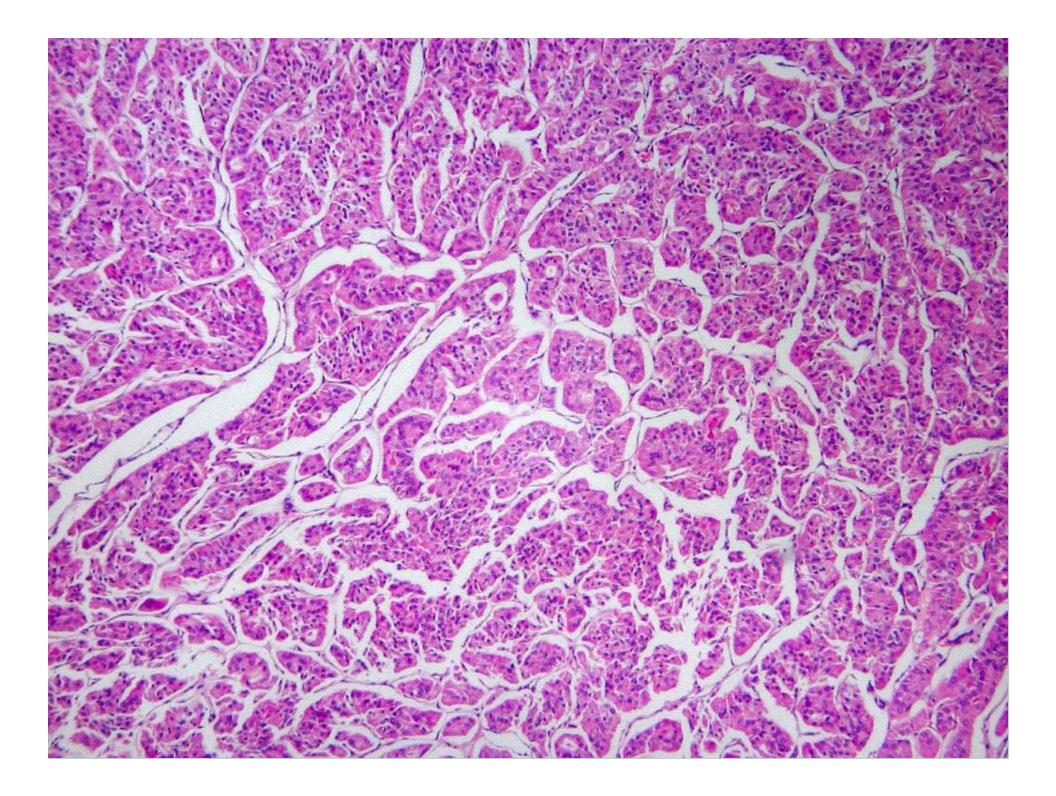
## CASO DO MÊS

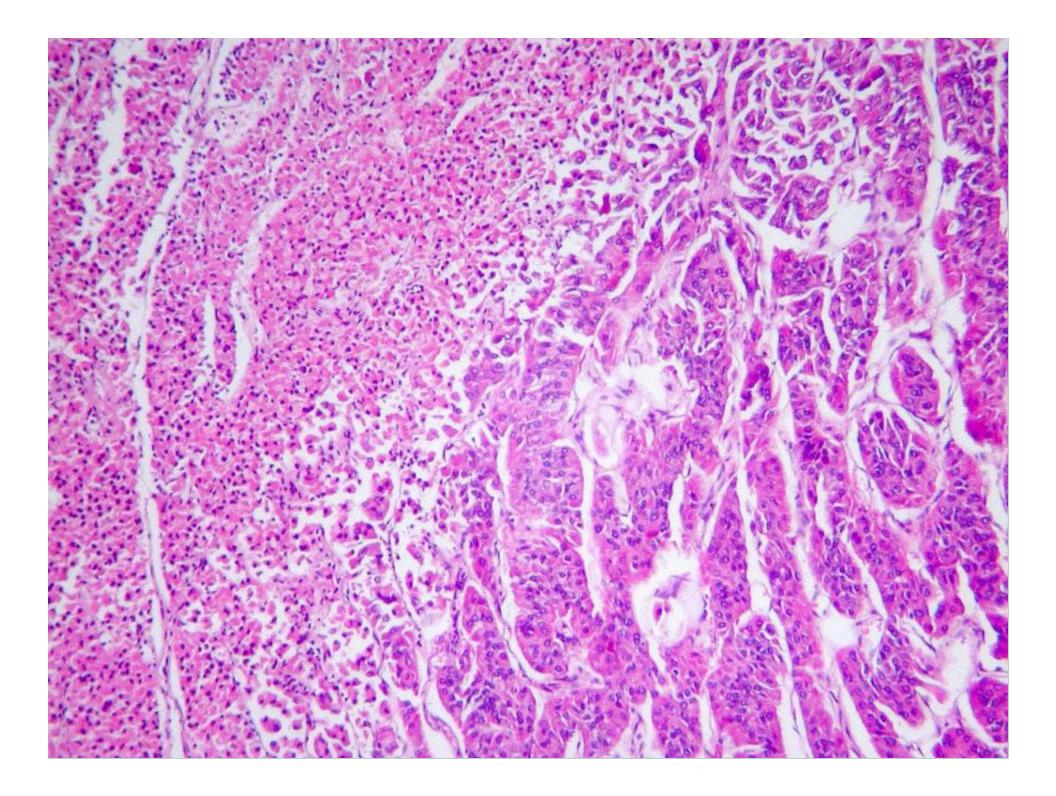
# SOCIEDADE BRASILEIRA DE PATOLOGIA

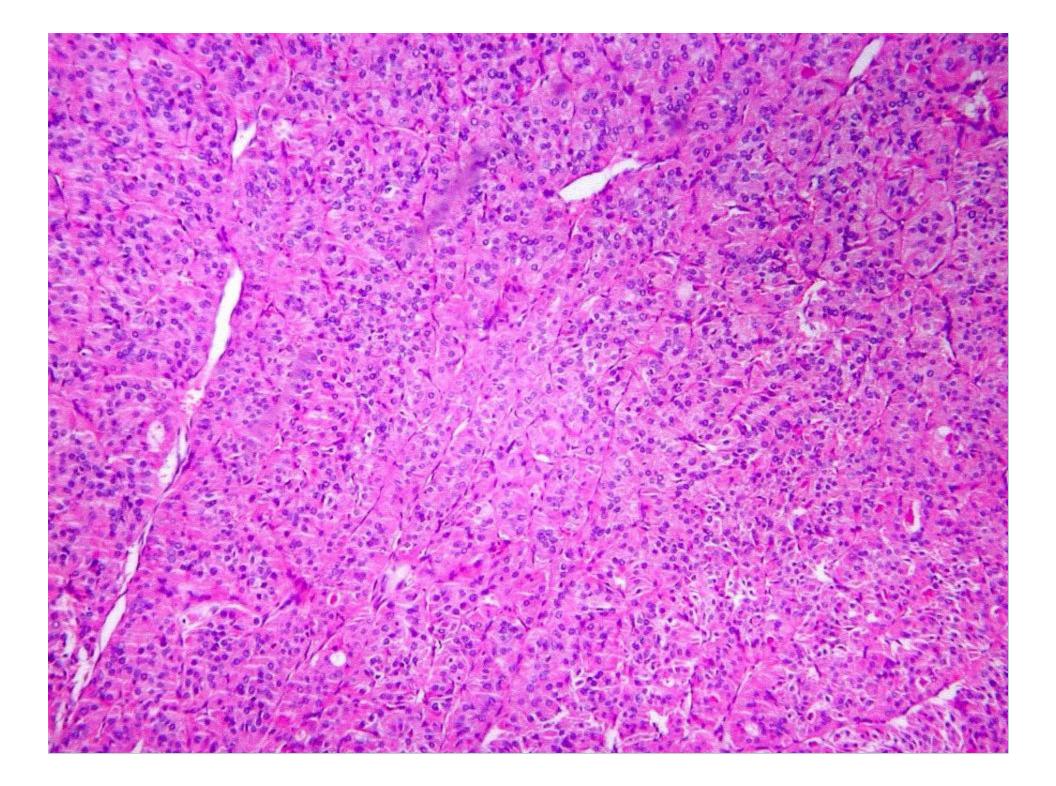
Emílio Marcelo Pereira

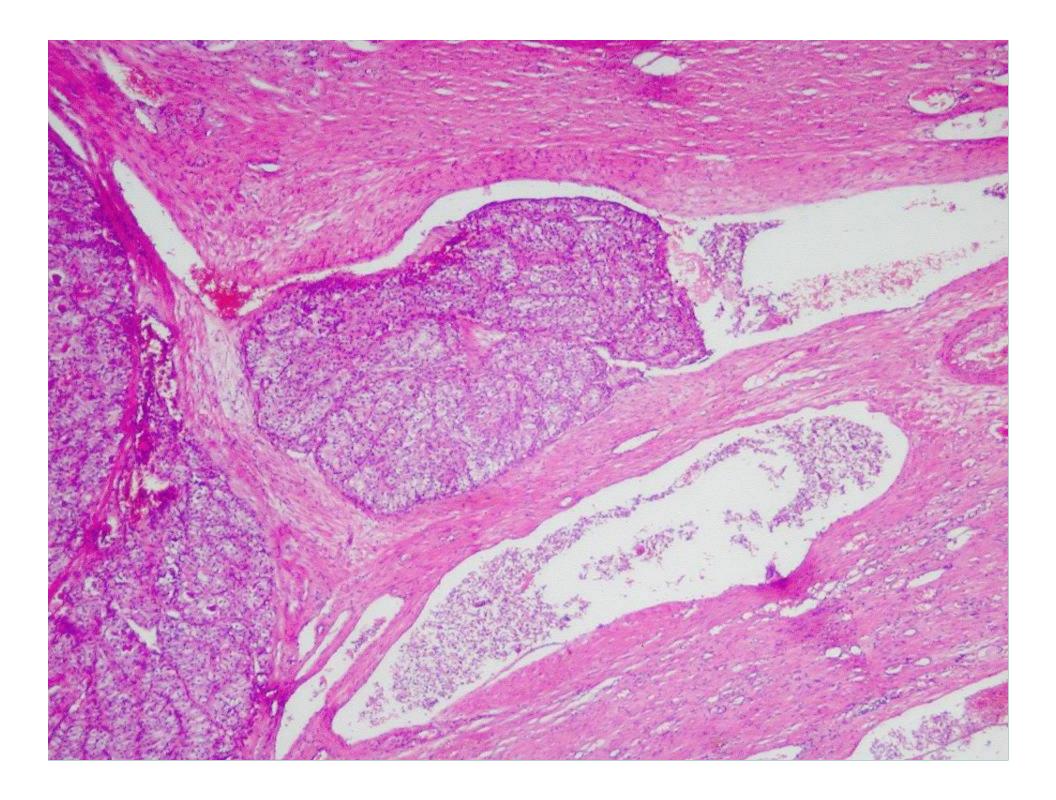
## Informes clínicos

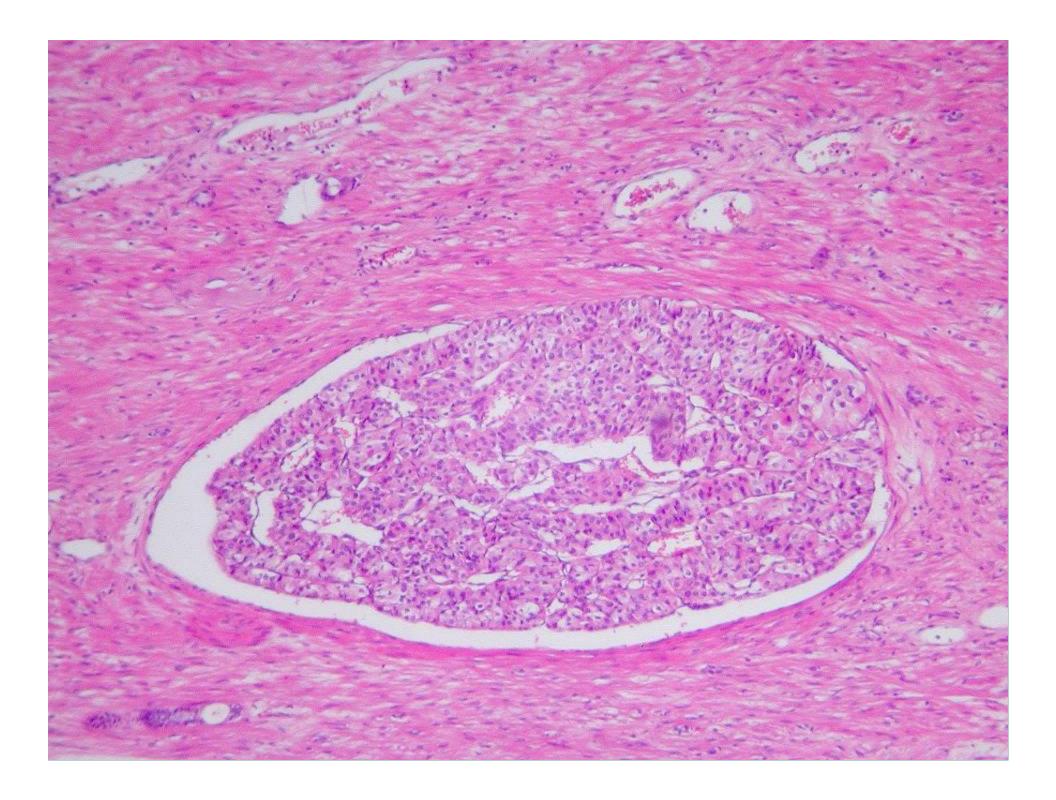
Paciente do sexo masculino, 59 anos, com tumor do rim direito, medindo 11,5 x 10,6 cm.

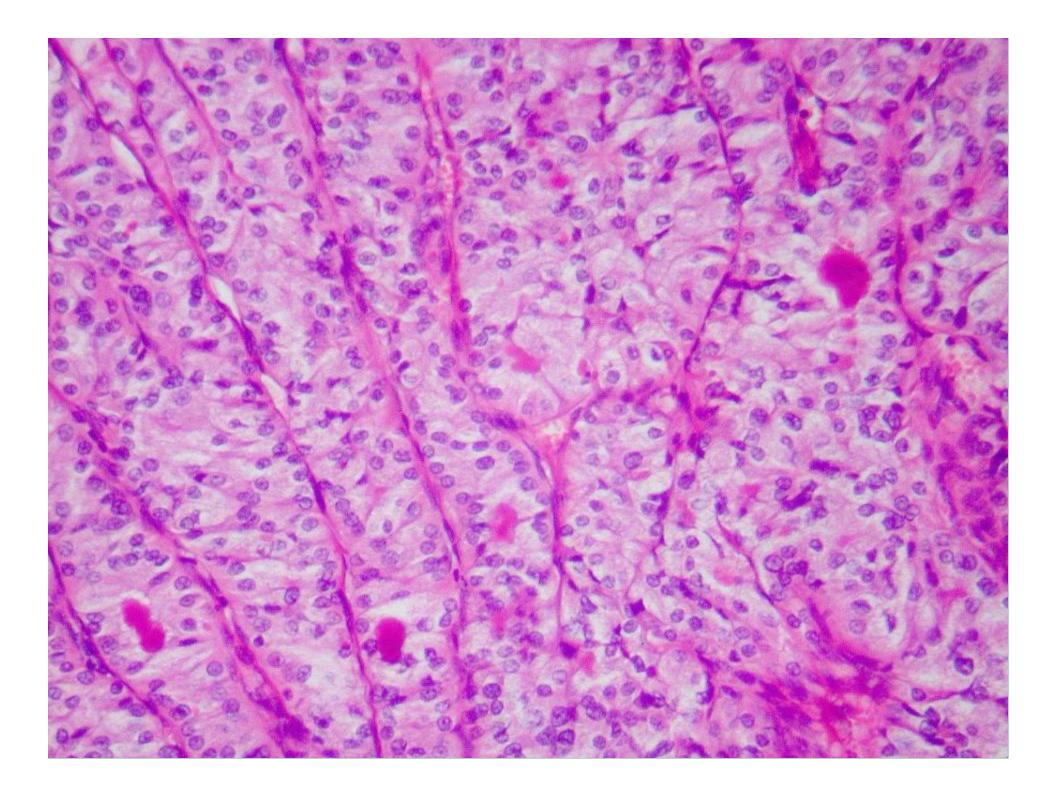


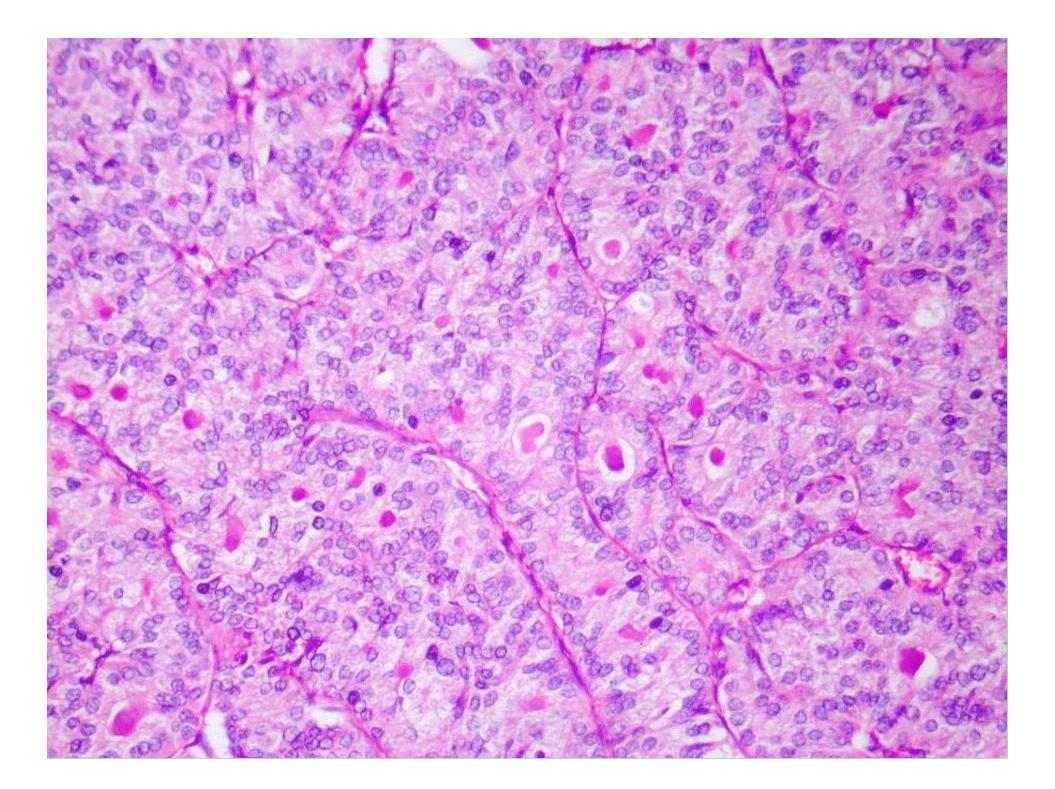


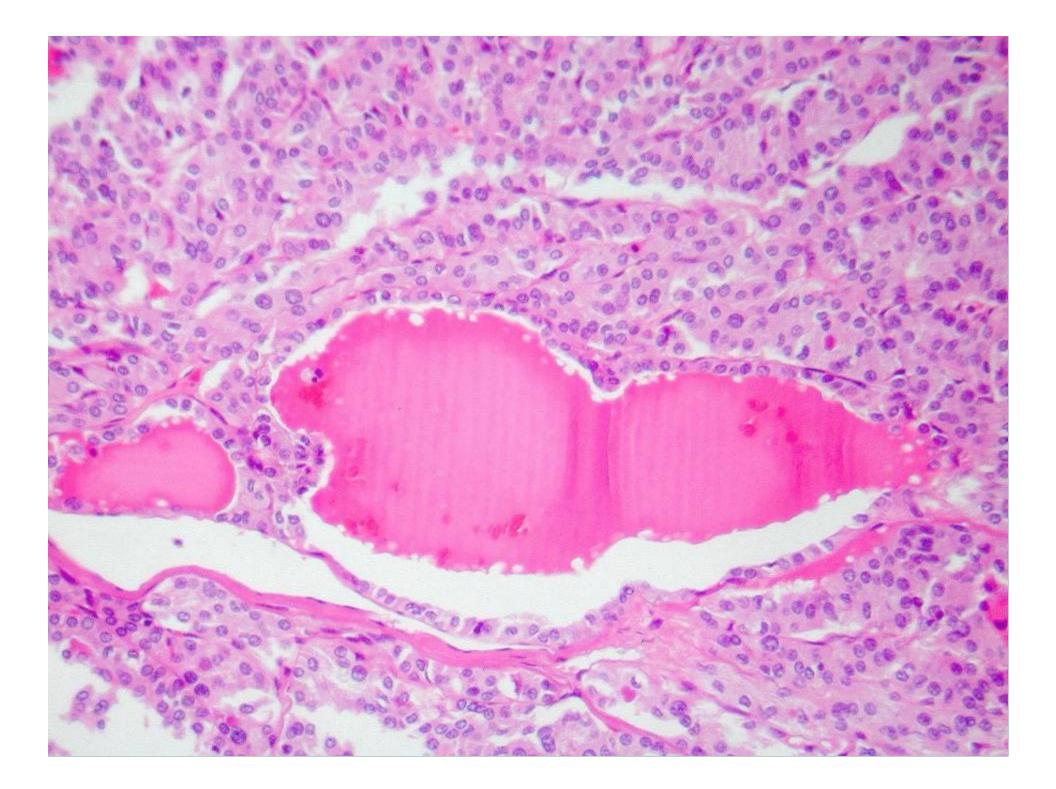


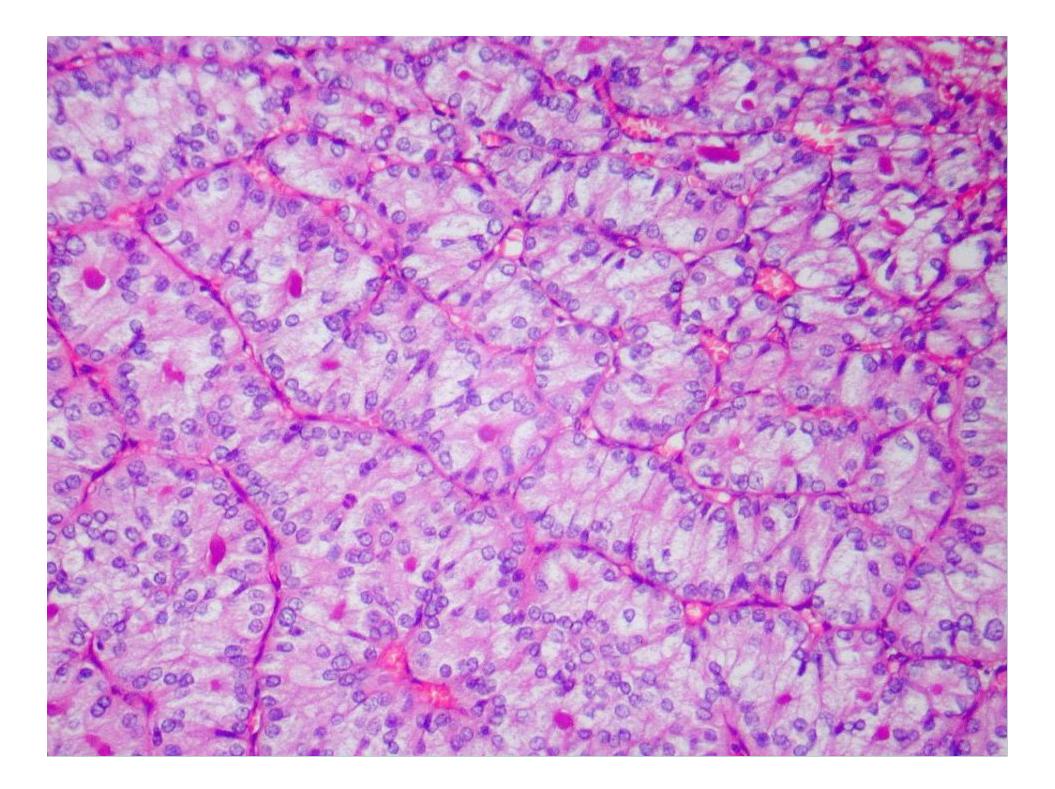


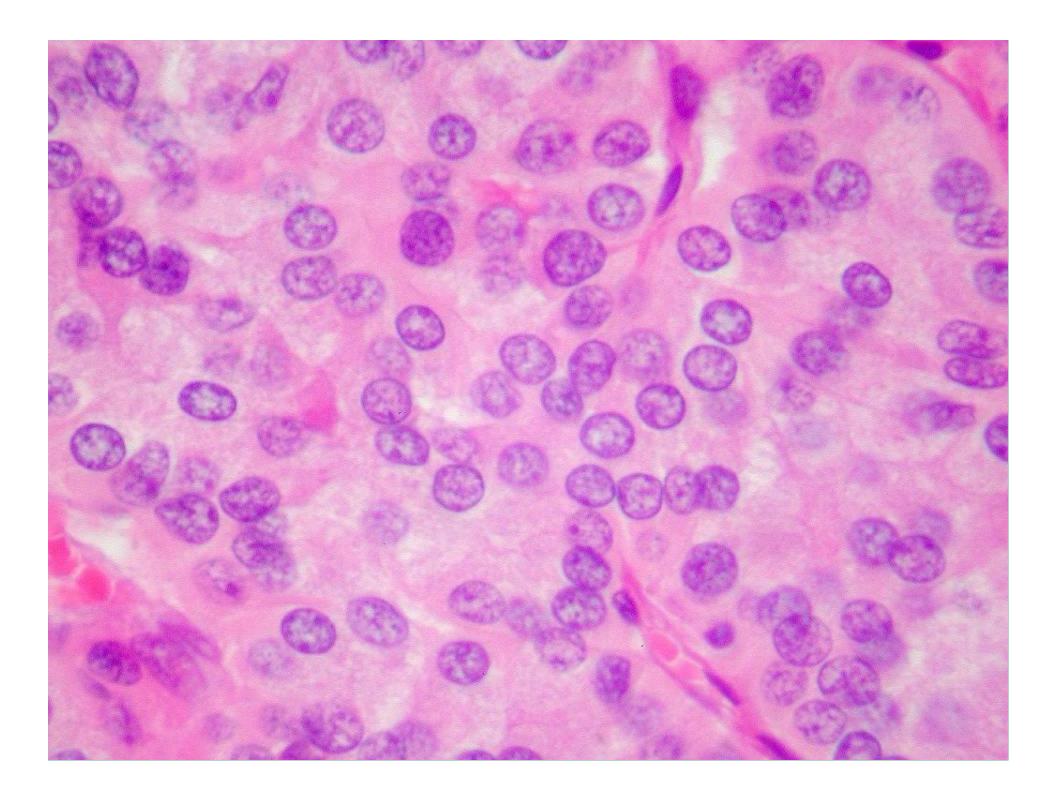






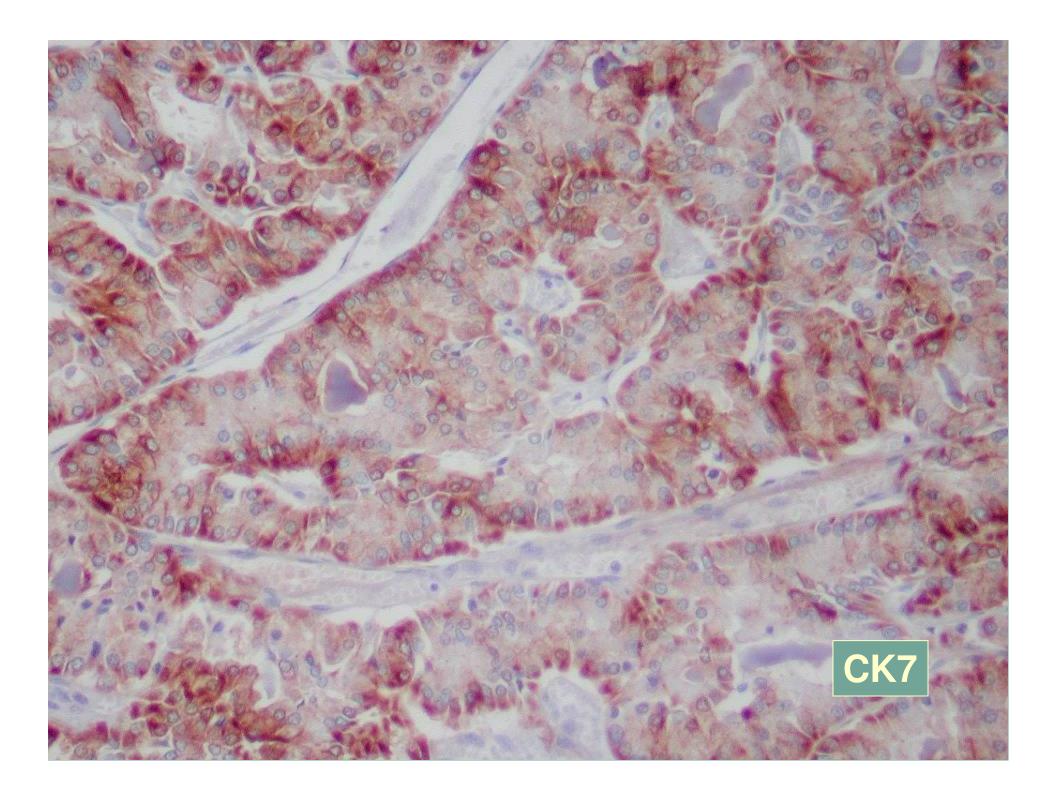


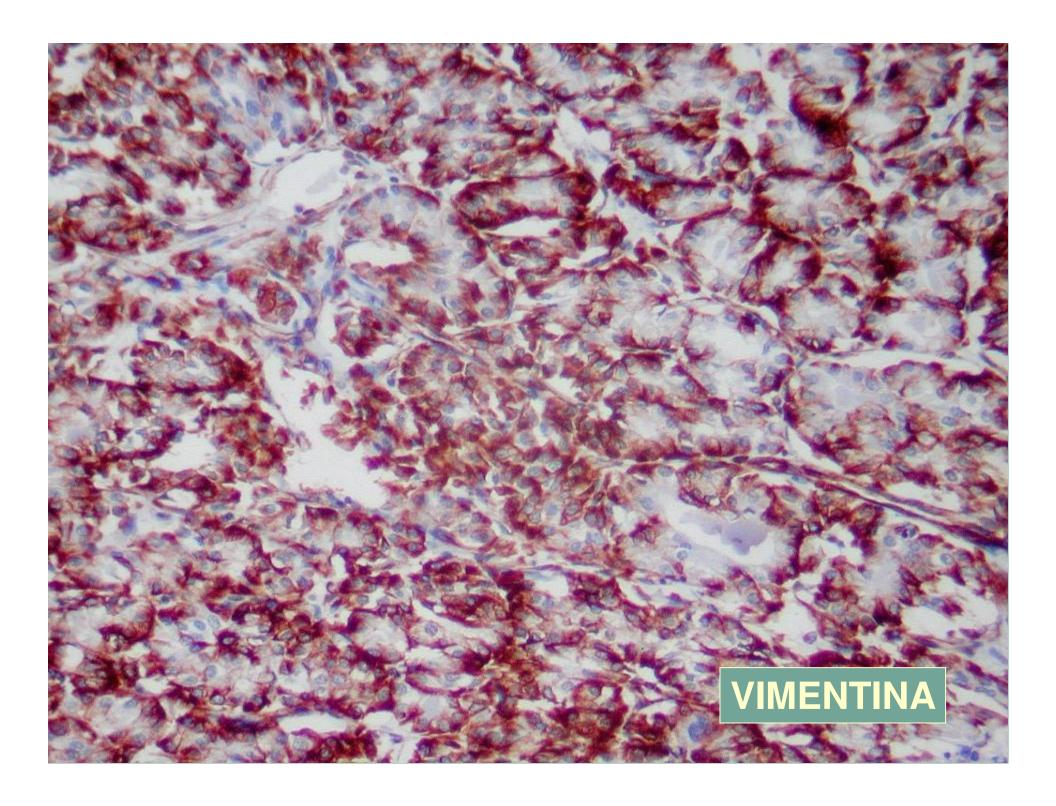


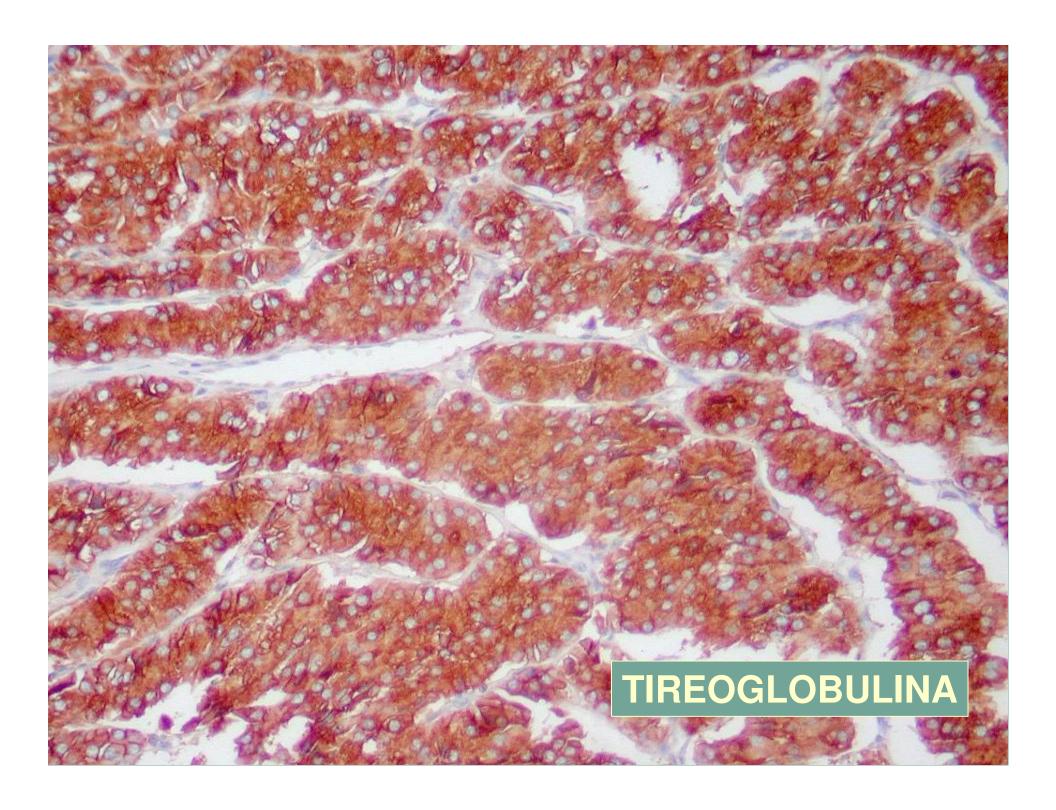


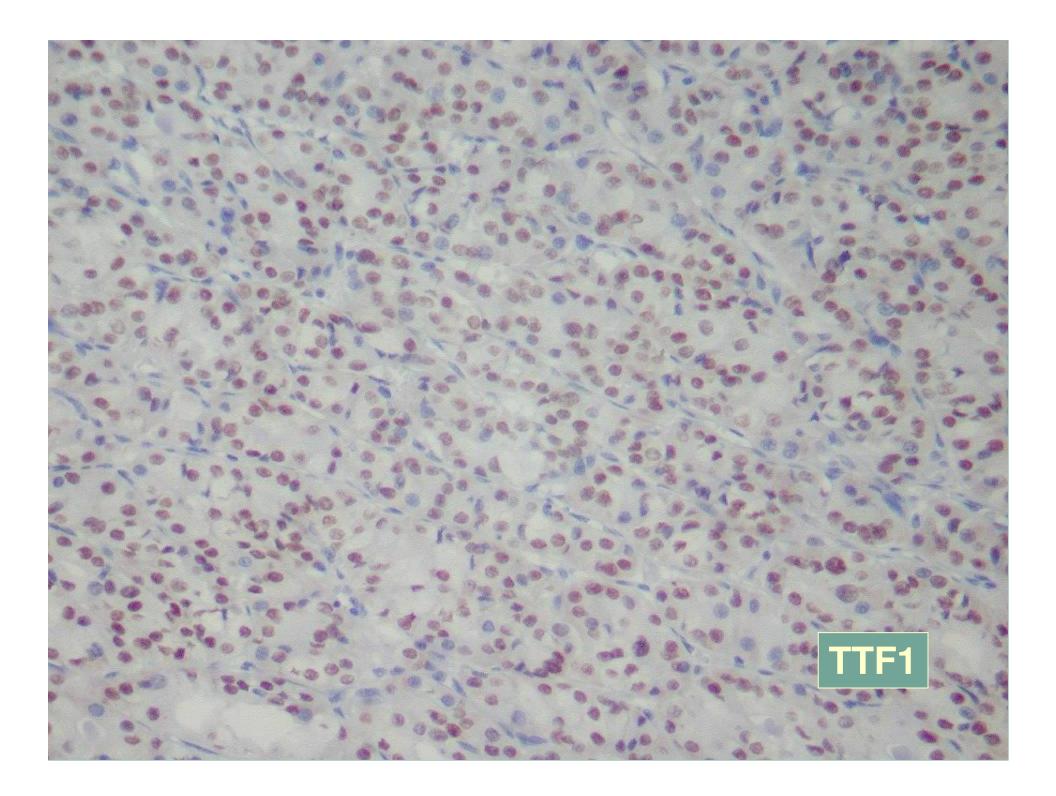
## DIAGNÓSTICO

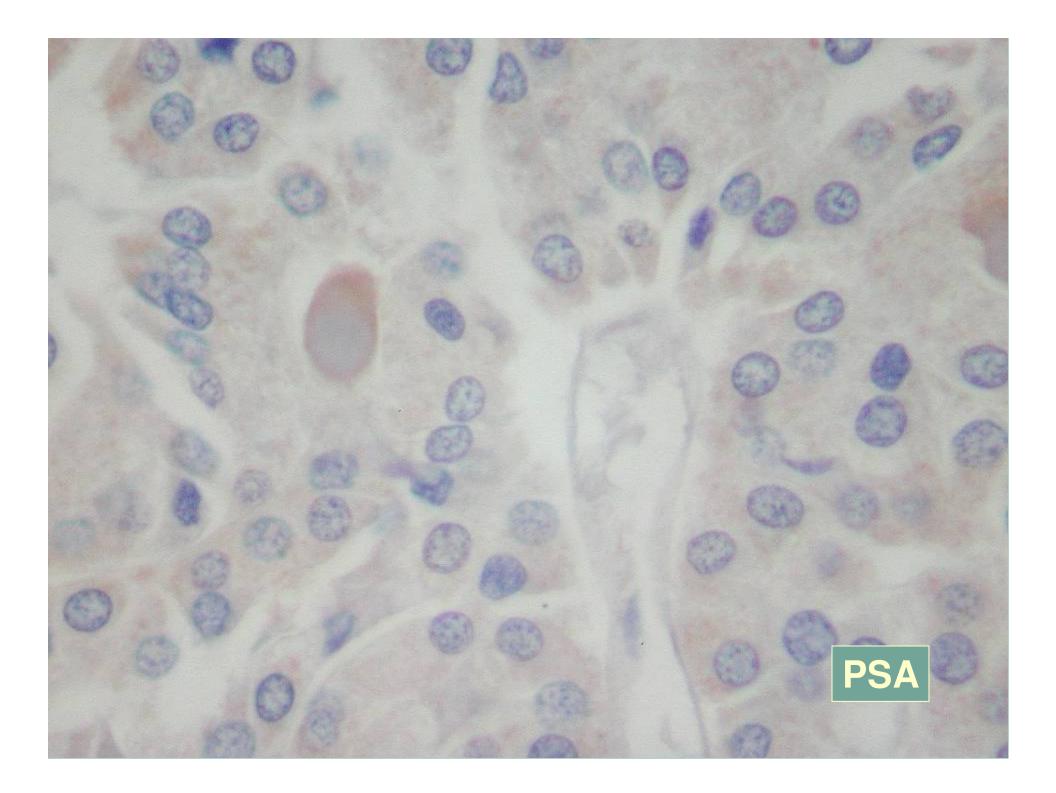
Carcinoma folicular da tireóide metastático no rim (?)

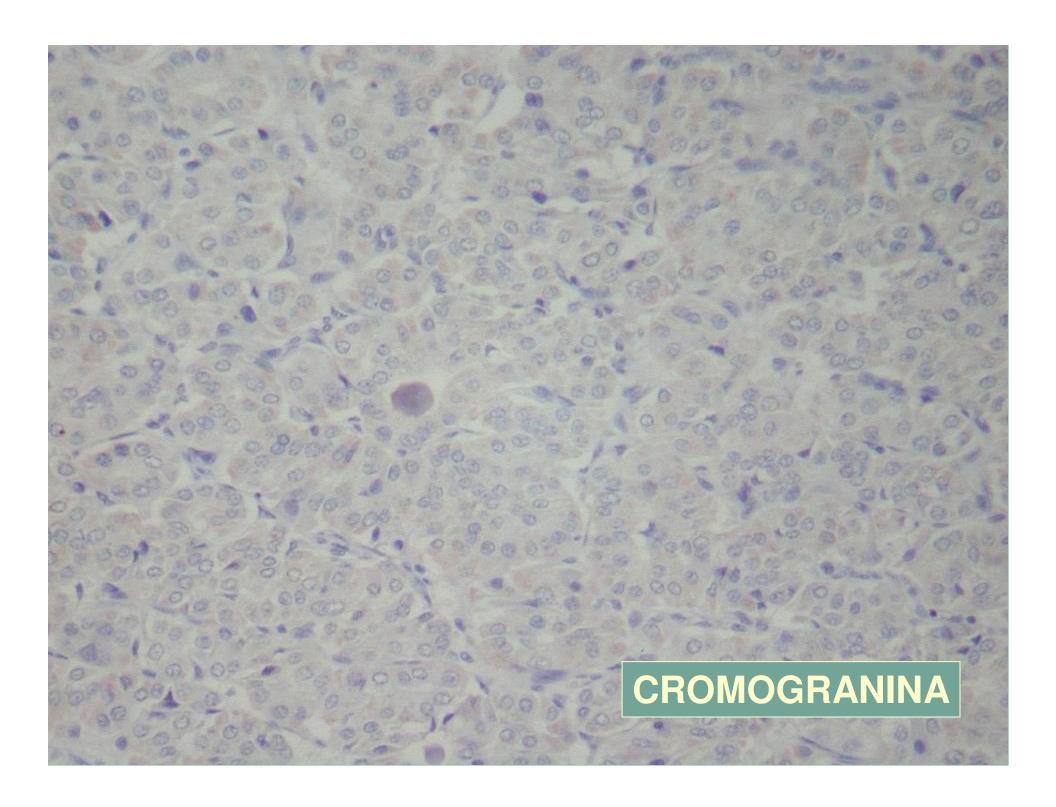


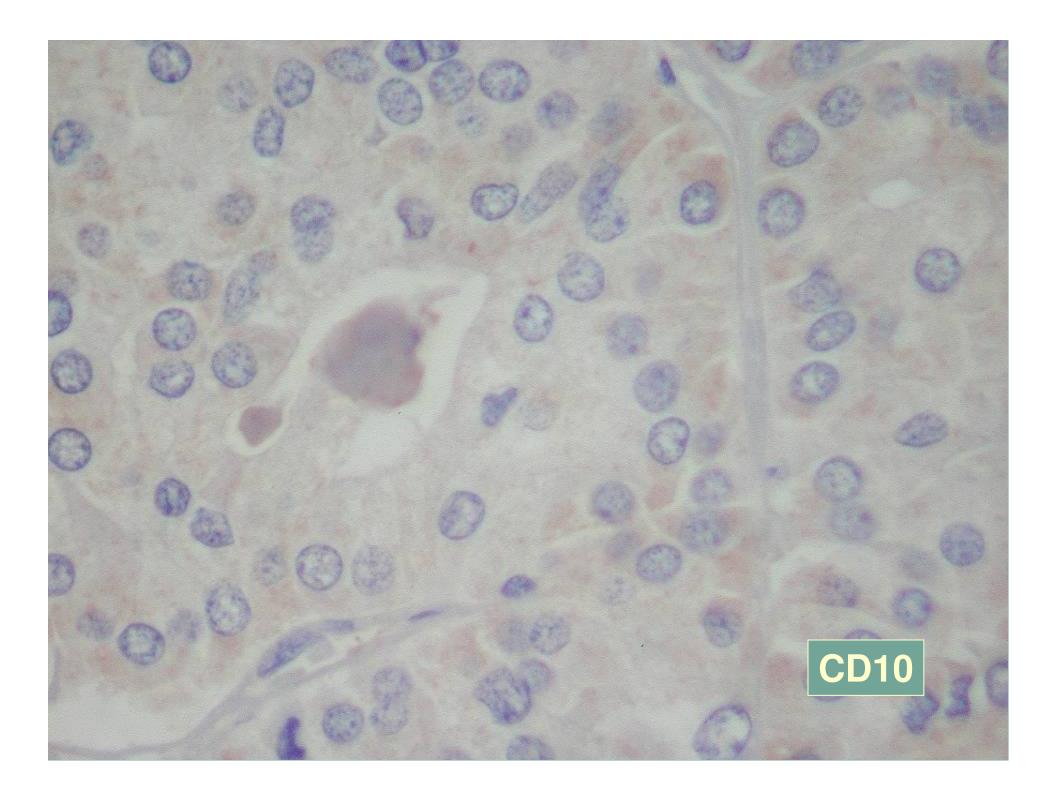












## DIAGNÓSTICO

# Carcinoma folicular da tireóide metastático no rim

Takayasu H, Kumamoto Y, Terawaki Y et al.

A case of bilateral renal tumor originating from a thyroid carcinoma.

J. Urol.1968;100: 717-9.

## Metástases renais Aspectos clínicos

- o Mais frequentemente descritas em estudos de autópsia
- o 4 casos de metástases / 1 Ca renal primário
- o Pacientes com câncer: 4,6 7,6% tem metástases na autópsia
- o Bilaterais e múltiplas em 71 81% dos casos de autópsia por câncer

## Metástase renal

o Ca de pulmão, Ca de mama, Melanoma e Ca gástrico (1,5 -1,8% dos casos)

o Prognóstico pior que ca renal primário



G Barkan, C Magi-Galluzzi, L Sercia, E Wojcik, M Pickens, M Zhou.

Cleveland Clinic, Cleveland, OH; Loyola University, Chicago, IL

- o 30/5615 (0.53%) renal masses
- Lung squamous cell carcinoma (7 cases)
- Lung adenocarcinoma (4)
- o Gastrointestinal adenocarcinoma (4)
- o Breast adenocarcinoma (2)
- o Melanoma (3),
- o Seminoma (2)
- o Thyroid papillary carcinoma (1), ovarian papillary serous carcinoma (1), uterine leiomyosarcoma (1), brain hemangiopericytoma (1), cervical squamous cell carcinoma (1), small cell carcinoma (1) and adenosquamous carcinoma (1)

**USCAP - 2007** 

## Carcinoma de tireóide

o Sobrevida de 10 anos > 90%

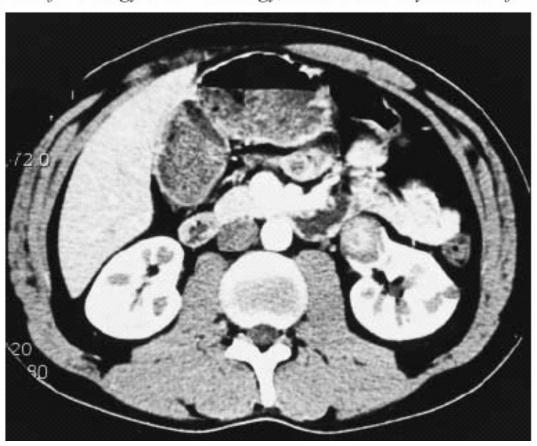
o Sítios de metástase a distância: pulmão (50%) e osso (18%)

#### Case Report

#### Renal metastasis of thyroid carcinoma

KAZUHIRO ABE,¹ TARO HASEGAWA,¹ SHOICHI ONODERA,¹ YUKIHIKO OISHI¹ AND MASAFUMI SUZUKI²

Departments of <sup>1</sup>Urology and <sup>2</sup>Pathology, Jikei University School of Medicine, Tokyo, Japan



# Carcinoma de tireoide metastático no rim

- o 20 casos relatados
- o Hematúria
- o 7 a 37 anos após TTO do Carcinoma da tireóide
- o 11 Ca papilífero (+ variante folicular)
- o 8 Ca folicular
- o 6 rim D, 8 rim E e 4 bilateral
- Rara/ metástase precede o diagnóstico do Carcinoma da tireóide

# • • Diagnósticos Diferenciais

- o Carcinoma de células renais papilífero
  - pode ser bilateral e multifocal
- o Carcinoma folicular tireóide-símile primário do rim



#### PRIMARY THYROIDLIKE CARCINOMA OF THE KIDNEY

SCOTT K. ANGELL, RAJ PRUTHI, AND FUAD S. FREIHA

UROLOGY 48: 632-635, 1996.

In conclusion, this patient presents with an incidentally discovered, unusual papillary tumor in the kidney that histologically and cytochemically resembles a localized, malignant papillary thyroid cancer. Her clinical presentation and workupincluding a normal physical examination, serum thyroglobulin, pelvic and neck ultrasound, and no evidence of recurrent disease after 18 monthsfavor the diagnosis of a primary thyroid carcinoma of the kidney, a pathologic process not previously described.

Primary thyroid-like follicular carcinoma of the kidney: a histologically distinctive primary renal epithelial tumor

[Abstract]. Mod Pathol.2004;17:136–137. Amin MB, Michal M, Radhakrishnan A, et al.

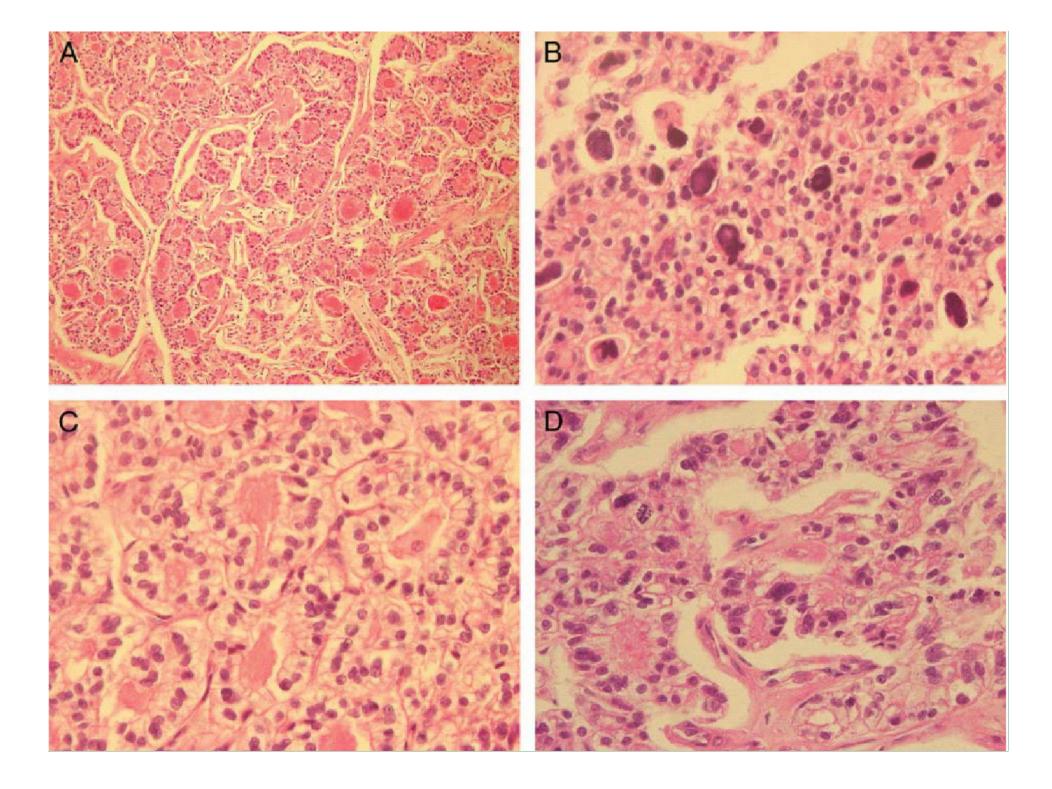
(Am J Surg Pathol 2006;30:411–415)

#### Thyroid Follicular Carcinoma-like Tumor of Kidney

A Case Report With Morphologic, Immunohistochemical, and Genetic Analysis

Soo Jin Jung, MD,\* Jae Il Chung, MD,† Sun Hwa Park, MD,‡ Alberto G. Ayala, MD,\$ and Jae Y. Ro, MD\$

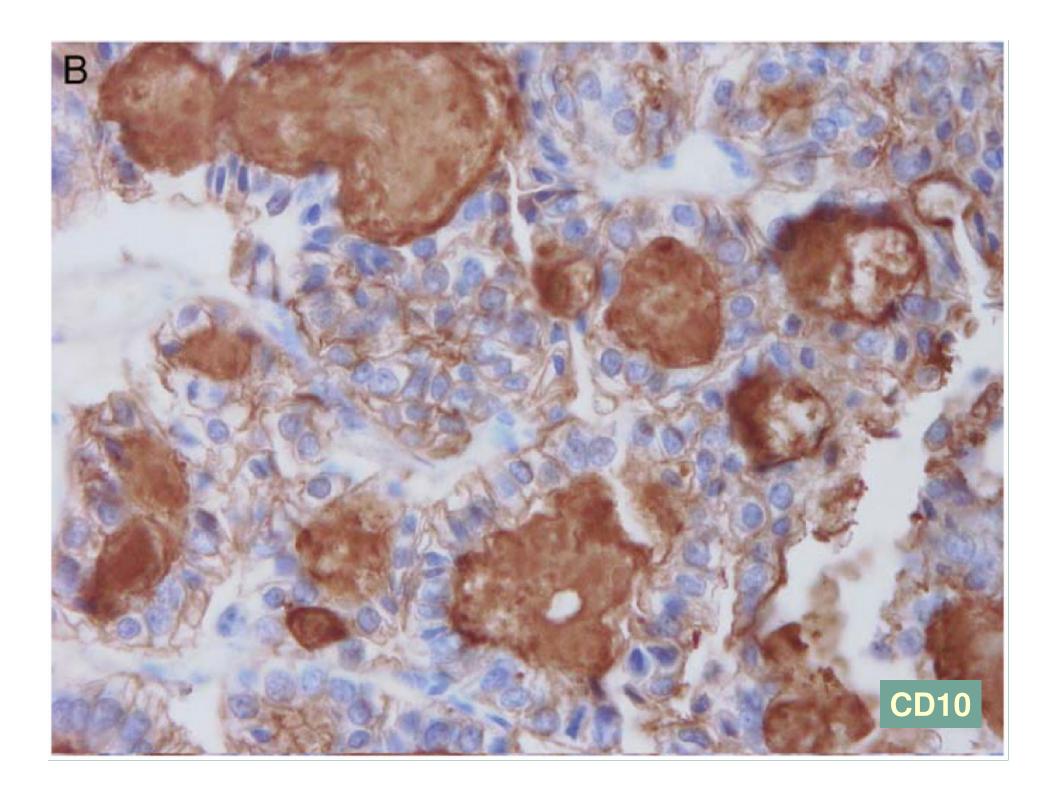




**TABLE 1.** Antibodies Used for Immunohistochemical Staining and Results

Antibody	Source	Dilution	Result
CK AE1/AE3 (m)	DAKO	1:100	Positive
CD10 (m)	Novocastra	1:100	Positive
CK 35βH11 (m)	DAKO	1:50	Focal positive
Vimentin (m)	DAKO	1:100	Focal positive
CK 7 (m)	DAKO	1:100	Negative
CK19 (m)	DAKO	1:100	Negative
CK 20 (m)	DAKO	1:50	Negative
CK 34βE12 (m)	DAKO	1:50	Negative
EMA (m)	DAKO	1:100	Negative
CEA (p)	DAKO	1:200	Negative
CD15 (m)	DAKO	1:50	Negative
Thyroglobulin (m)	DAKO	1:100	Negative
TTF (m)	DAKO	1:50	Negative

m, monoclonal; p, polyclonal antibody; EMA, epithelial membrane antigen; CEA, carcinoembryonic antigen.



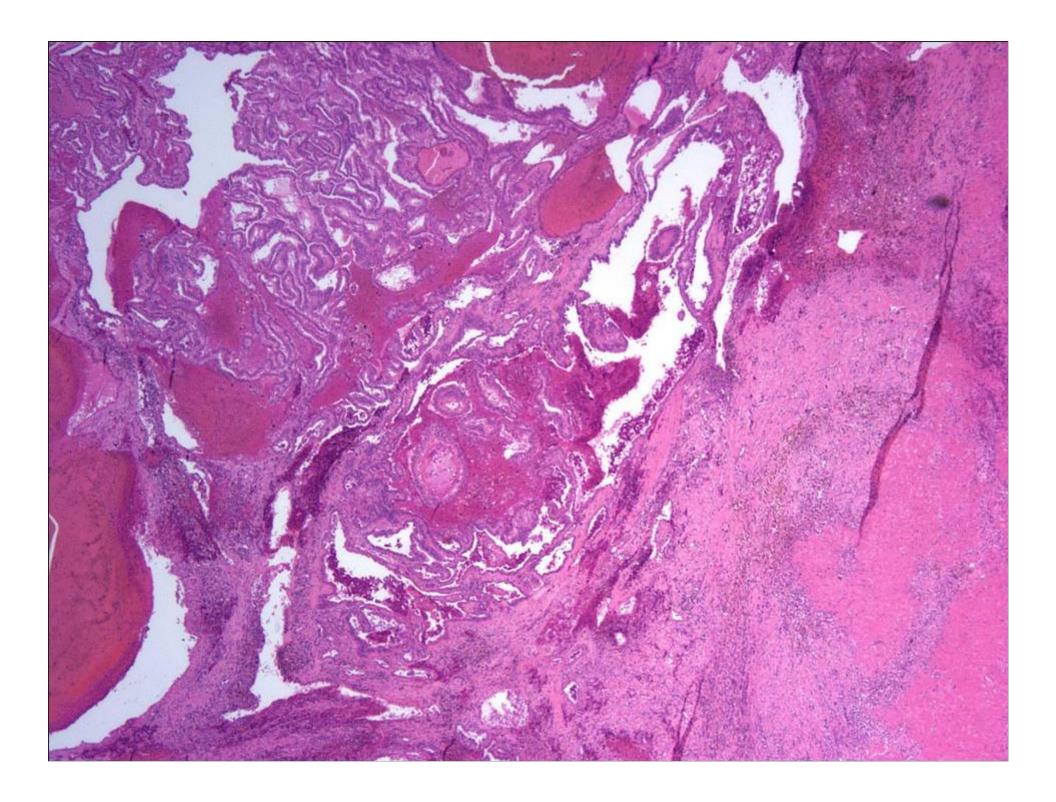


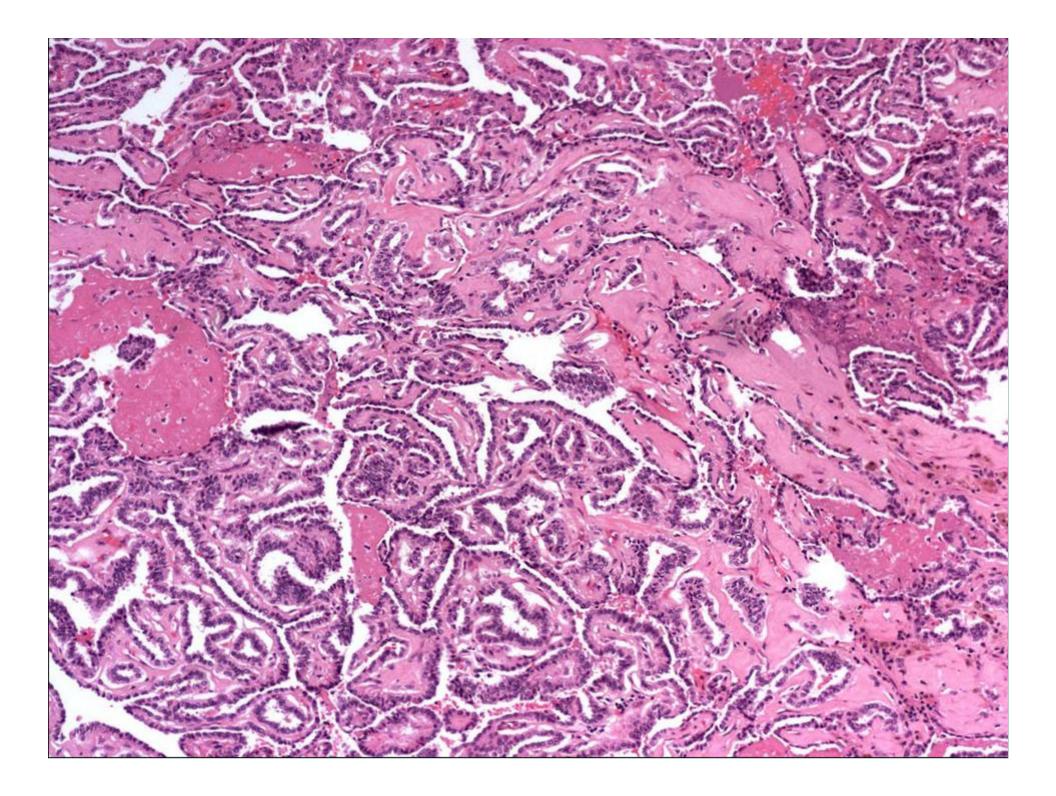
# Cristina Magi-Galluzzi Cleveland Clinic, Cleveland, OH

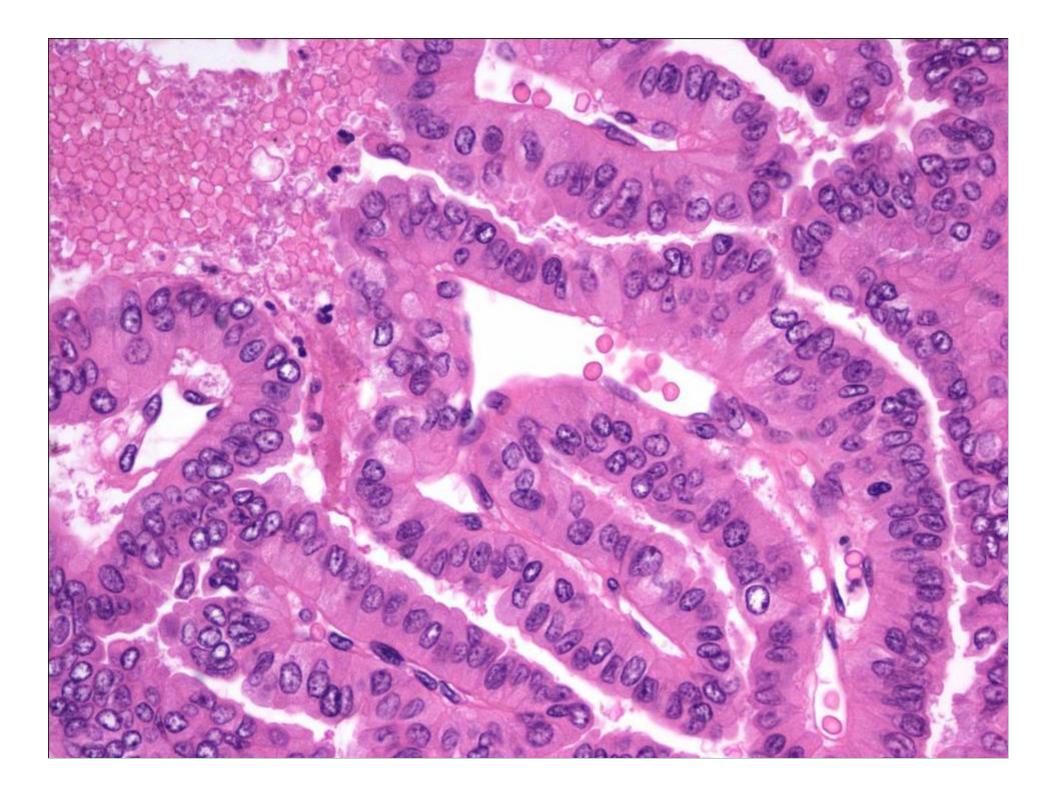
**USCAP -2007** 

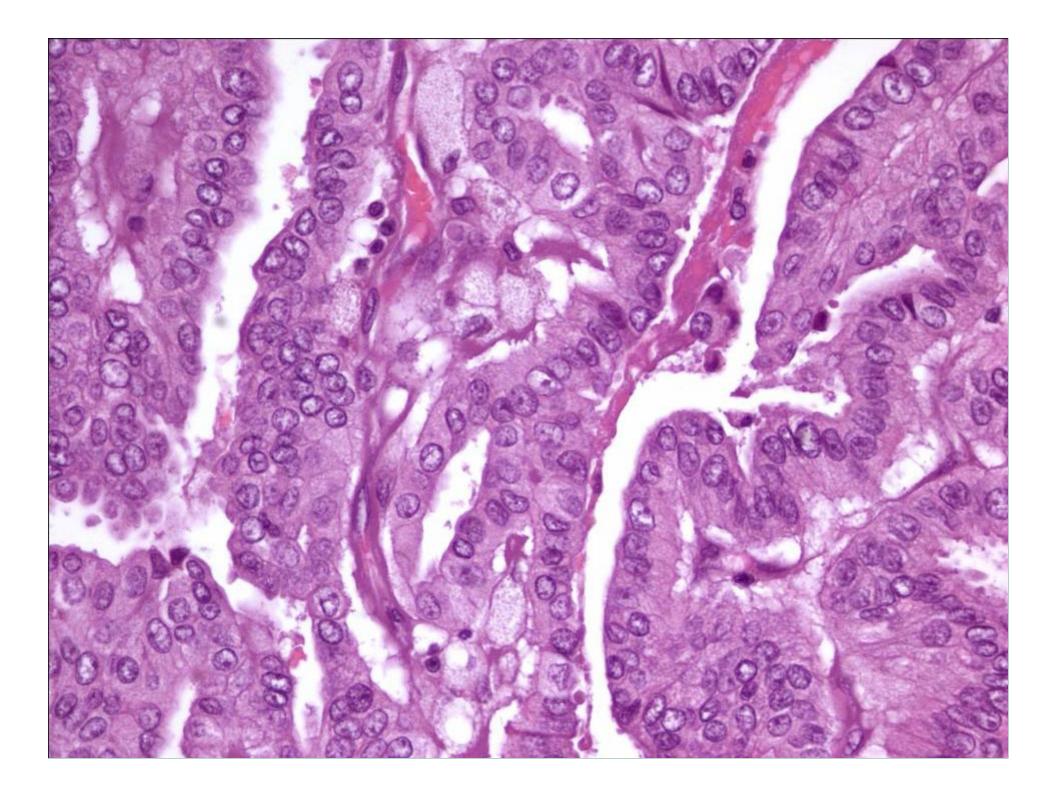
#### Clinical Summary:

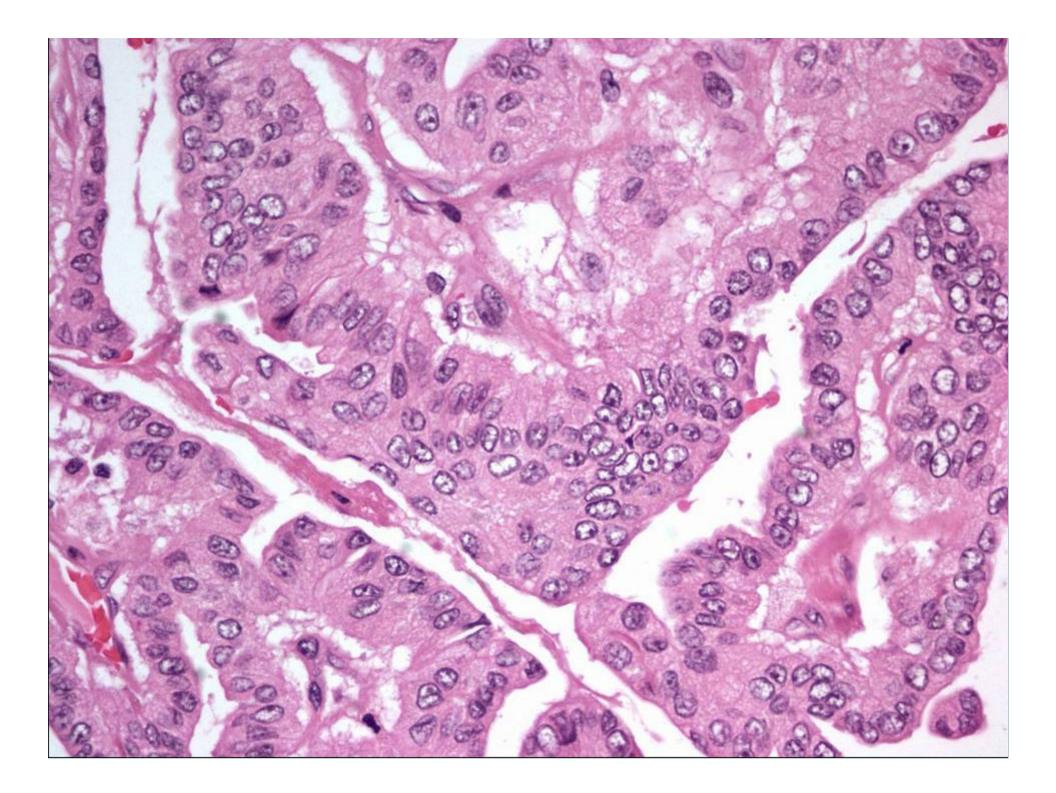
A 63-year-old man presented with a complaint of two months duration of heartburn, regurgitation after eating, accompanied with nausea, vomiting, and easy satiety. He also reported a weight loss of 10 lb. over a short period of time, and lack of appetite. At about the same time he started having black stools, and reported feeling of dizziness. A duodenal mass was found on endoscopy. An abdominal CT showed a partially cystic mass in the right abdomen originating either in the kidney or in the adrenal gland. Patient underwent angio-infarction and subsequent (5 months later) resection of a large right kidney mass. During the course of resection, it was discovered that the tumor had eroded into the duodenum with a pyeloduodenal fistula. Grossly most of the kidney was involved by a neoplastic process partially solid, cystic and extensively necrotic. The largest solid area of tumor (Figure 1-7) was located in the lower pole and measured 3.0 cm in diameter.

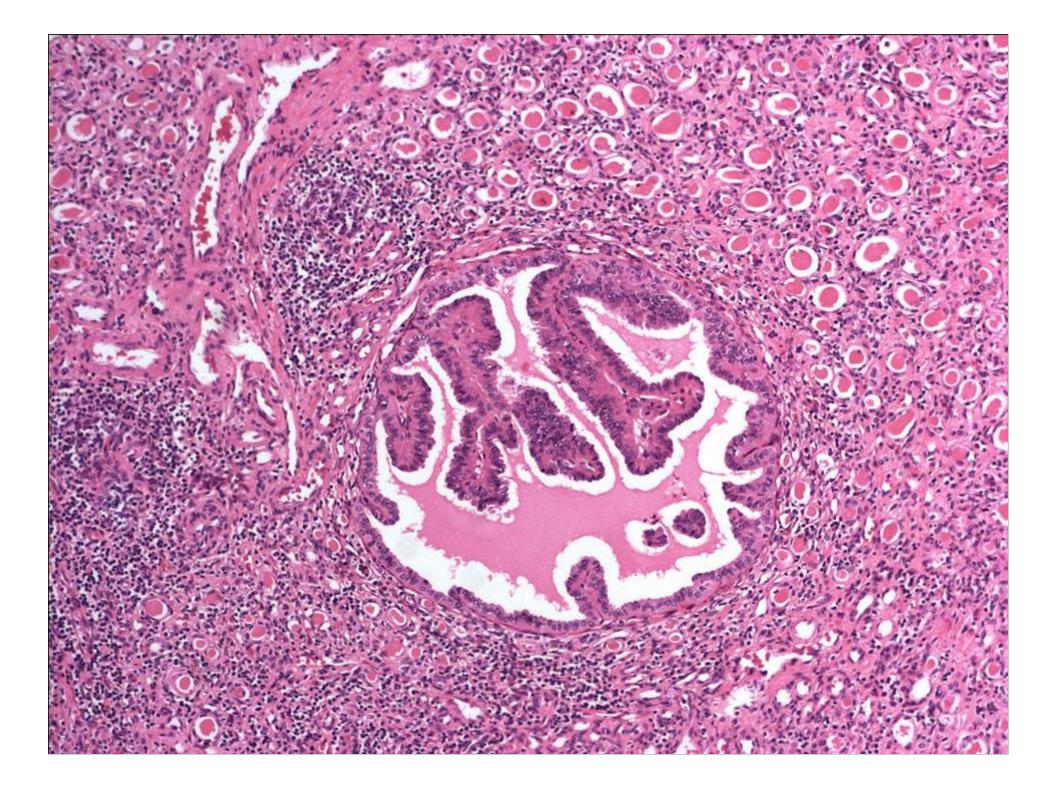


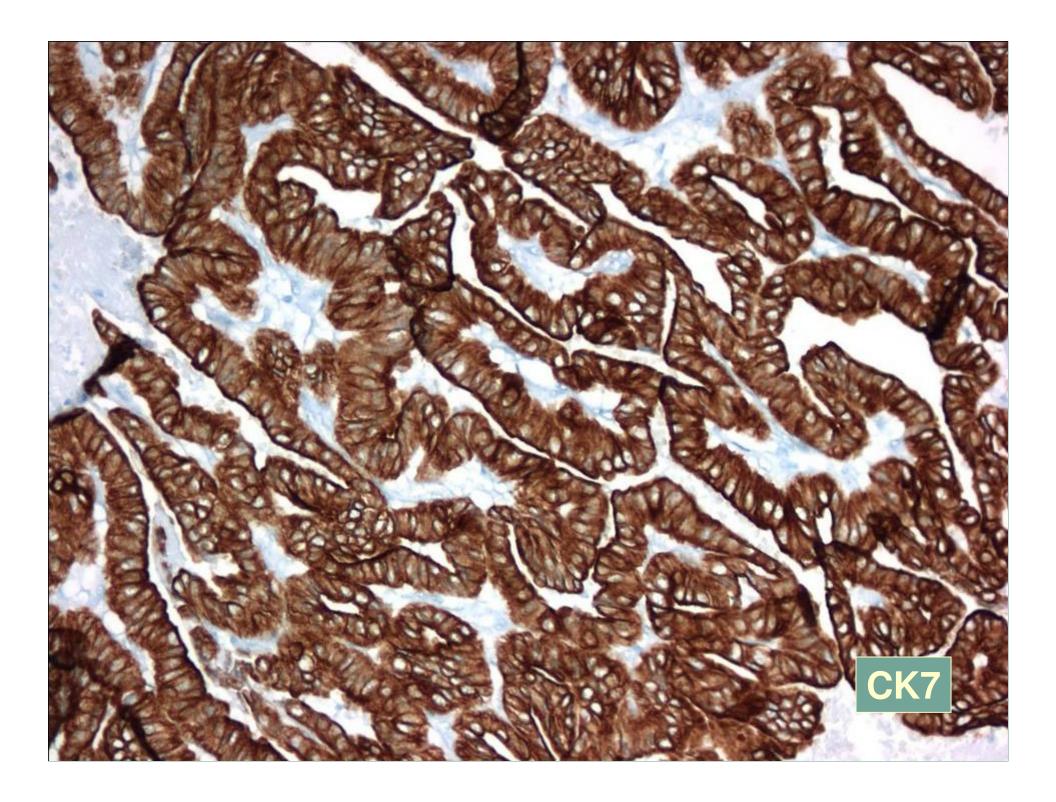


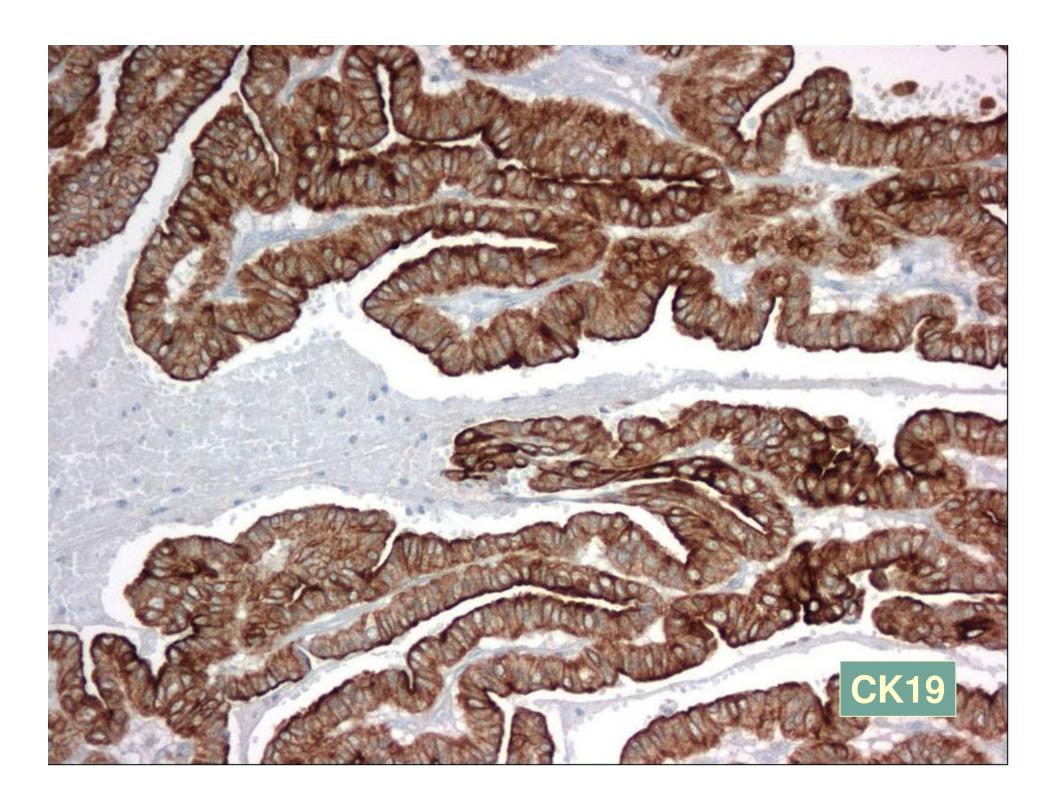


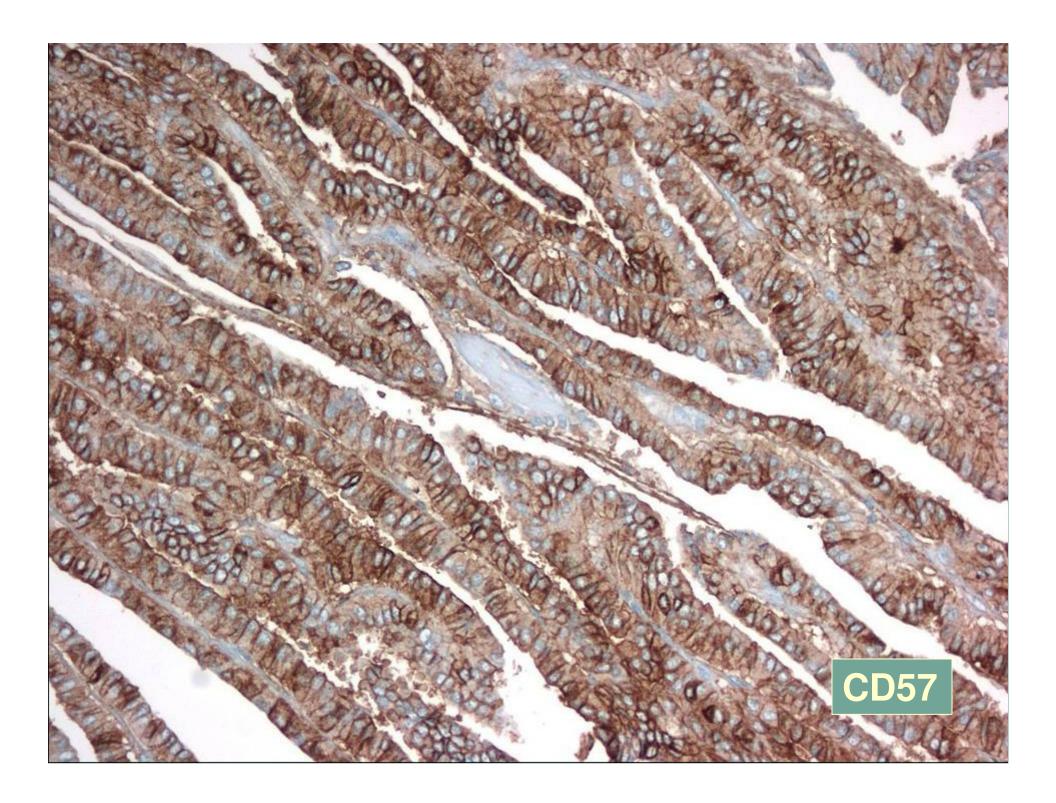


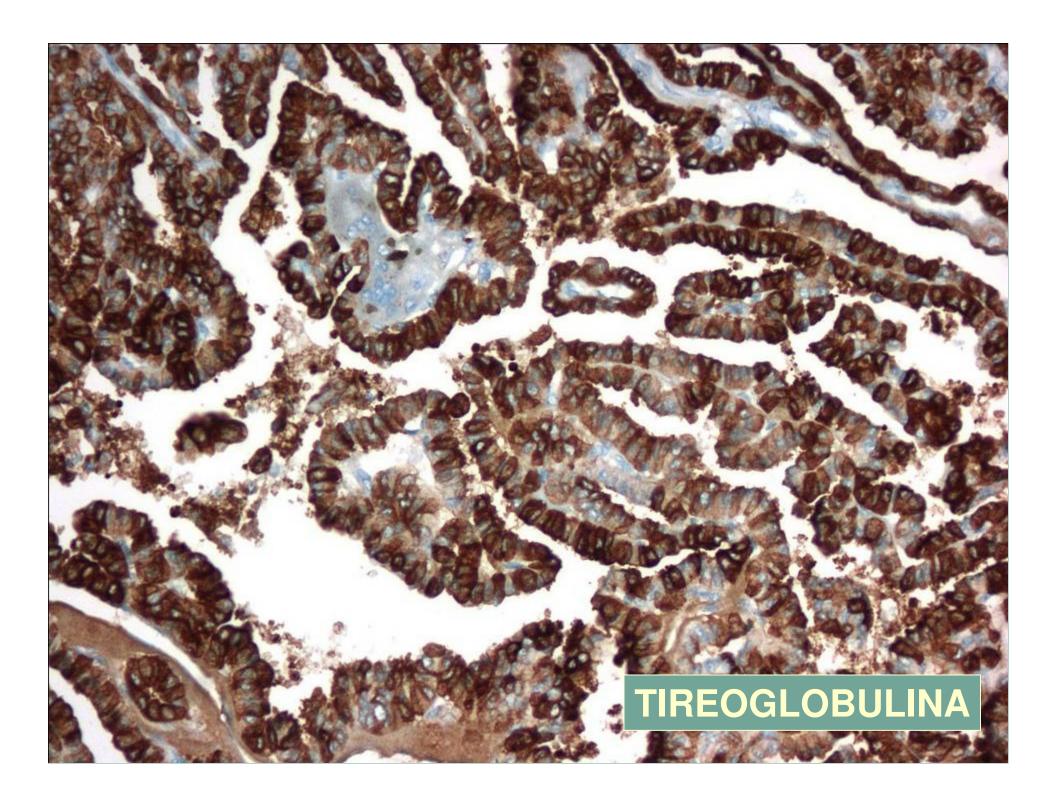


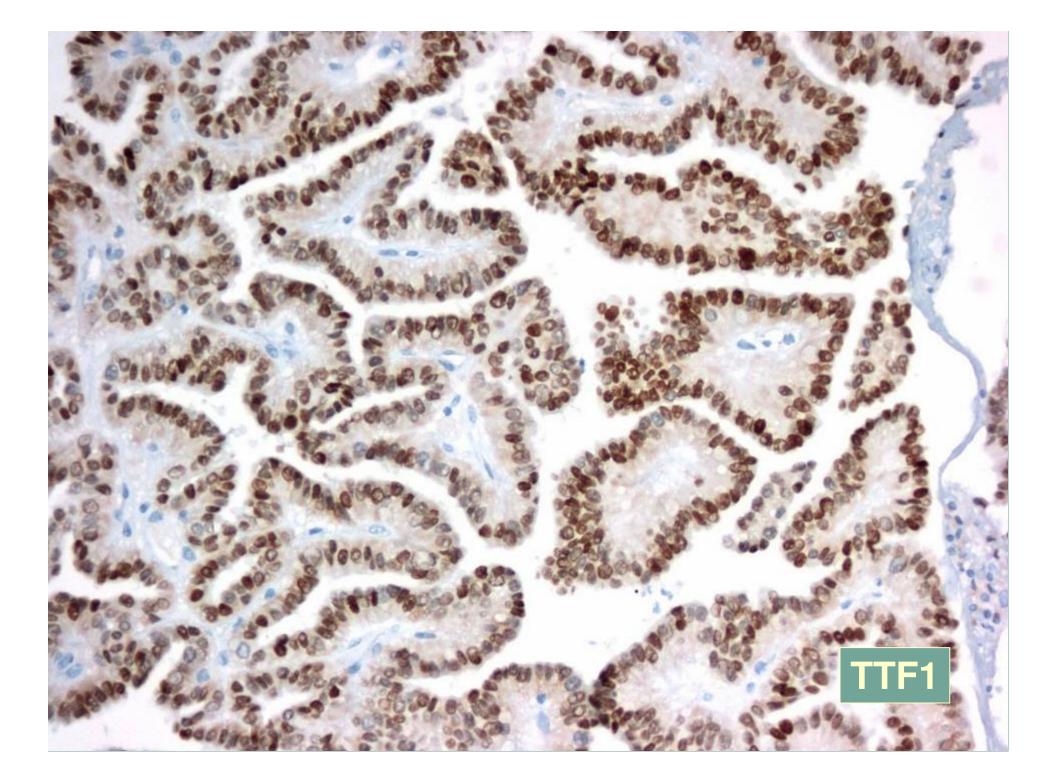












## **Take Home Points**

- Primary renal cell carcinomas (RCC) are rarely bilateral; by contrast, metastatic tumors to the kidney are frequently (71-81%) bilateral and multiple.
- Renal metastasis should be suspected whenever there is a known primary.
- Secondary lesions to the kidney occur more commonly in patients with lung tumors, breast cancer, melanoma, gastric carcinoma and lymphoma.
- The overlapping IHC profile between some primary RCC and metastatic tumors to the kidney highlights the importance of clinicopathologic correlation, and demonstrates the importance of using a panel of antibodies in differentiating these tumors through immunohistochemistry.

## CASO DO MÊS

## Agradecemos a sua participação

