The Daily Dose: Study Tips for Exam and Board Preparation

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The Daily Dose: physalliferous and xanthoma cells

Two cases were submitted to participants for review:

- chordoma
- intraosseous xanthoma

Instructions:

A. Develop a diagnosis, with appropriate considerations for additional tests (IHC, molecular, etc.)
B. In addition to developing a diagnosis (if possible), consider the following questions:
    1. What other lesions with chondroid or chondromyxoid stroma might appear in this location (clivus)?
    2. What additional immunohistochemical stains may aide in the diagnosis of chordoma?
    3. What other lesions may have been considered in the intraosseous lesion of the mandible containing large 'xanthoma' cells?
    4. What specific information (or diagnosis) may have been confirmed by the use of each of the 4 stains in the xanthoma?

Included were articles, chosen specifically to assist in answering some of the questions.

- Kulamarva G et.al. Metastasising chordoma to the mandible from a rare vertebral site: the first reported case. Oral Surg Oral Med Oral Pathol Oral Radiol Endod 2007;104:240-2
- Jambhekar N et.al. Revisiting Chordoma With Brachyury, a ‘‘New Age’’ Marker. Arch Pathol Lab Med. 2010;134:1181–1187
- Rawal Y et.al. Central Xanthoma of the Jaw Bones: A Benign Tumor. Head and Neck Pathol (2017) 11:192–202
- Wasserstain M et.al. Type 1 Gaucher Disease Presenting With Extensive Mandibular Lytic Lesions: Identification and Expression of a Novel Acid a-Glucosidase Mutation. Am. J. Med. Genet. 84:334–339, 1999
- Horwitz J et.al. Oral Aspects of Gaucher’s Disease: A Literature Review and Case Report. J Periodontol 2007;78:783-788

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