

History:

66YOF with a destructive lytic lesion involving the whole right mandibular body, ramus with floating teeth and maxilla.

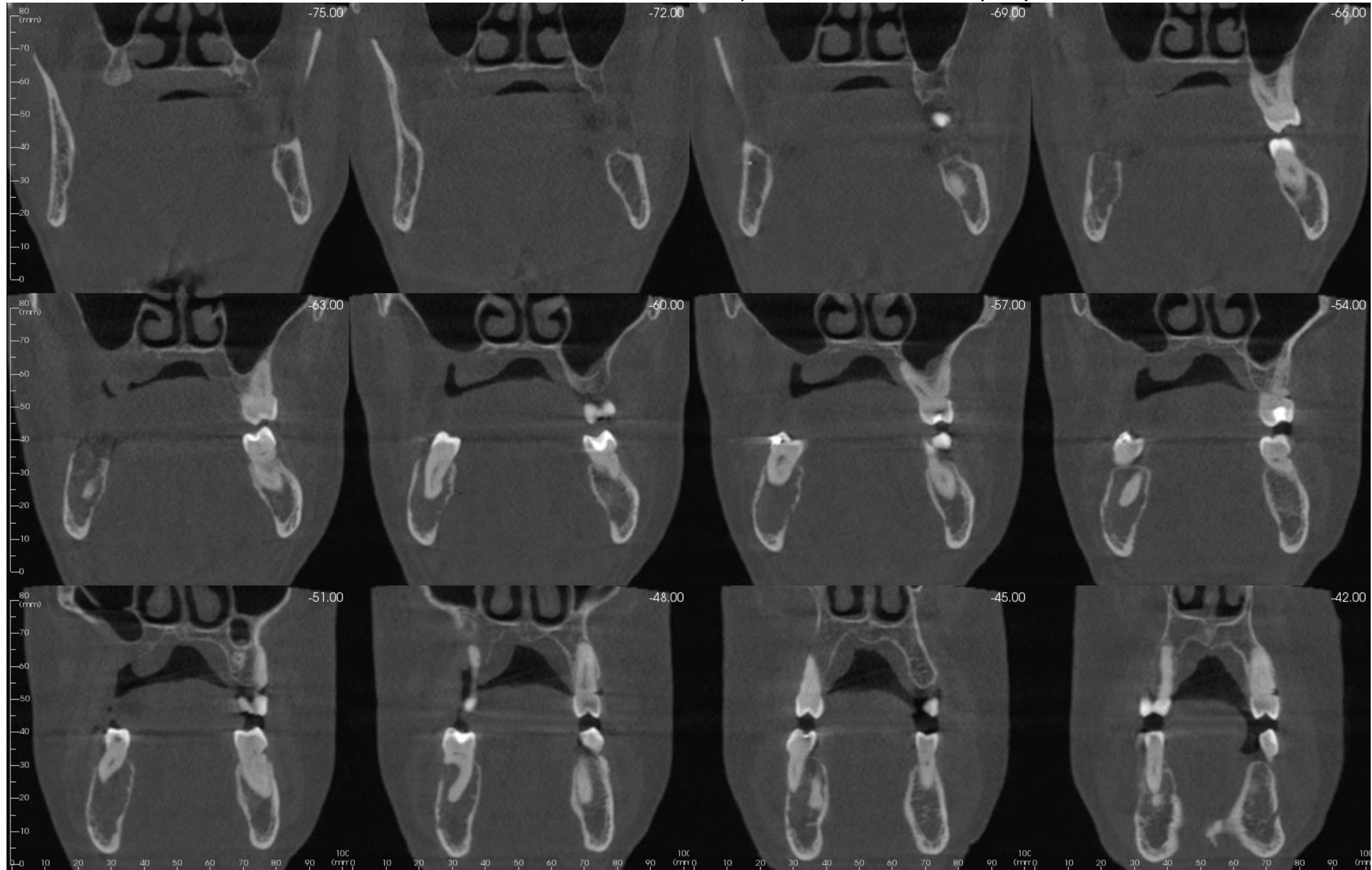
History of ongoing lytic lesions of the mandible and maxilla. Biopsies the mandibular lesion performed in Feb 2023 and the current biopsy in October 2023. Patient is surprisingly asymptomatic and clinically the tissue overlying the bone appears normal, firm pink attached gingiva. Teeth are without significant pain.

Patient underwent a work up for multiple myeloma which was reportedly negative.

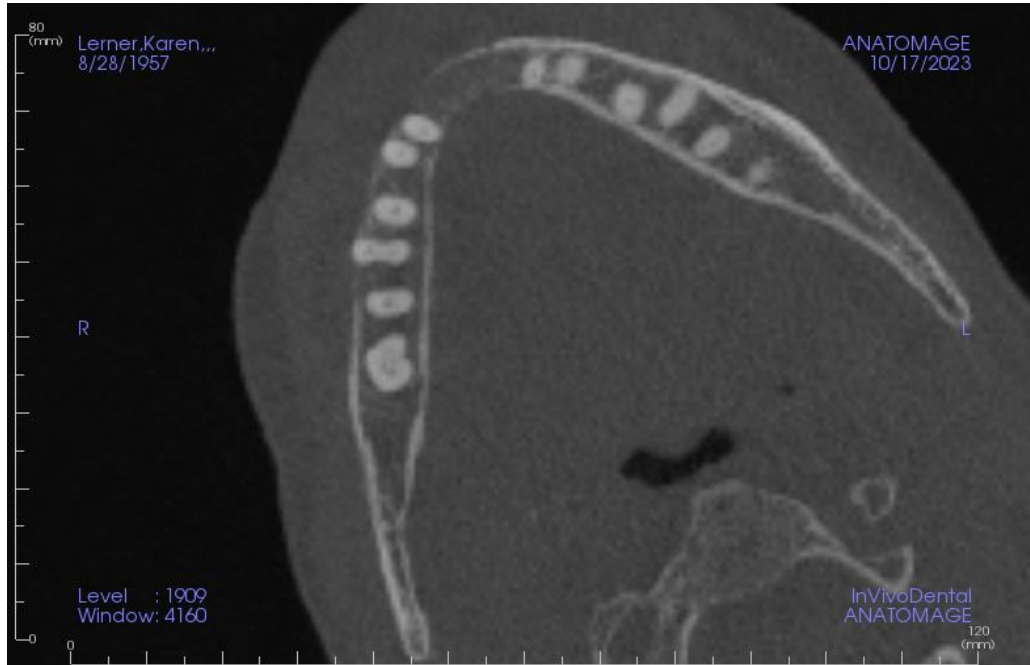
Patient's CBC and SPEP were completely normal. Free light chains were normal with a ratio that was elevated but not problematic.

Patient has required bilateral hip replacement recently

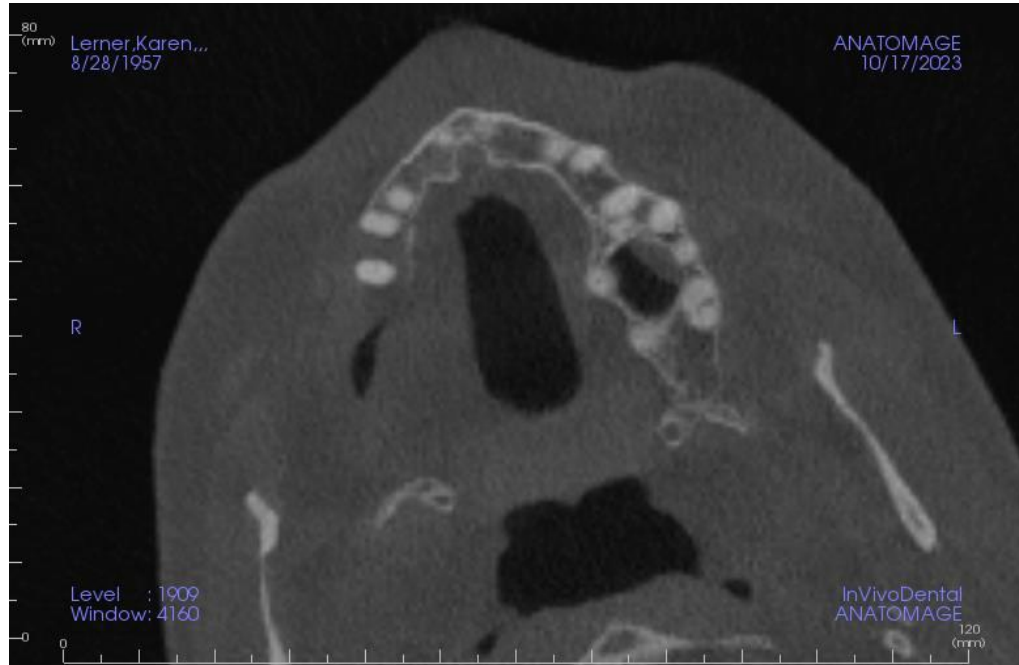
Serial coronal 3mm slice interval , max + mn arch 10/17/2023



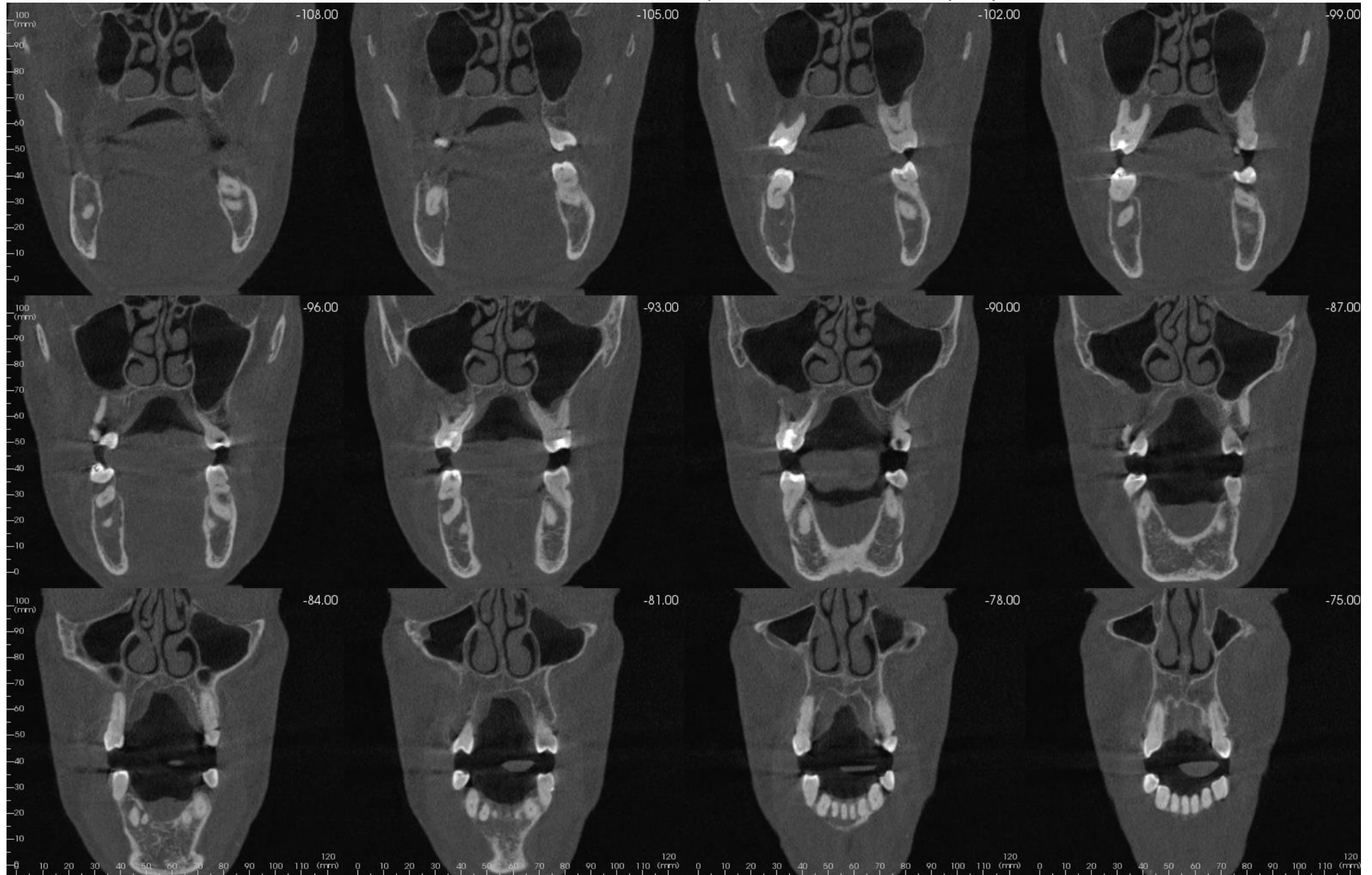
MPR mn arch 10/17/2023



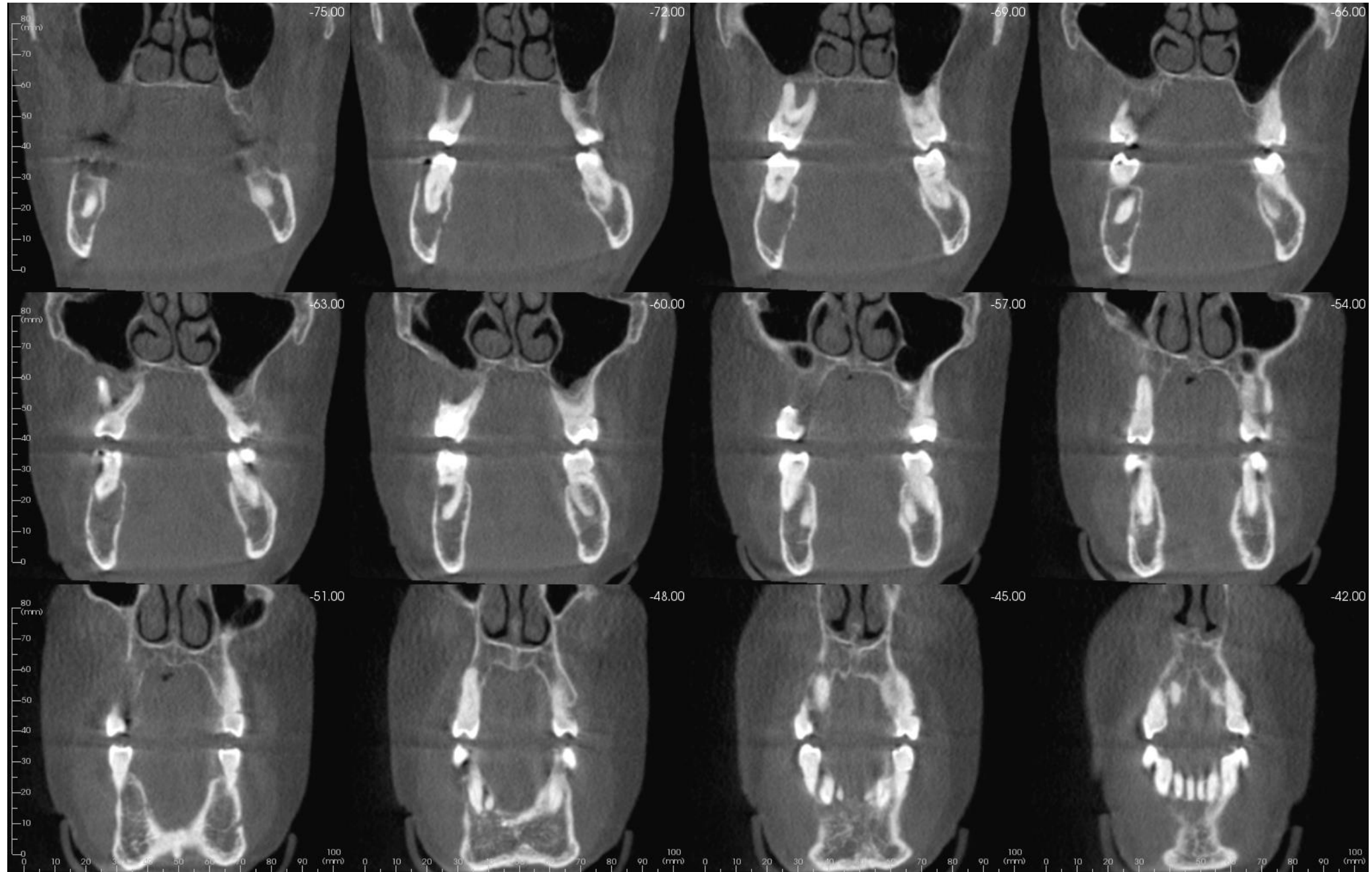
MPR max arch 10/17/2023



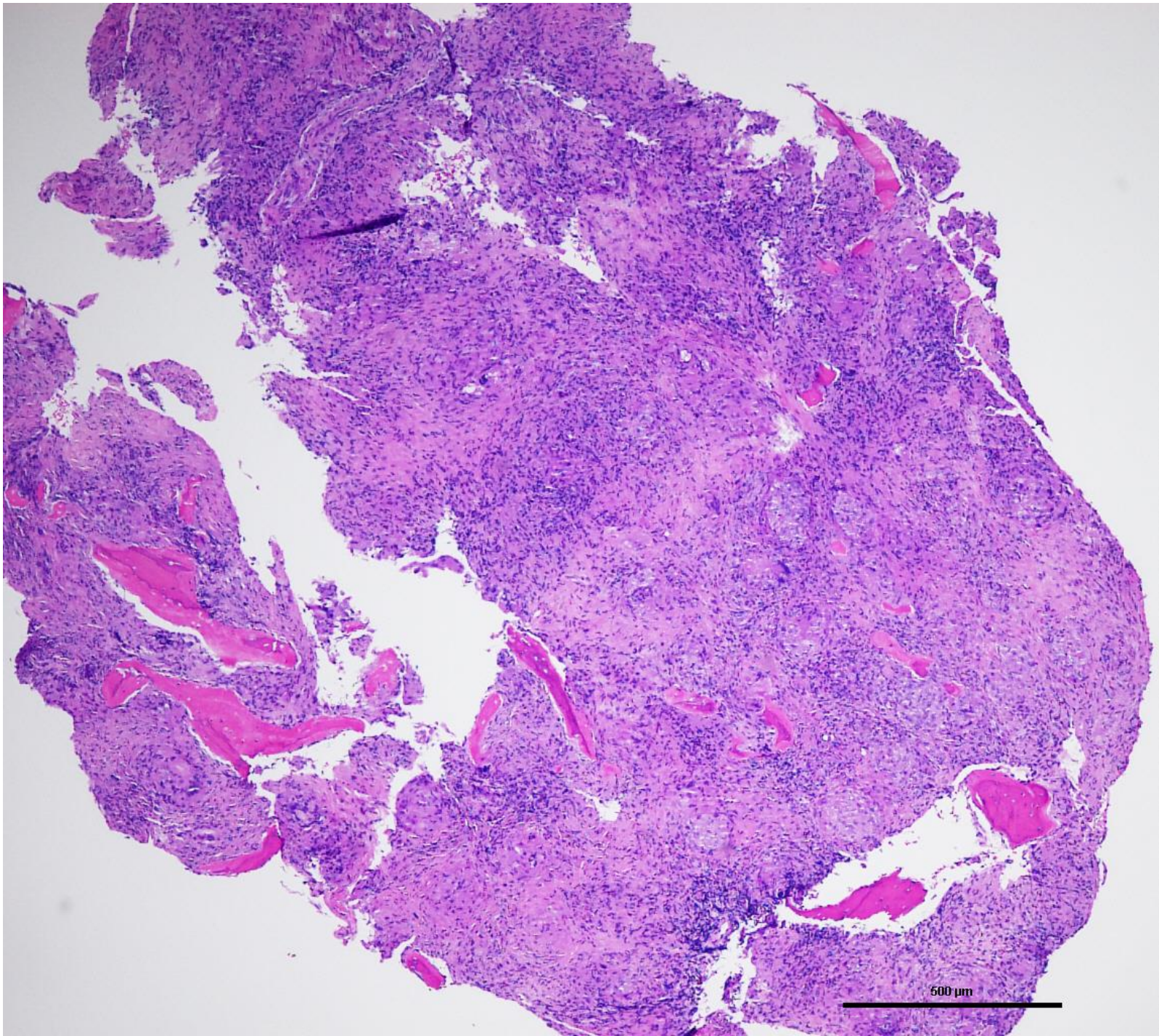
Serial coronal 3mm slice interval , max + mn arch 12/20/2022

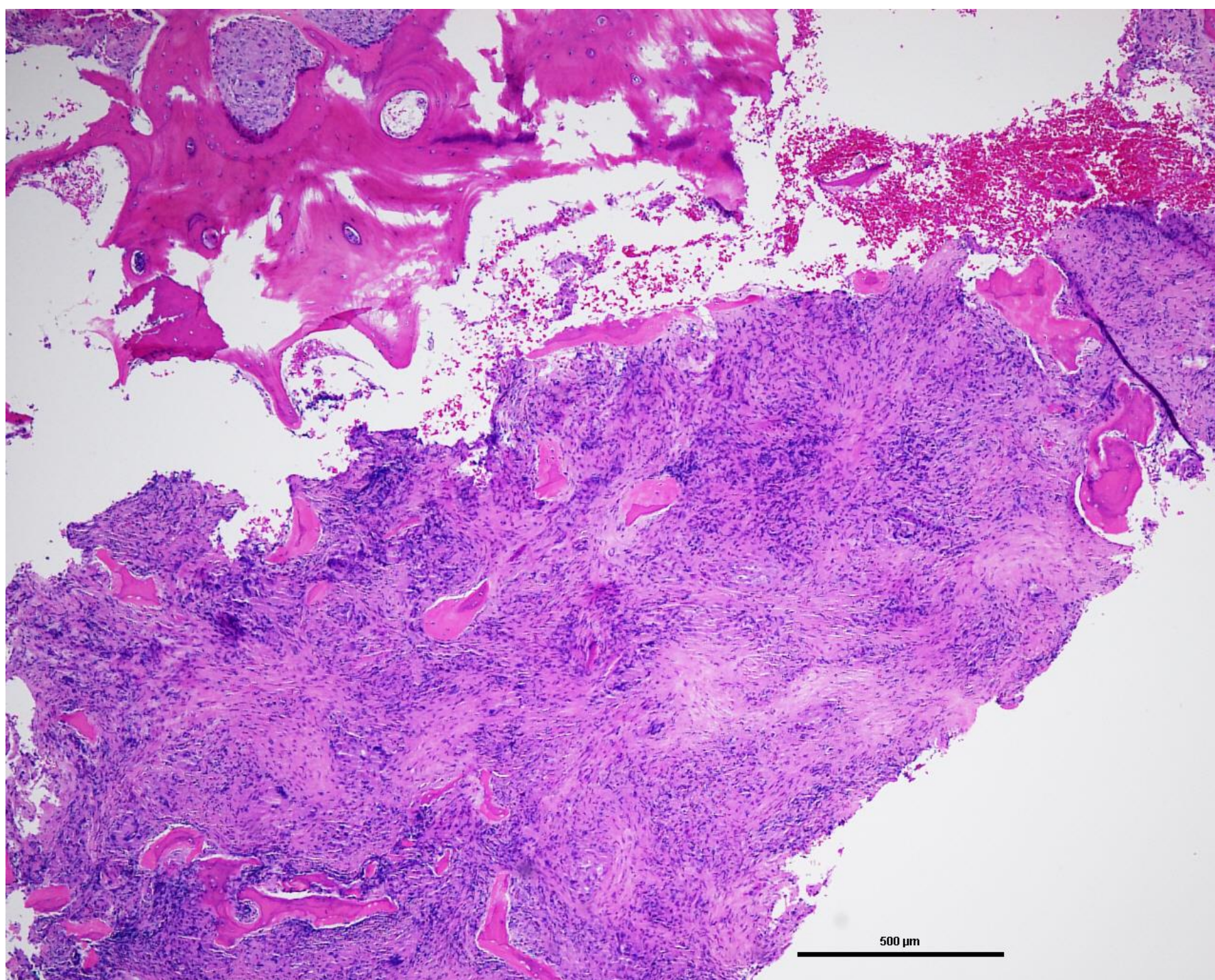


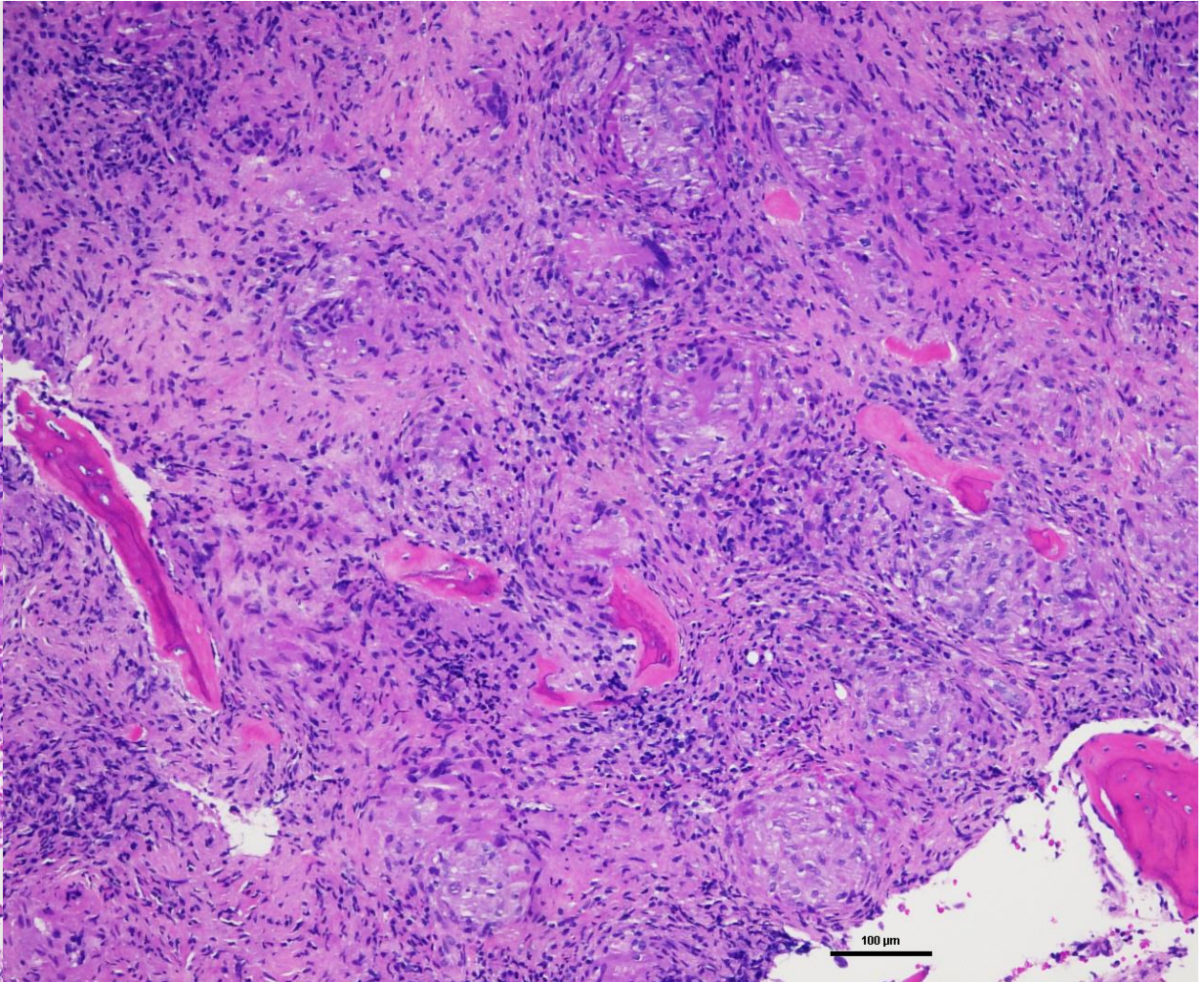
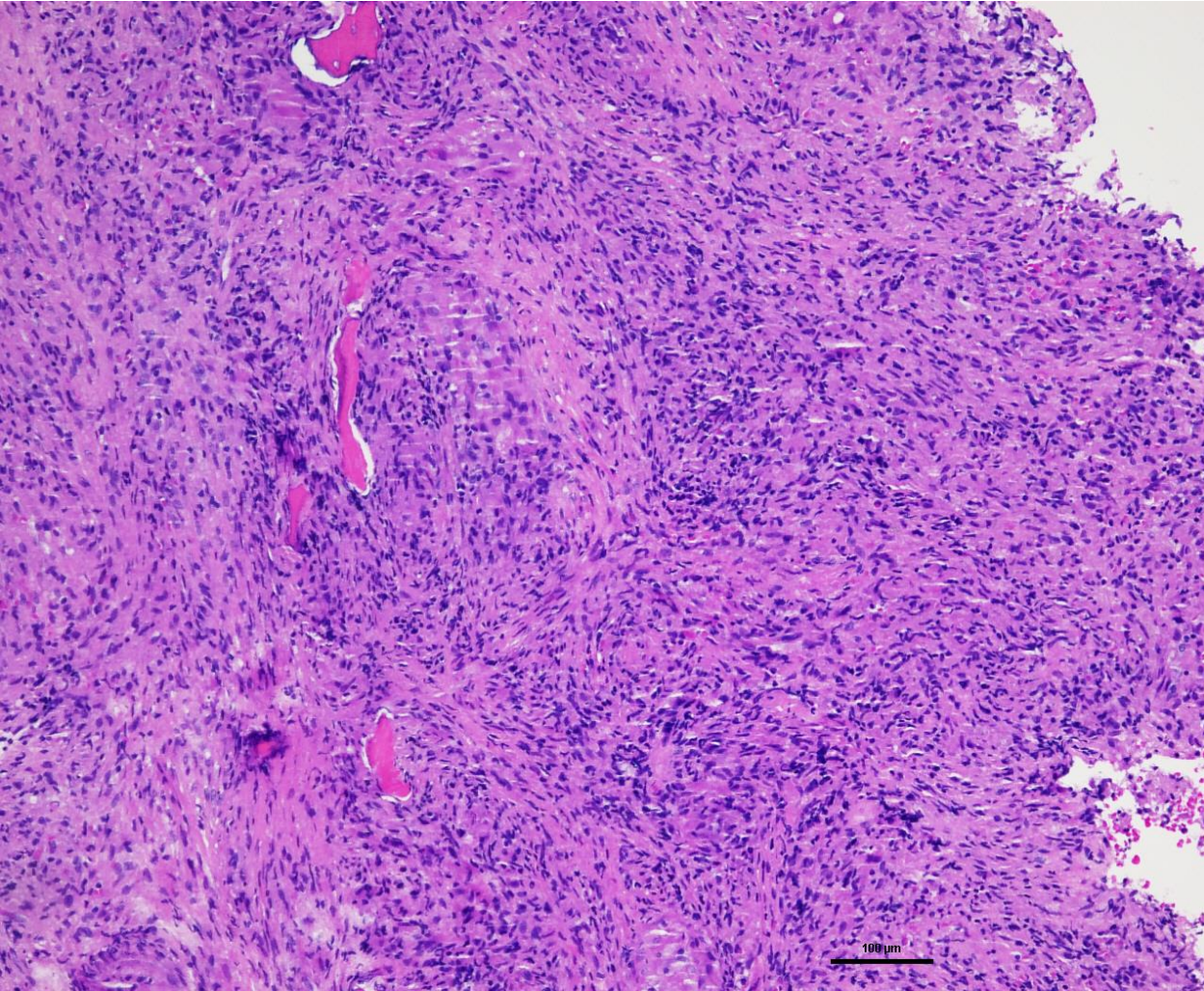
Serial coronal 3mm slice interval , max + mn arch 12/13/2022

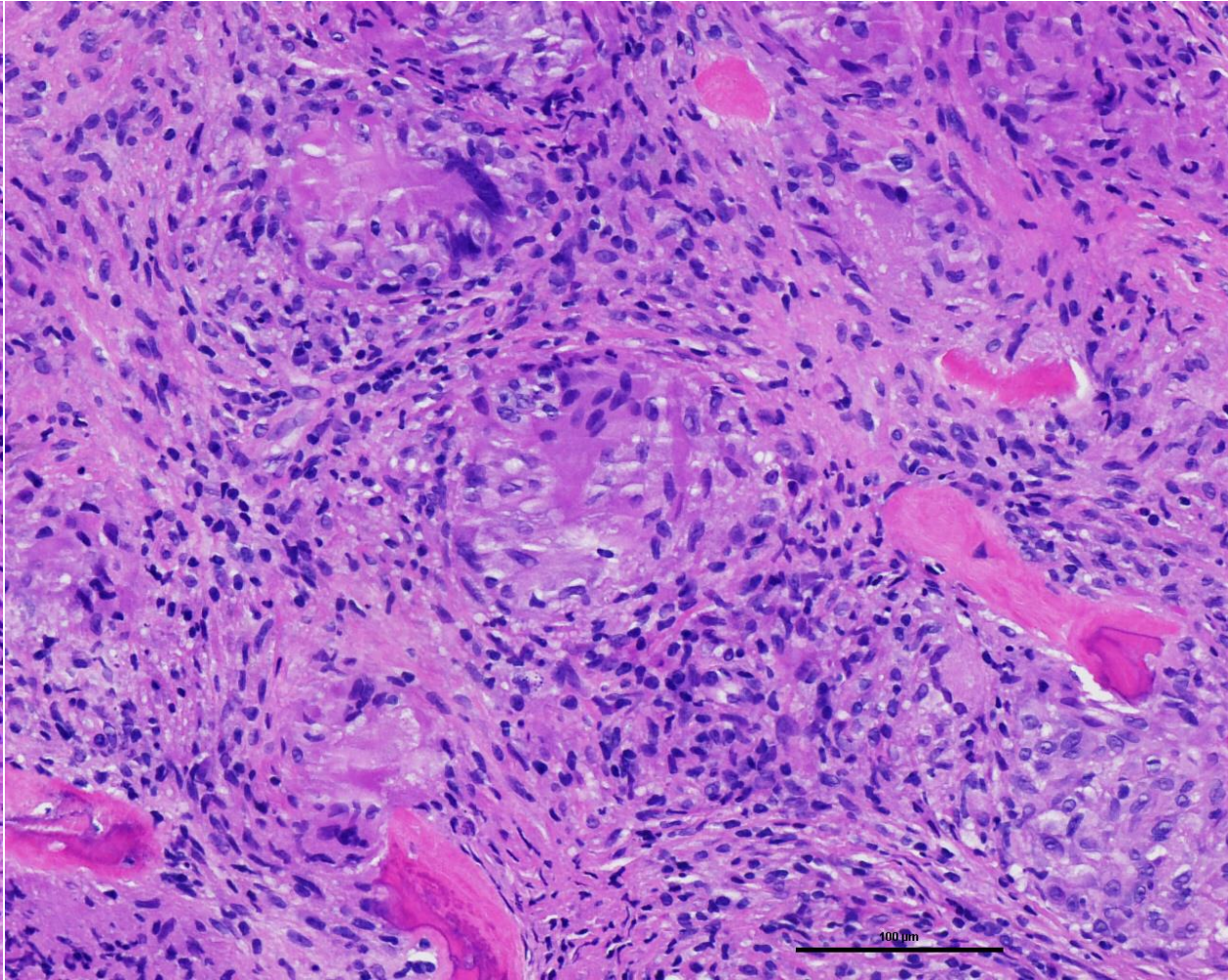
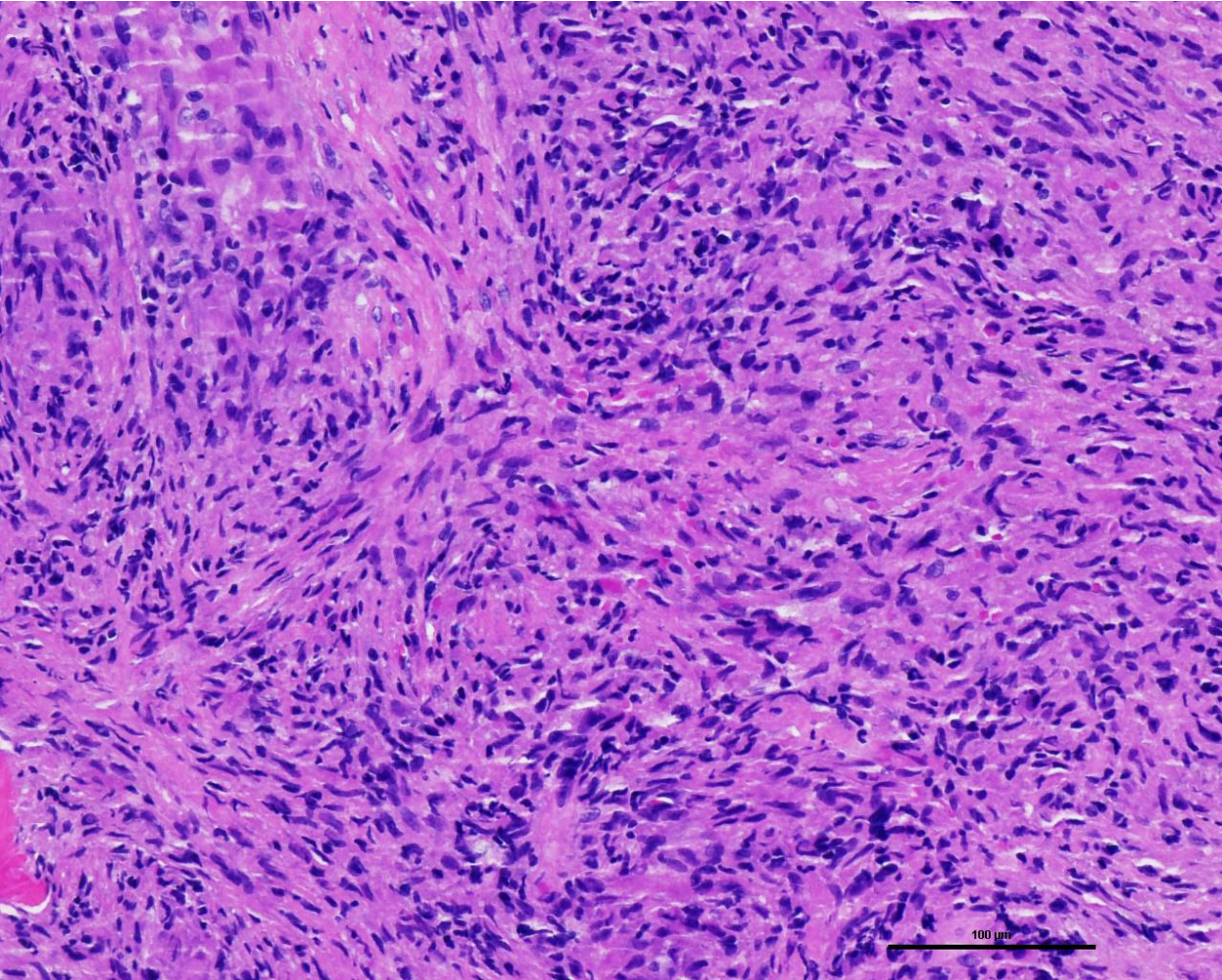


Previous biopsy (Feb. 2023)
Biopsy site: Body of the mandible;

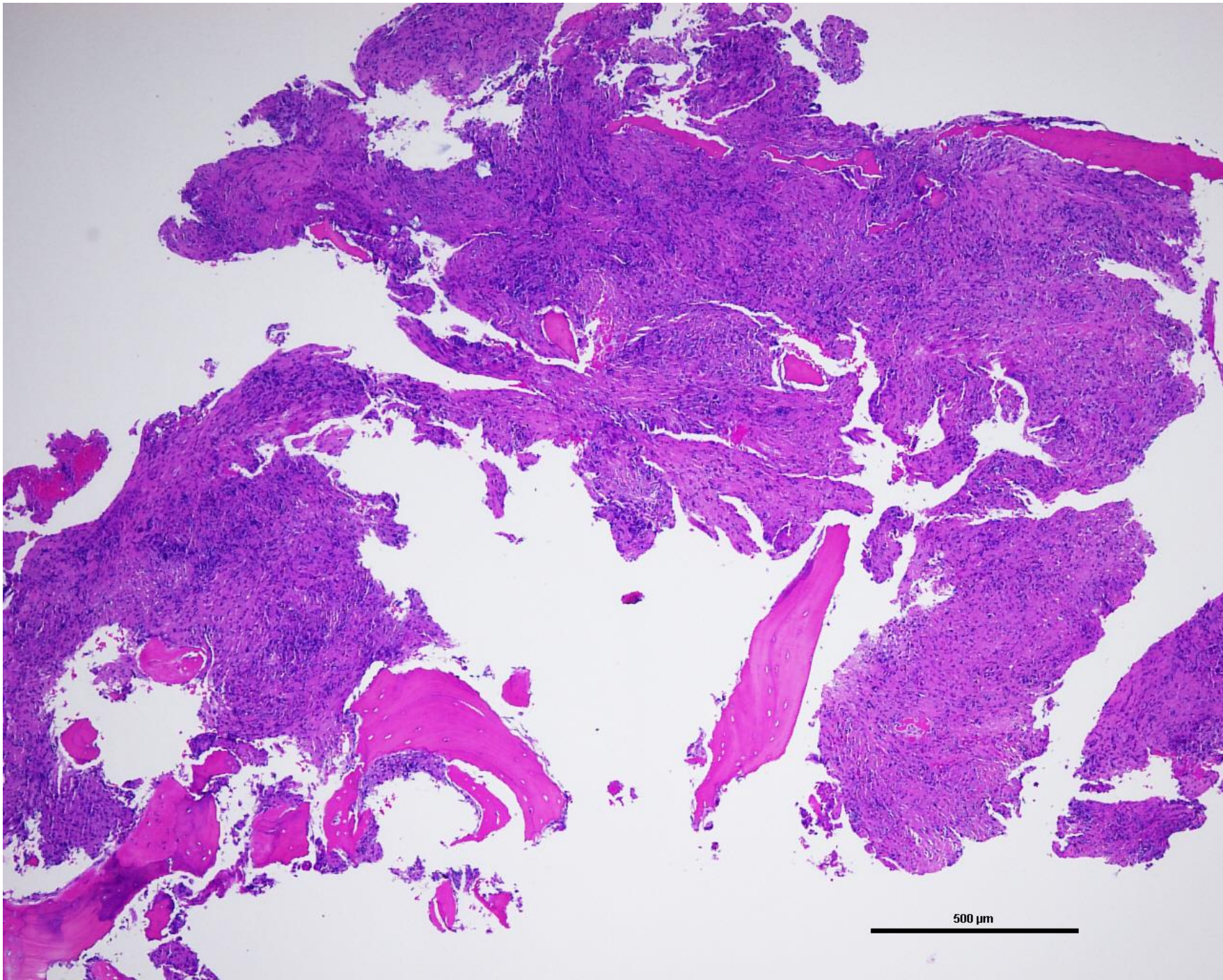


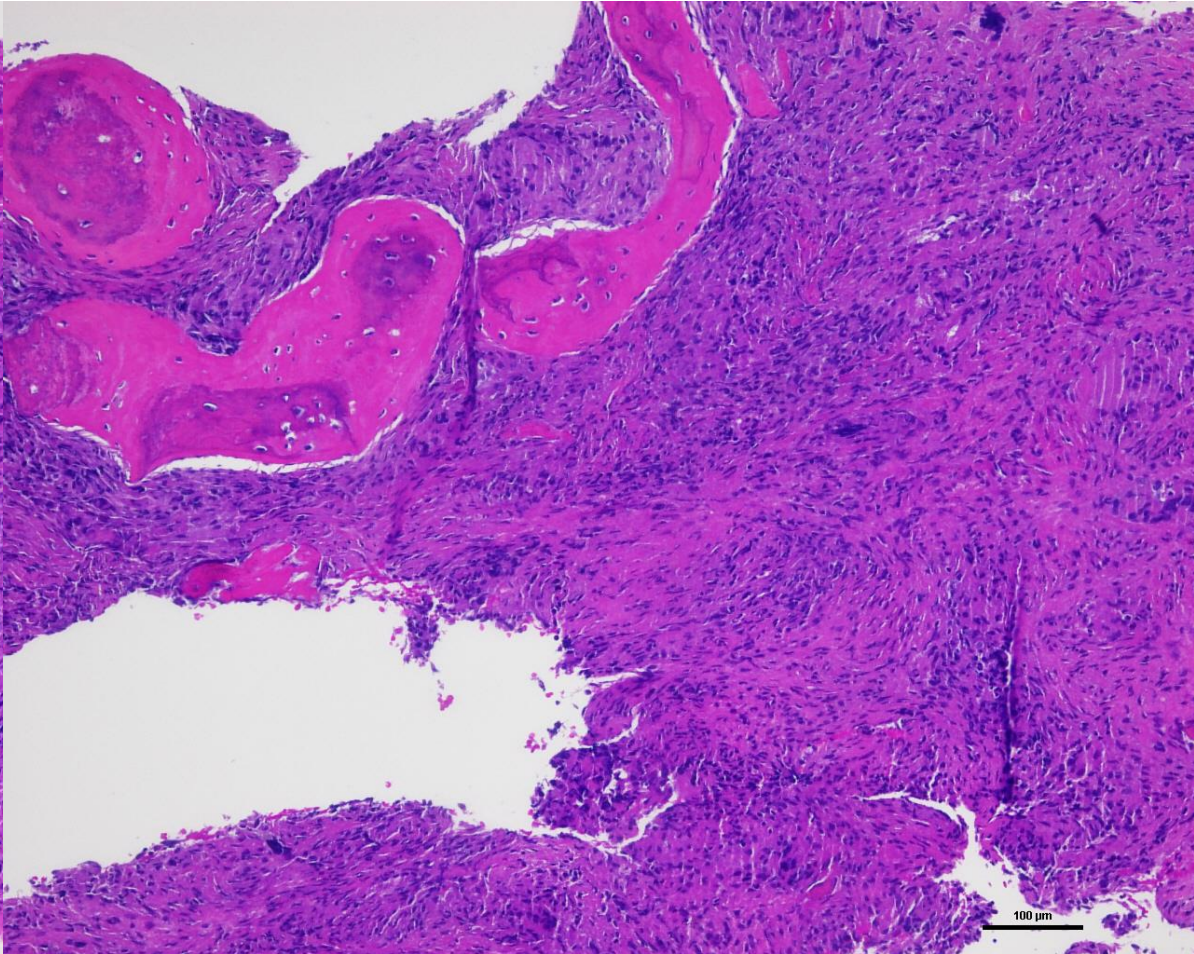
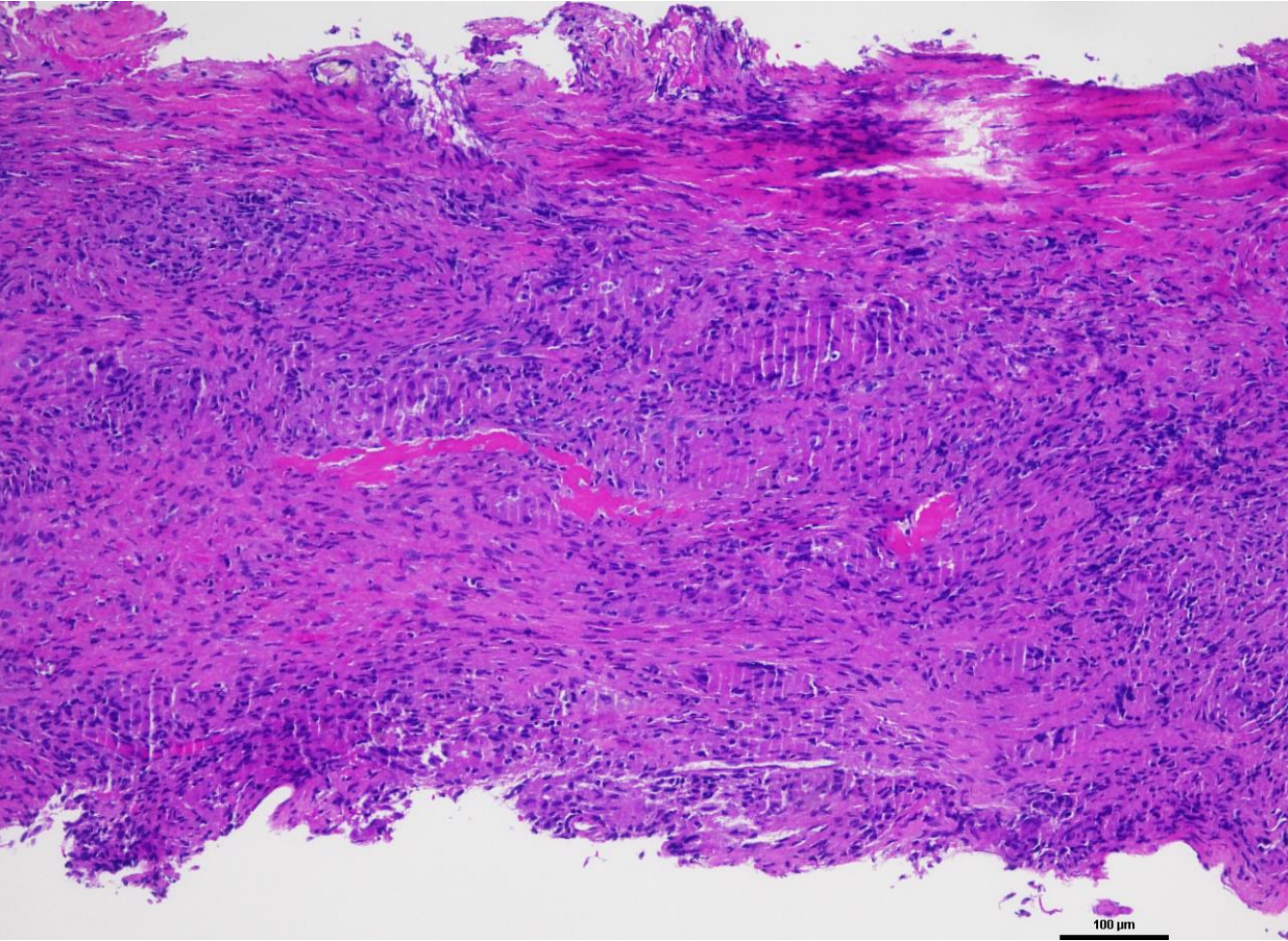


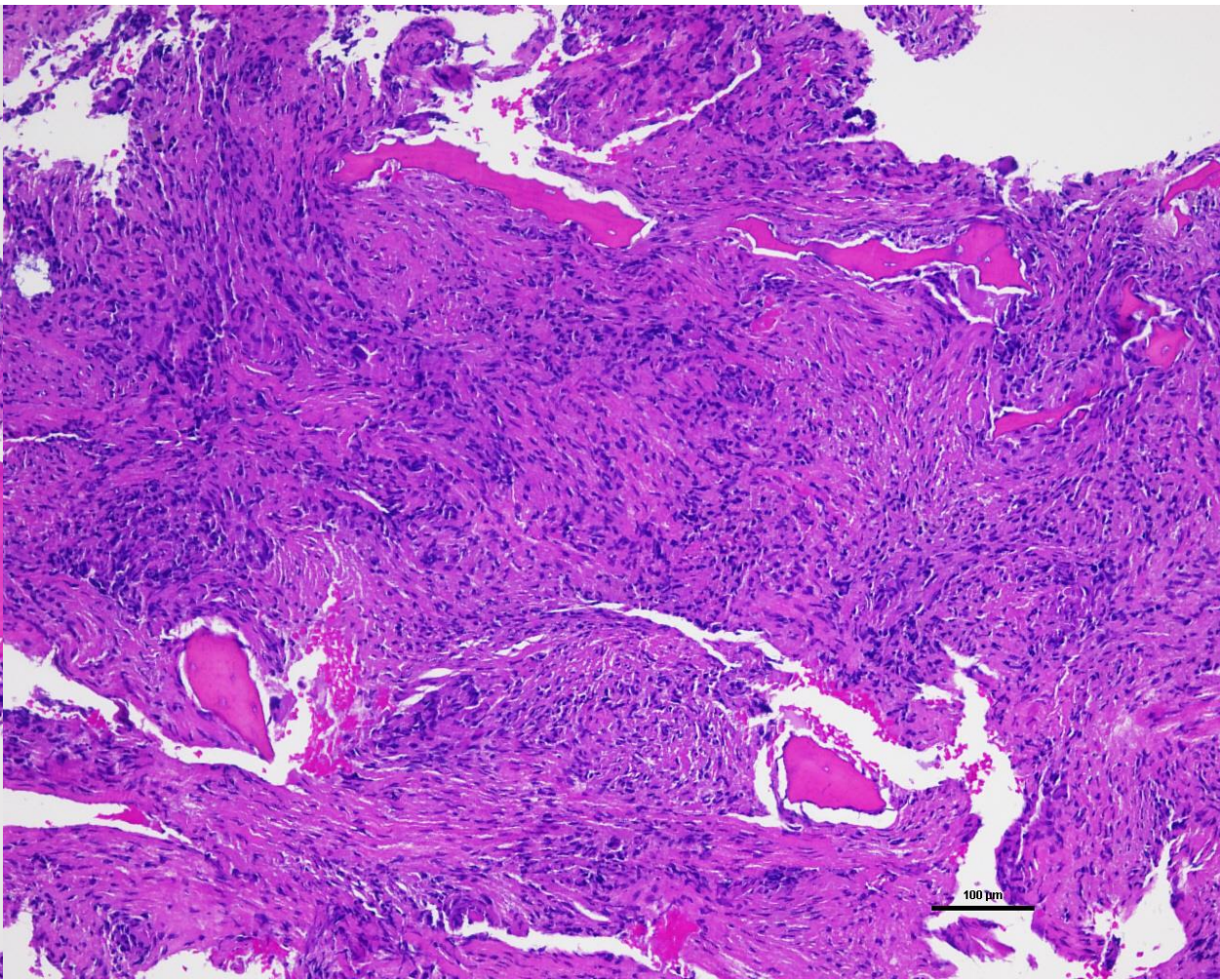
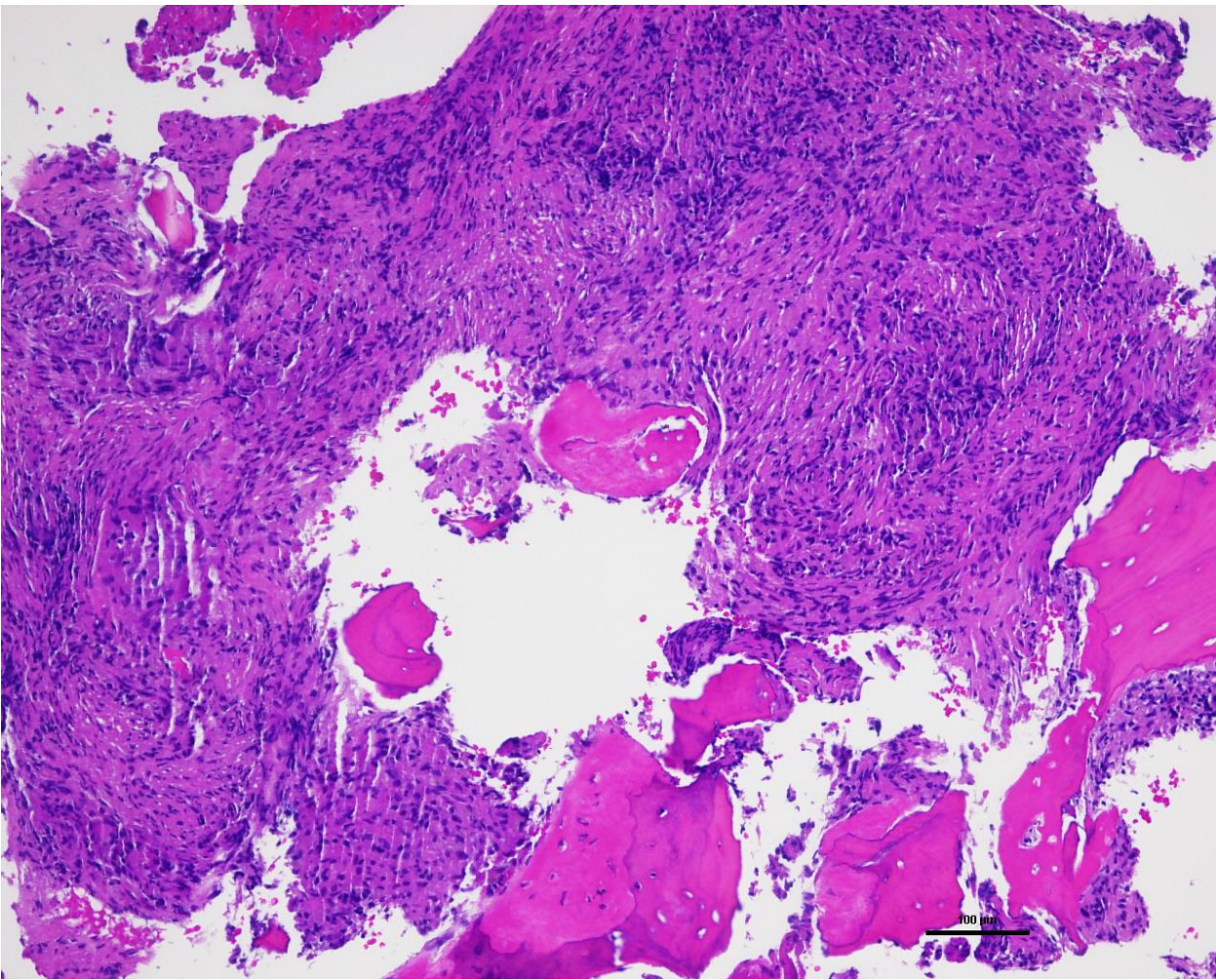


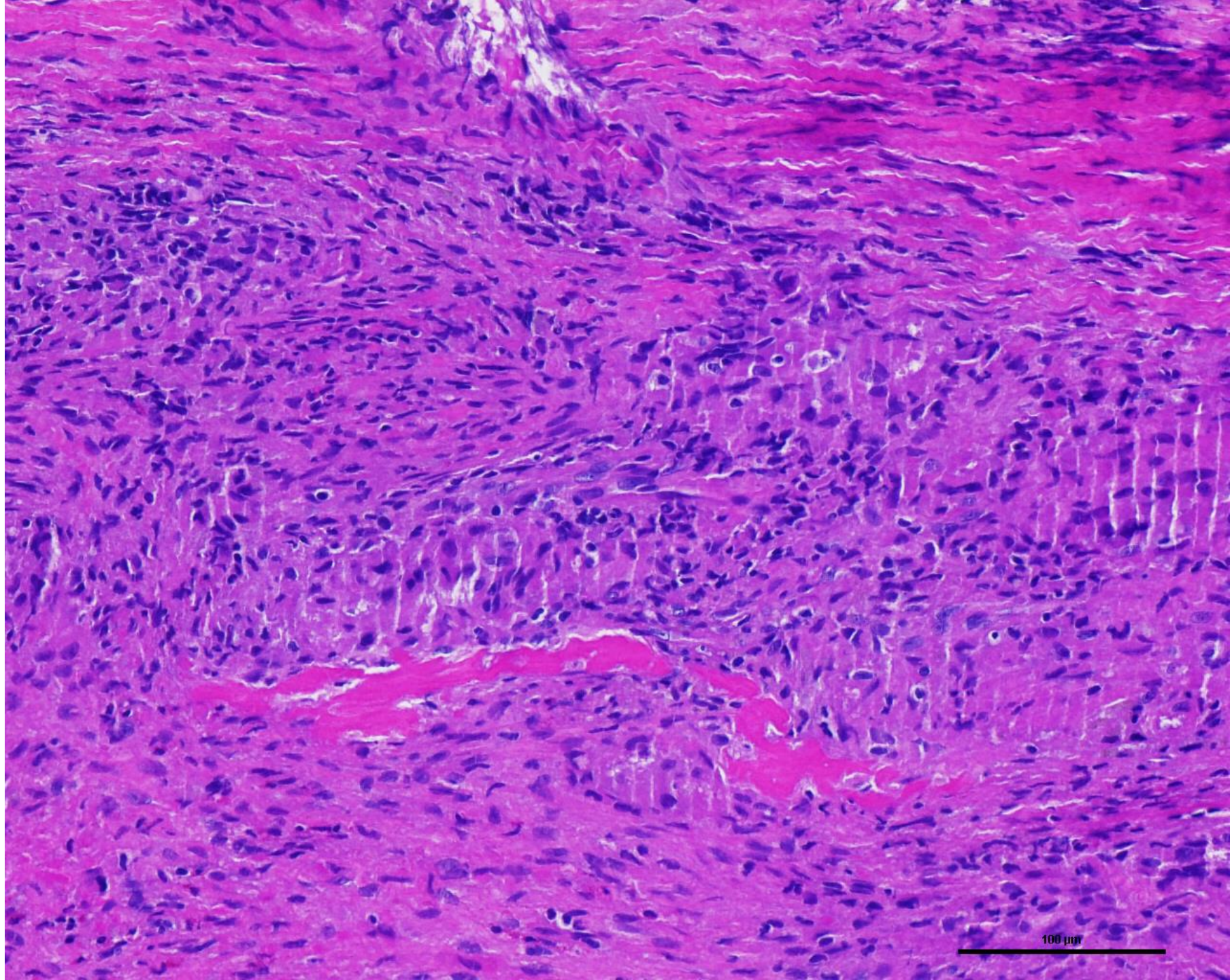


Current biopsy (10/17/23)
Biopsy site: Body of the mandible;

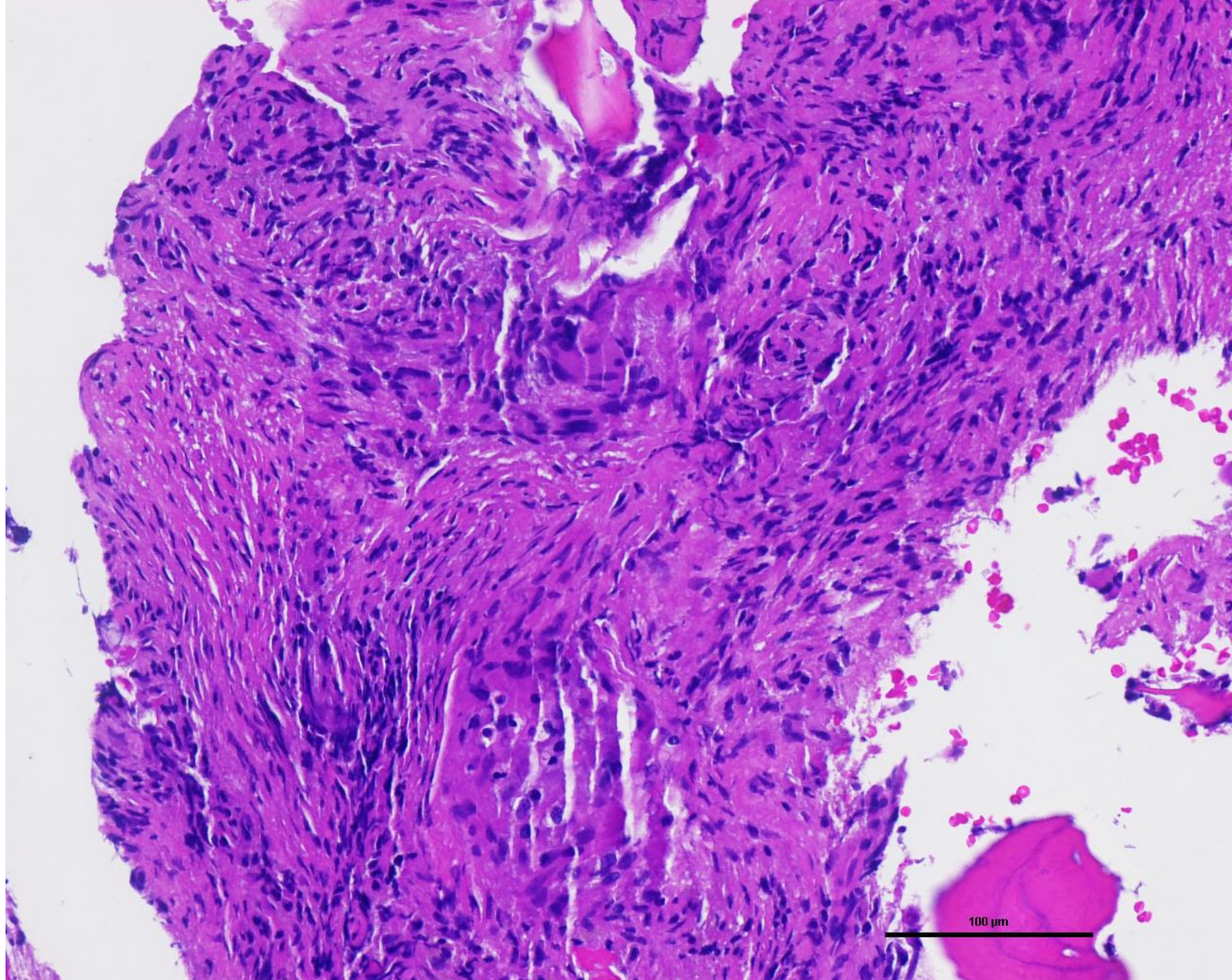


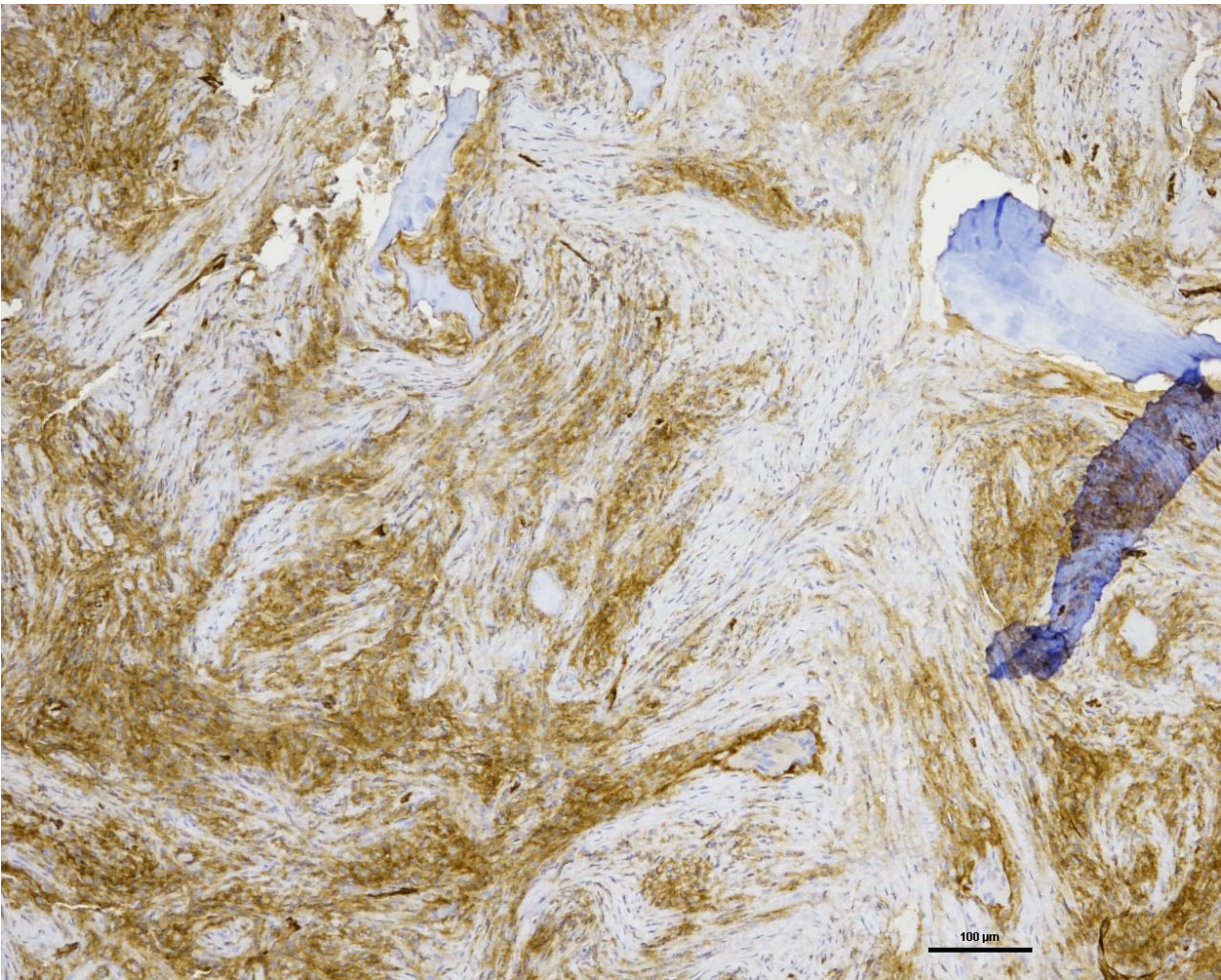




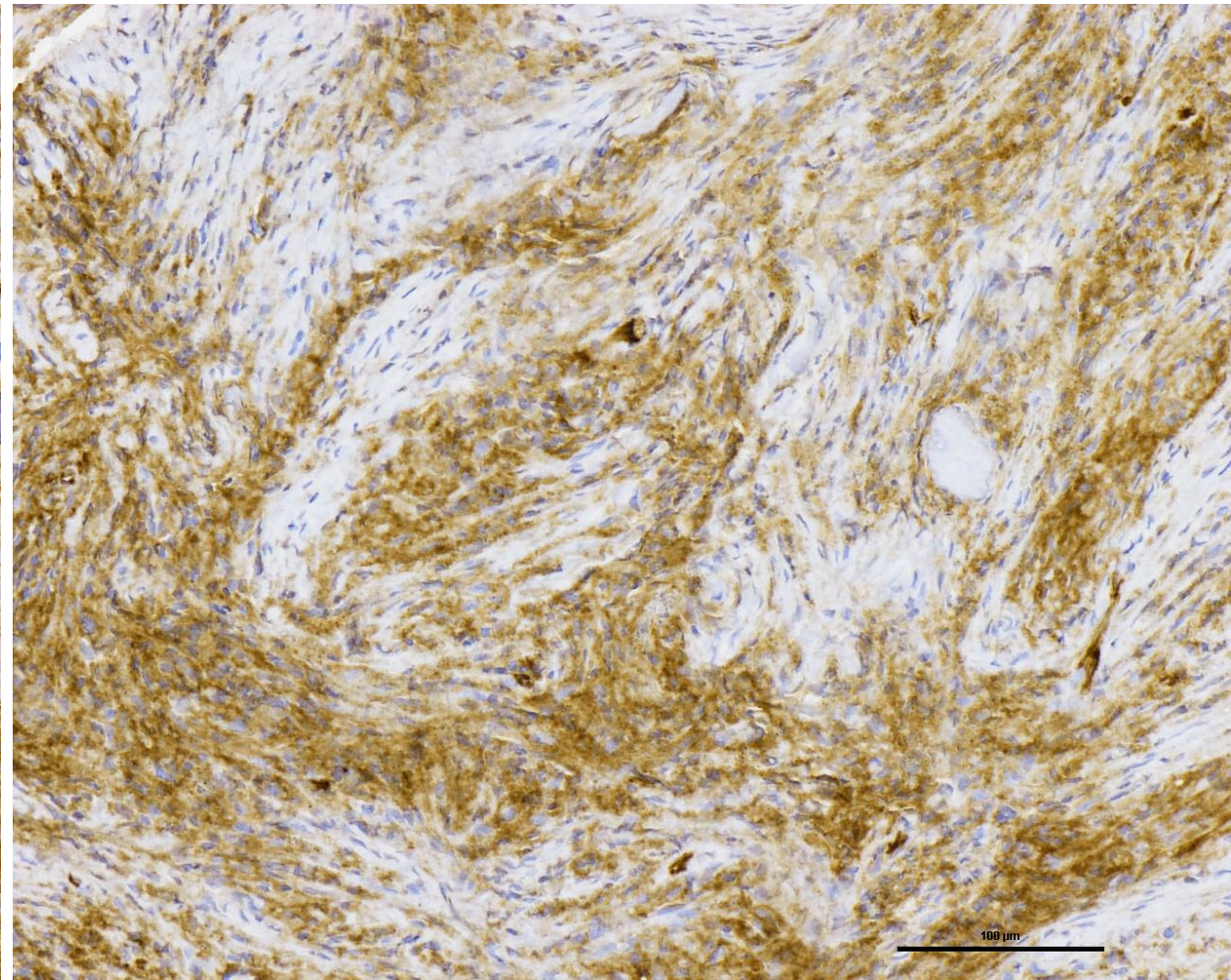


100 μm

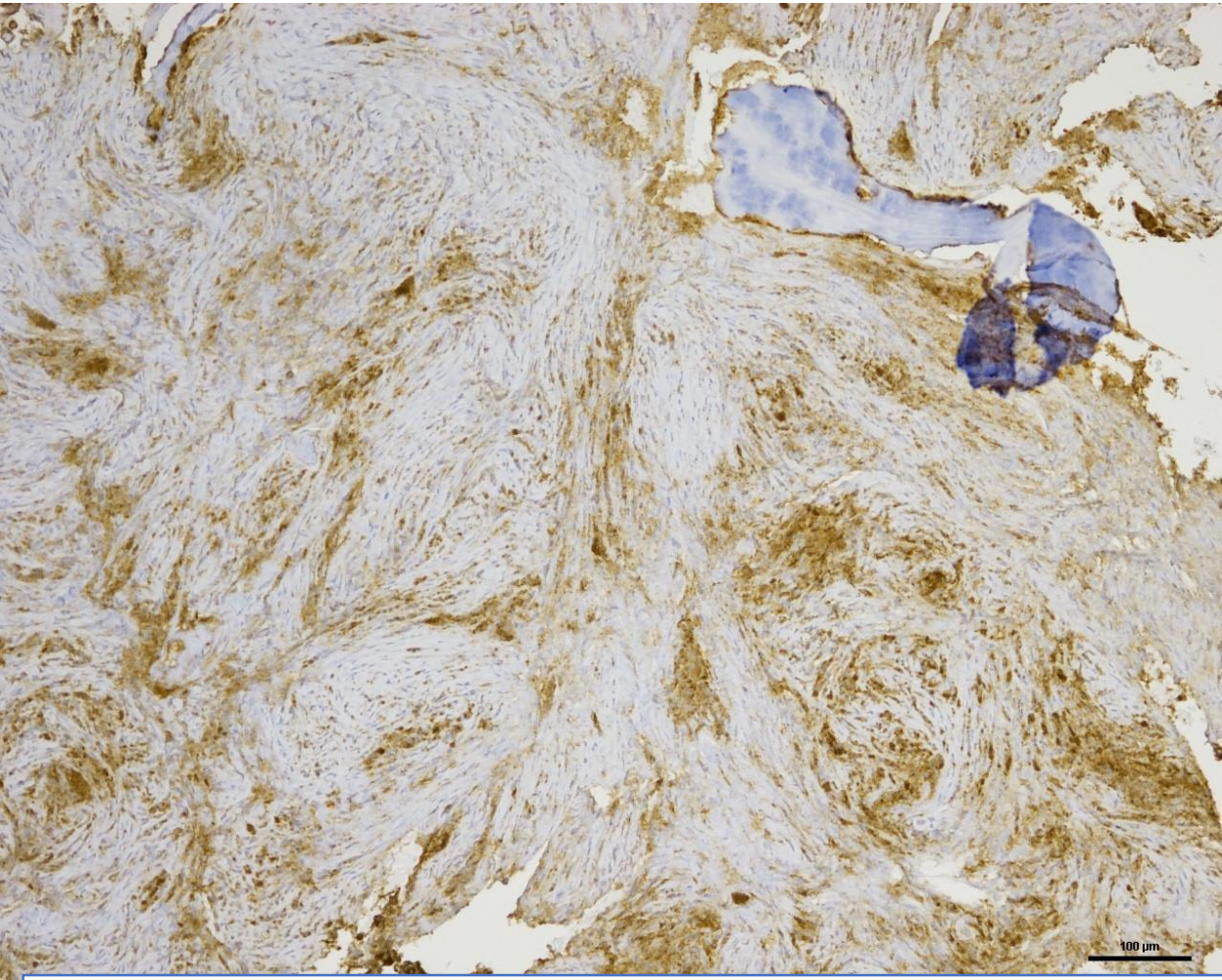




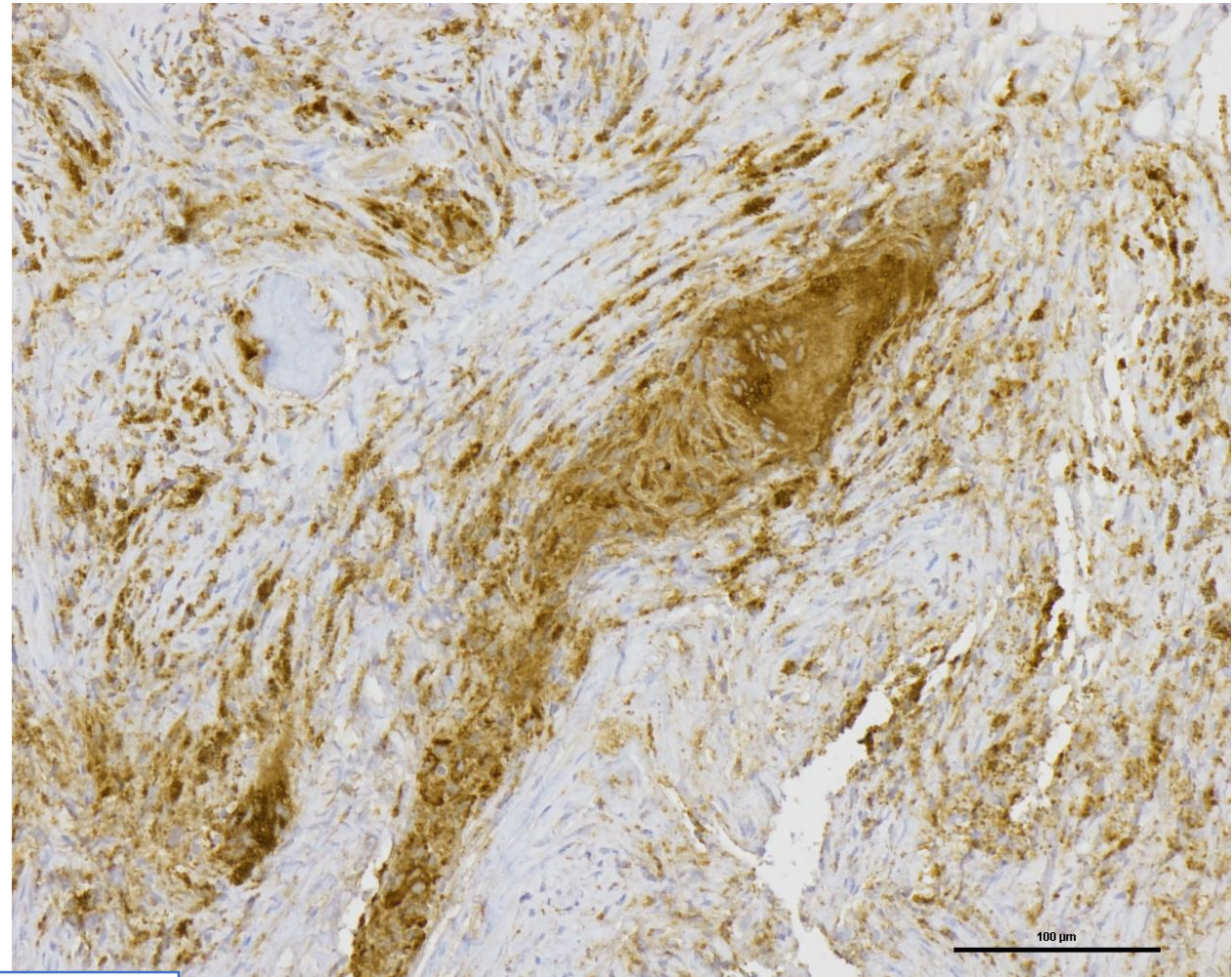
CD31 x100



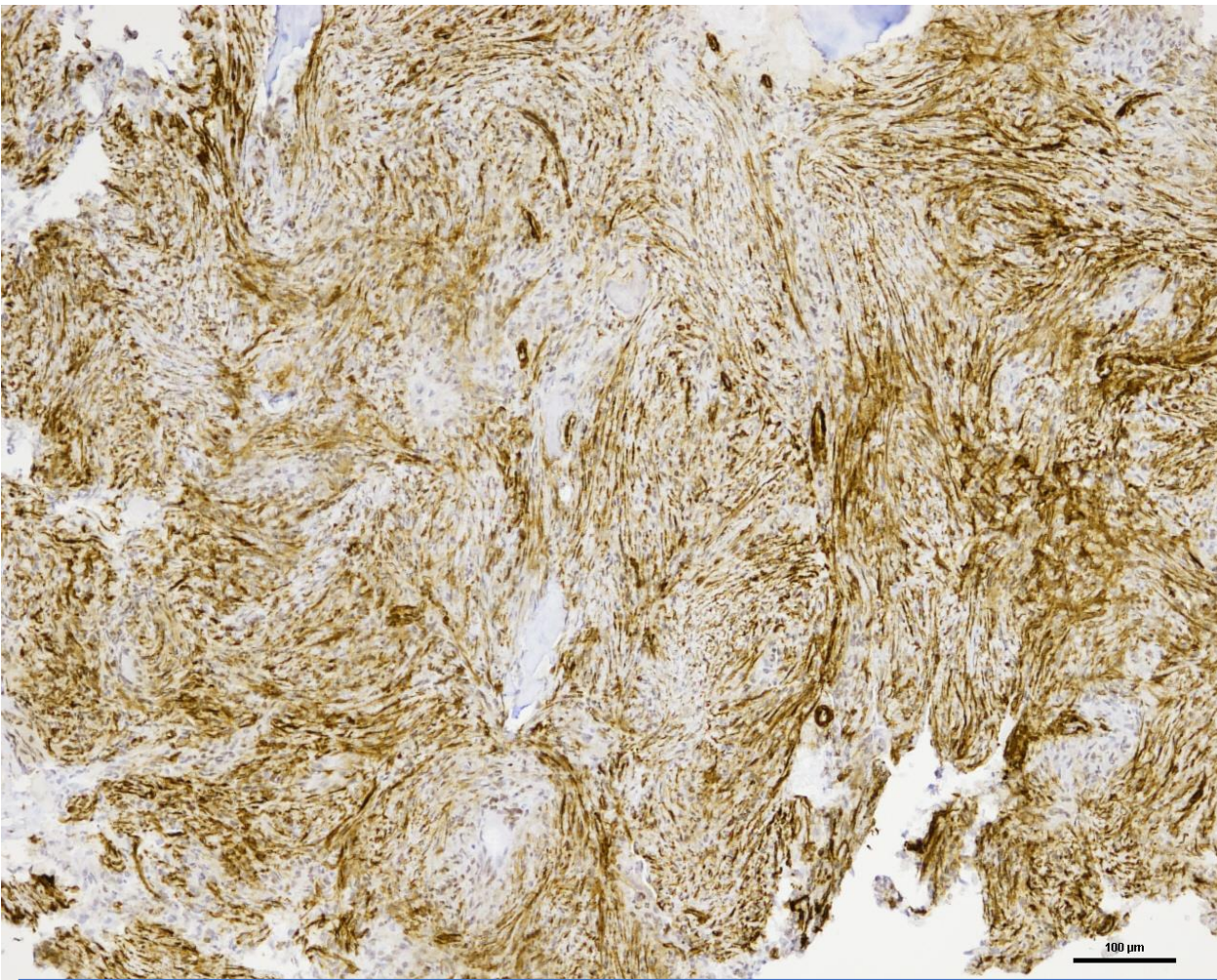
x 200



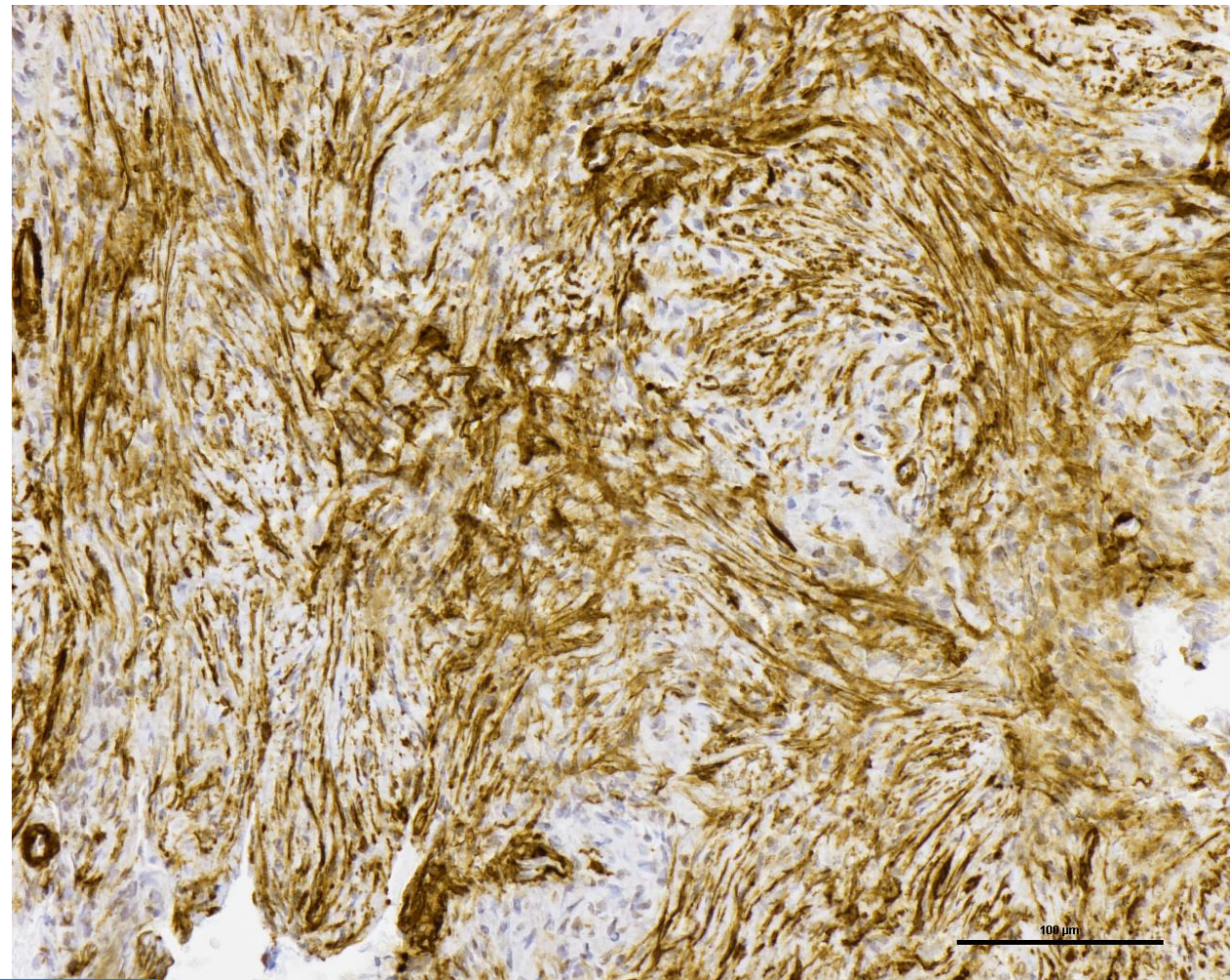
CD68 x100



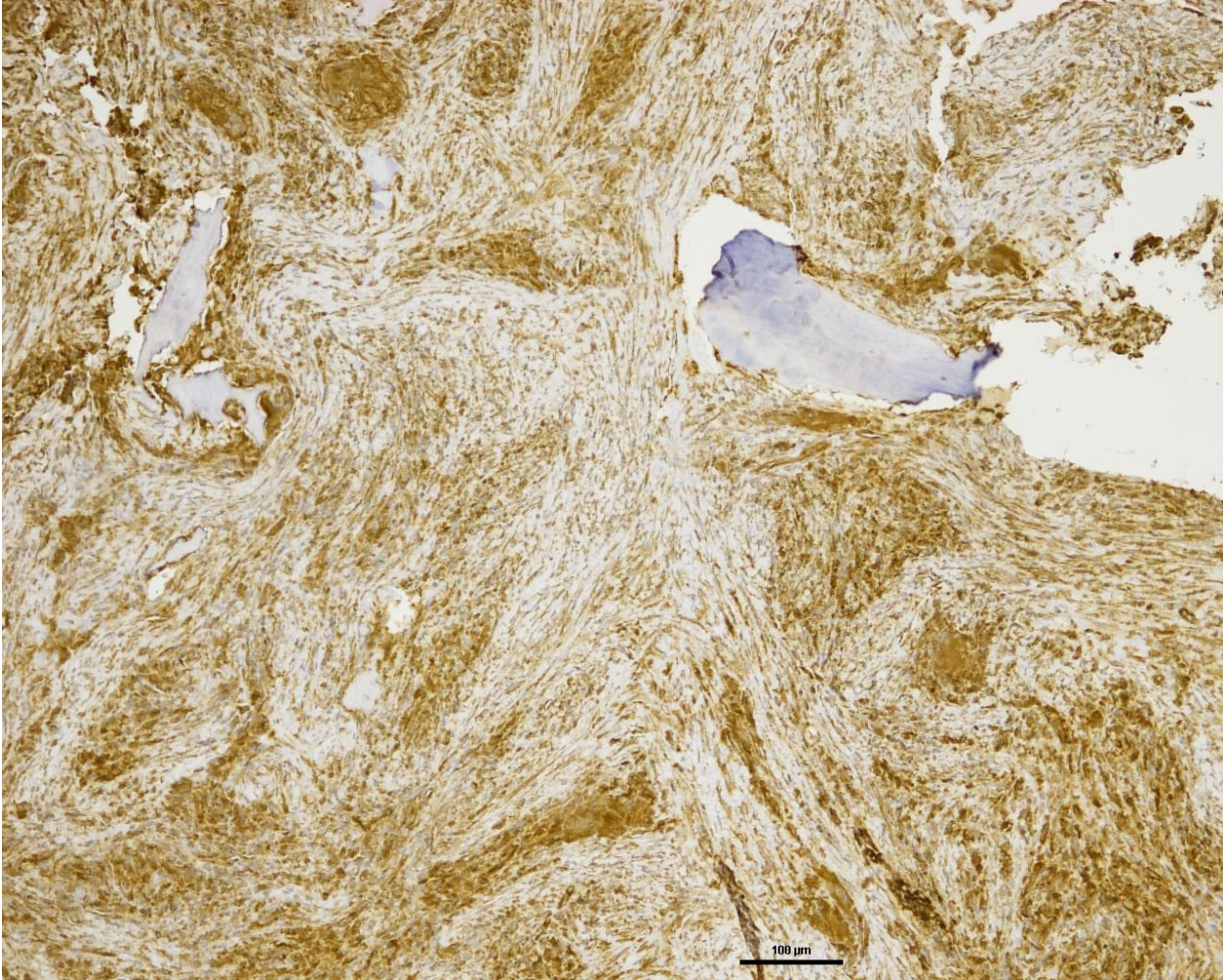
x 200



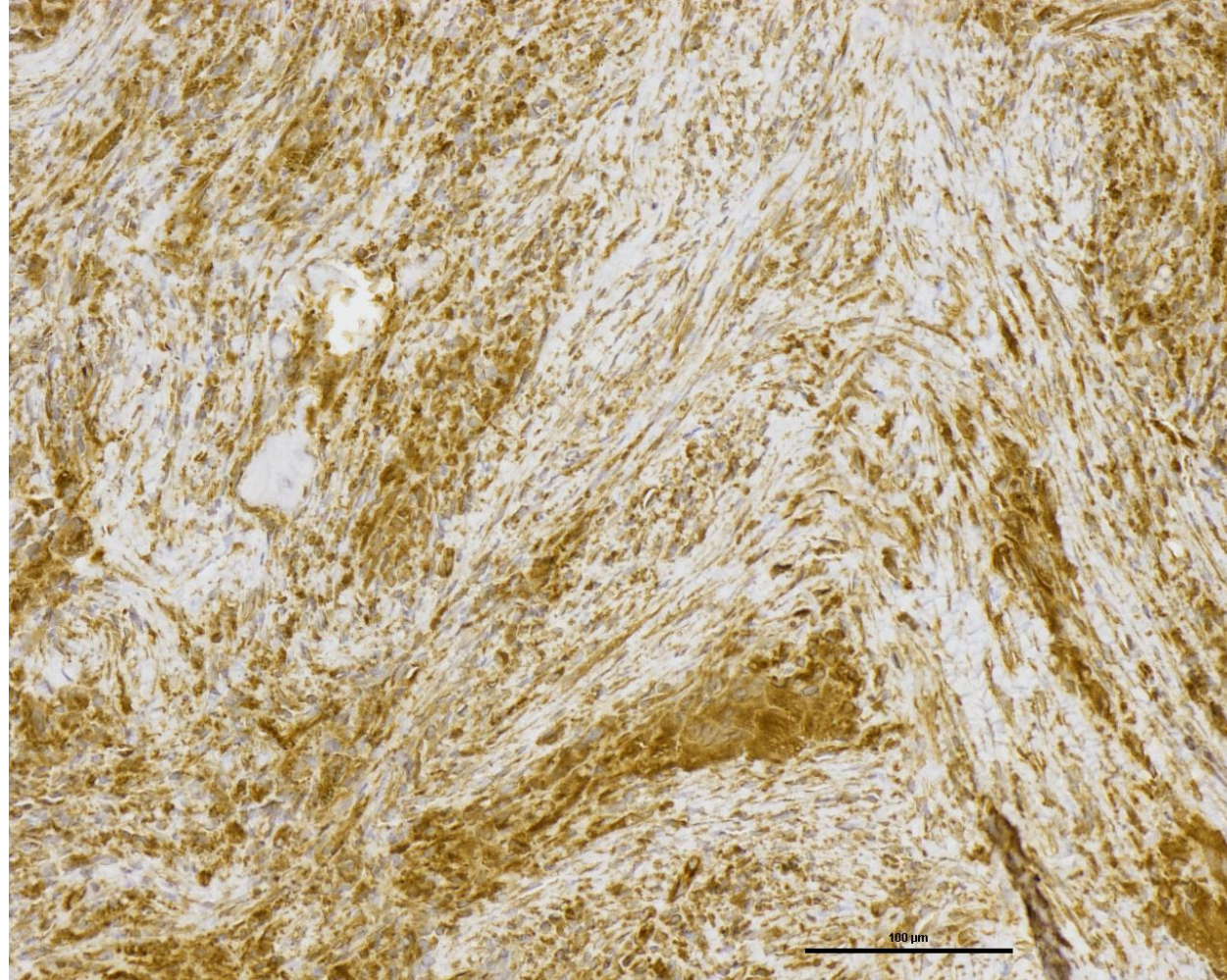
SMA x100



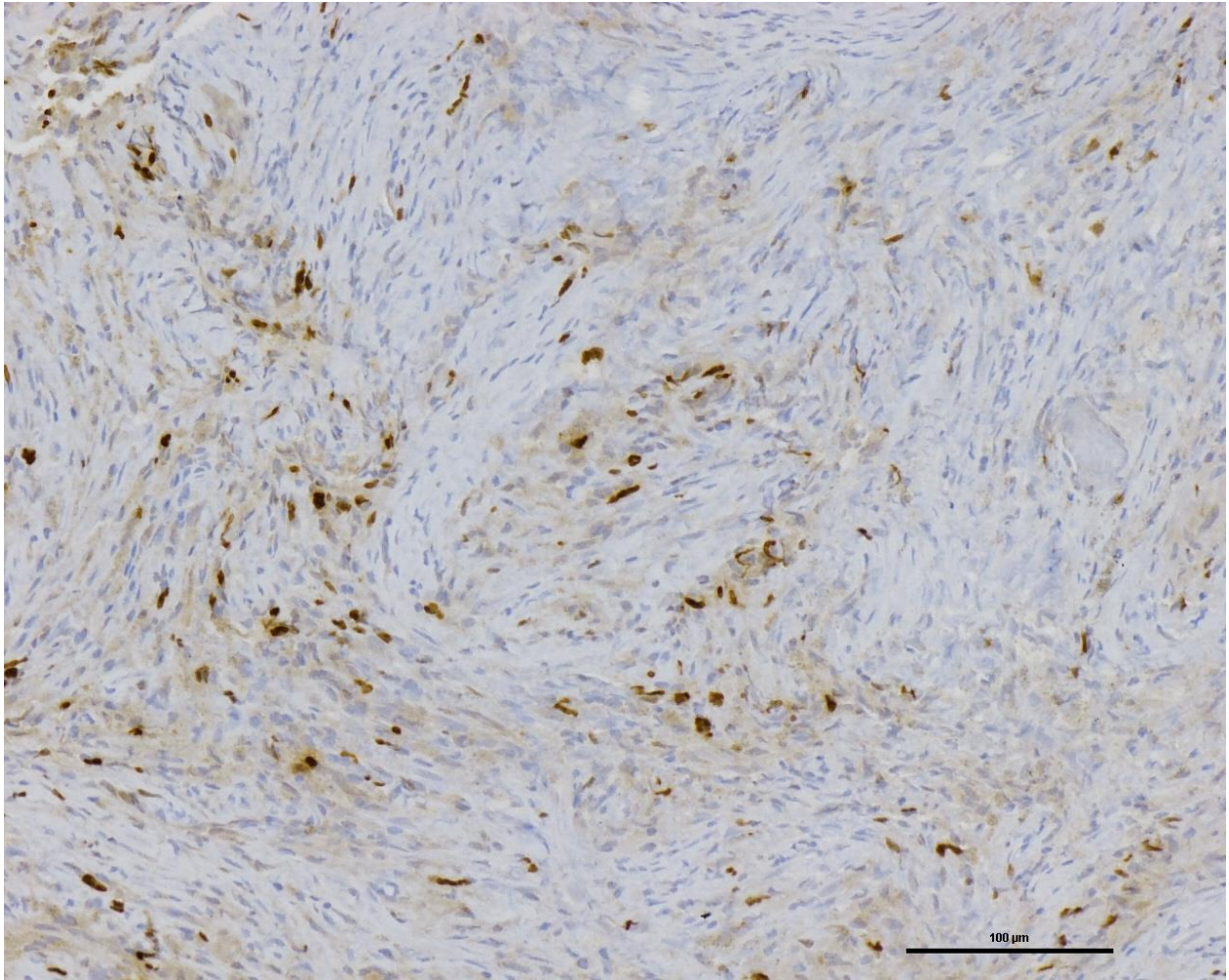
x 200



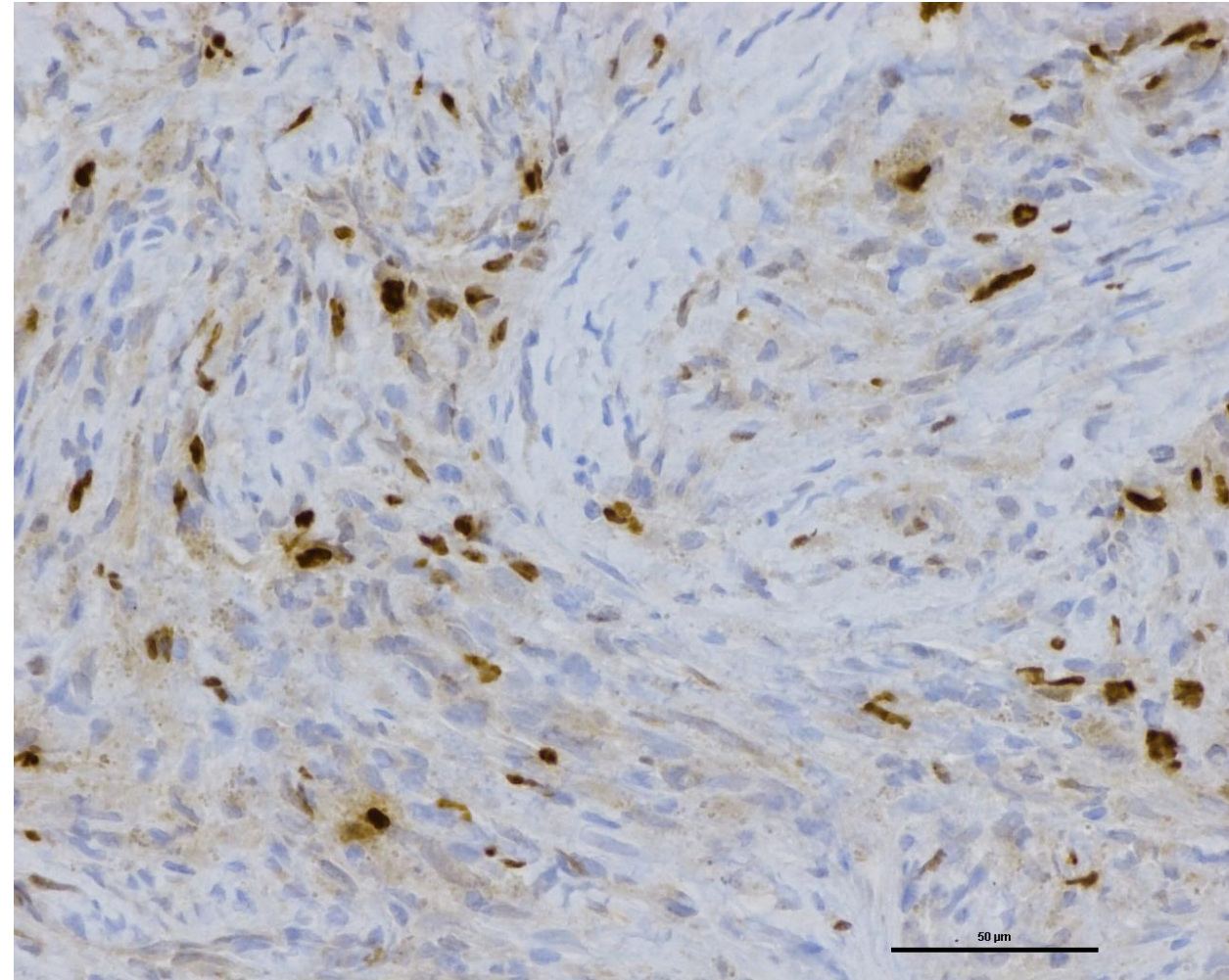
Vimentin x100



x 200



Ki67 x100



x 200

Negative for CD34, desmin, S100 and STAT-6