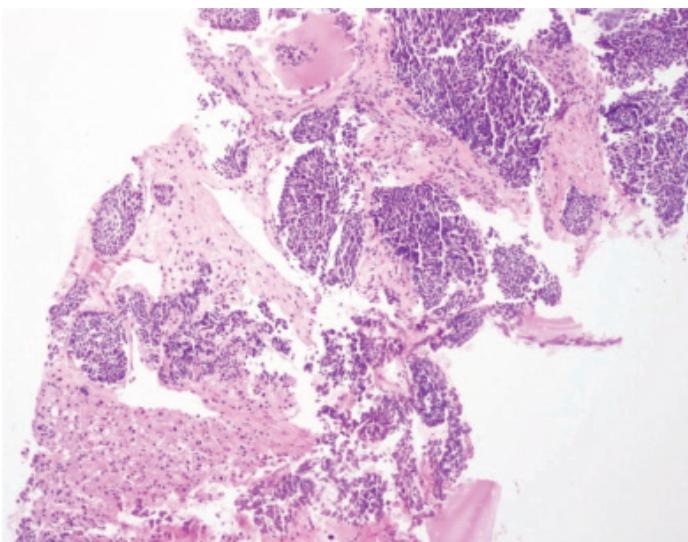
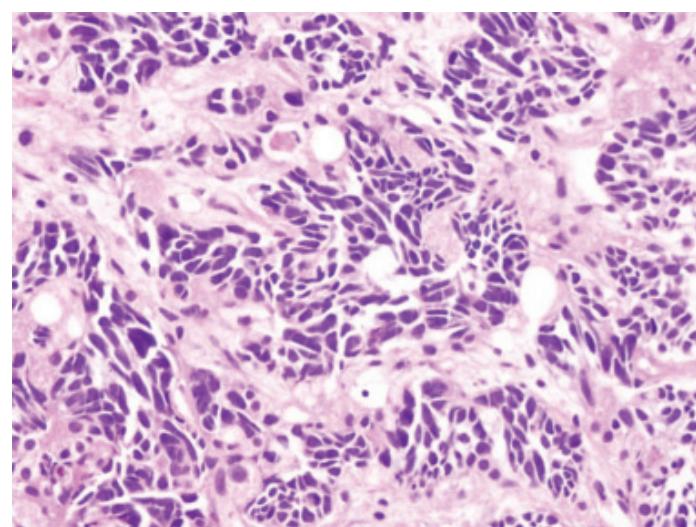


*Klaikeaw N***Case 1**

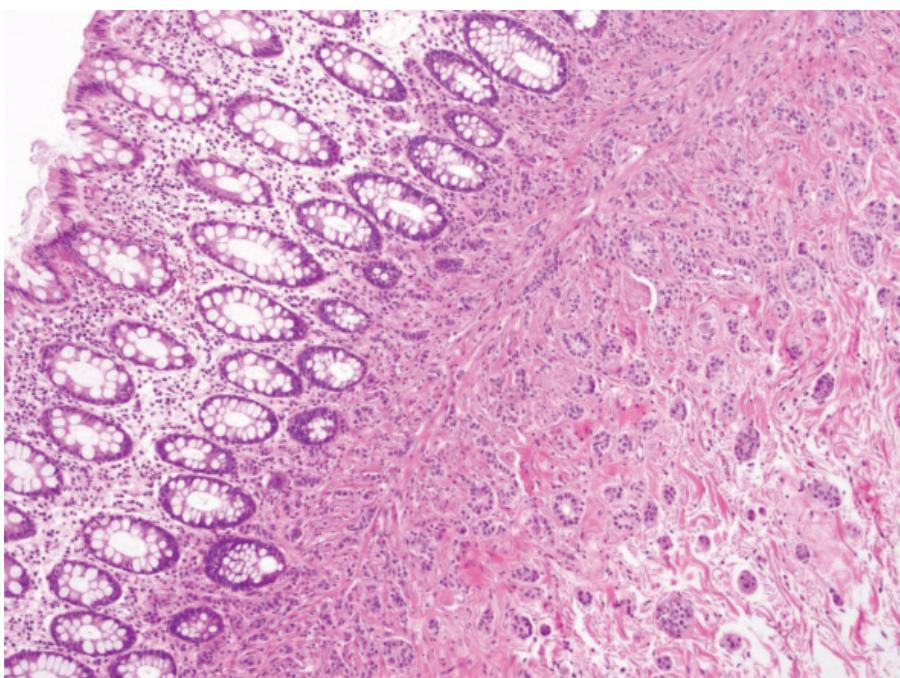
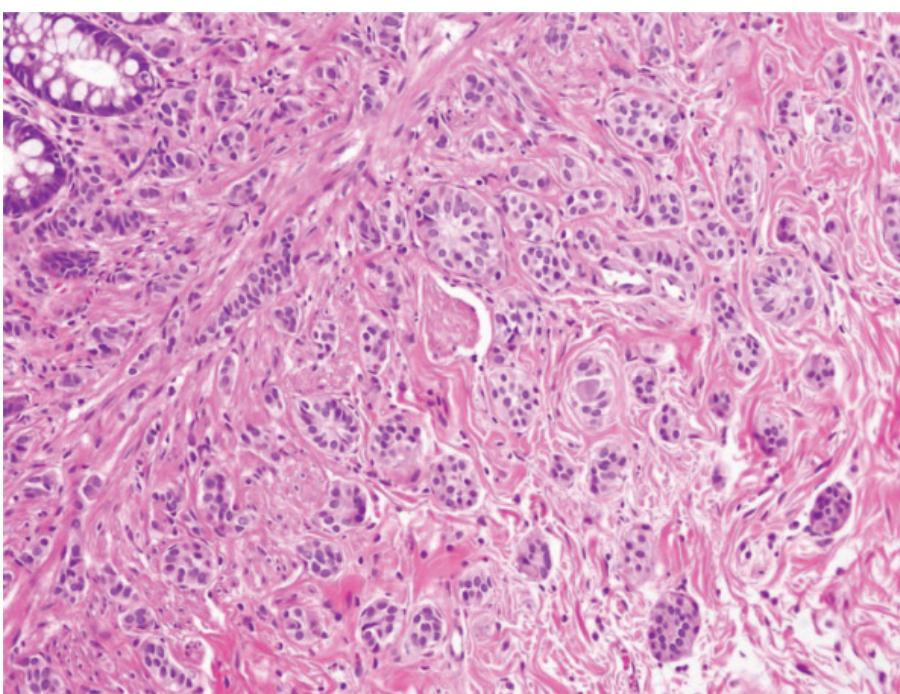
The 55 years old female presented with vaginal bleeding and right upper quadrant pain. She had history of squamous cervical cancer. The computed tomography showed large pelvic and para-aortic lymph node metastases with a multiple liver nodules. The liver biopsy was performed and histopathological findings showed the presence of epithelial tumor sheets arranging in mosaic pattern. Some of them appear in vascular spaces (Figure 1 and 2).

**Figure 1.****Figure 2.****What is the most likely diagnosis ?**

(Answer see page 124)

**Case 2**

A 65-year-old male presented with bloody stool, back pain, and increased serum PSA level of 209 ng/mL. The prostate appeared multiple hypo-echoic mass; the biopsy performed and revealed adenocarcinoma of the prostate. A bone scan revealed metastatic bone lesions in the pelvis and lumbar spine. The colonoscopy was performed and showed thick wall of descending colon and fungating mass with a diameter of 3 cm. Colonic biopsy revealed infiltration of malignant glands in submucosa (Figure 3-5). These tumour cells are positive immunostain for prostatic specific antigen (Figure 6).

**Figure 3.****Figure 4.**

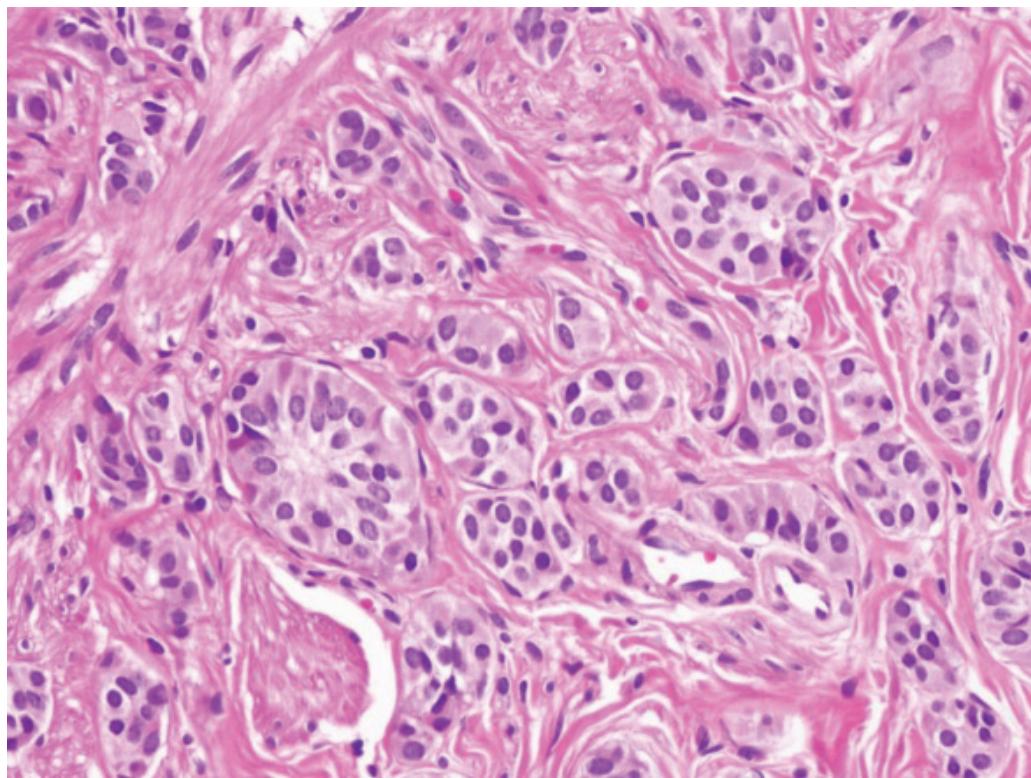


Figure 5.

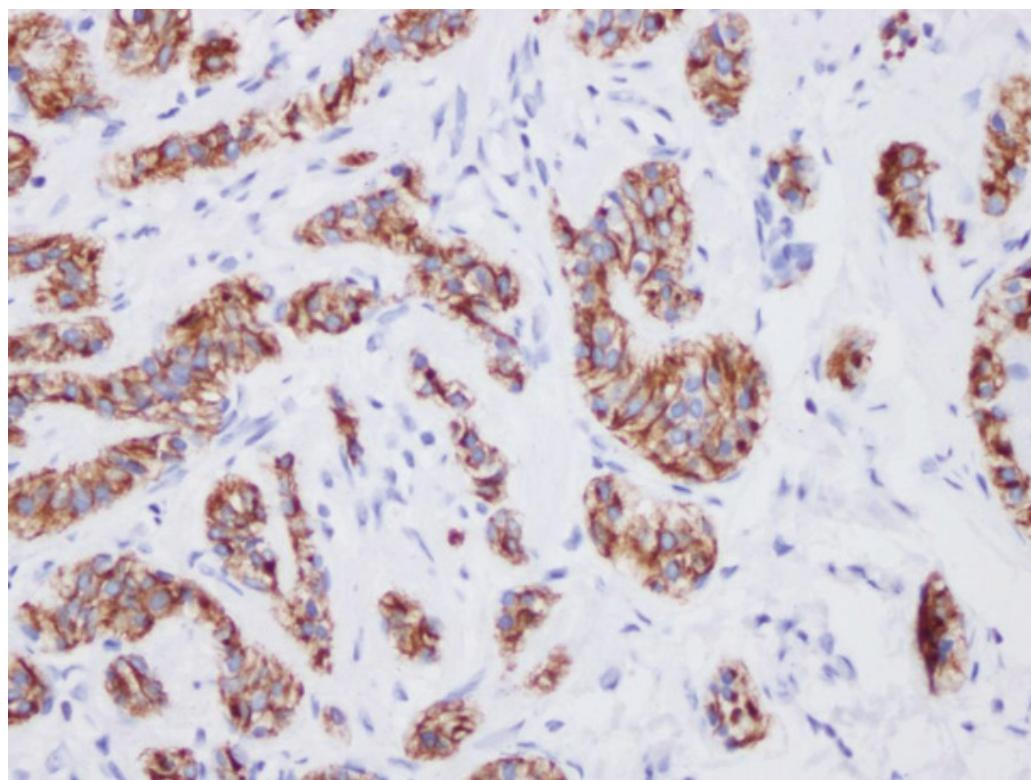


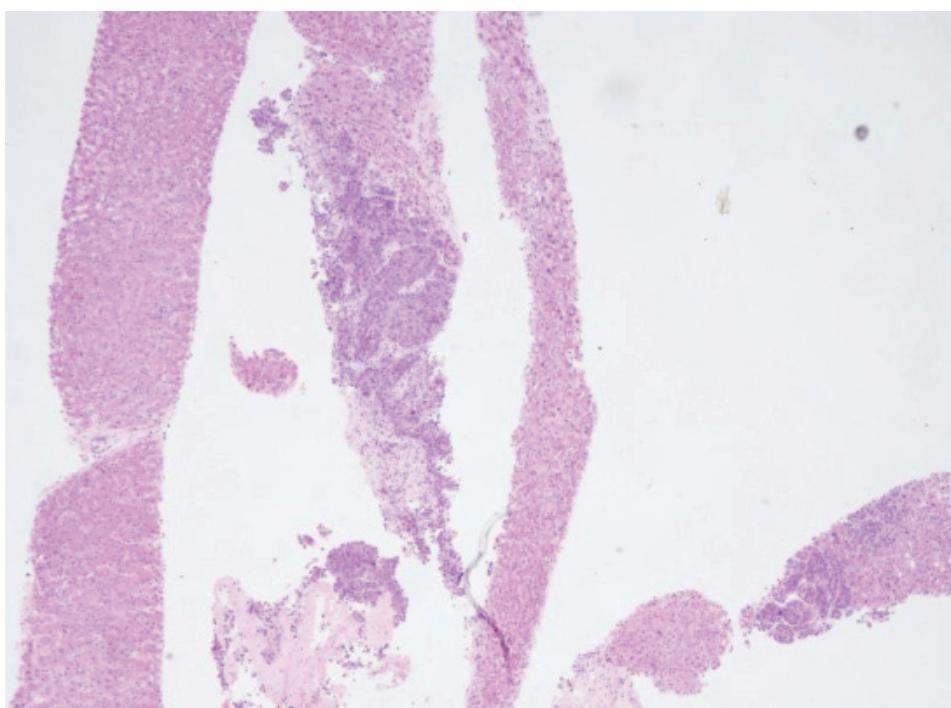
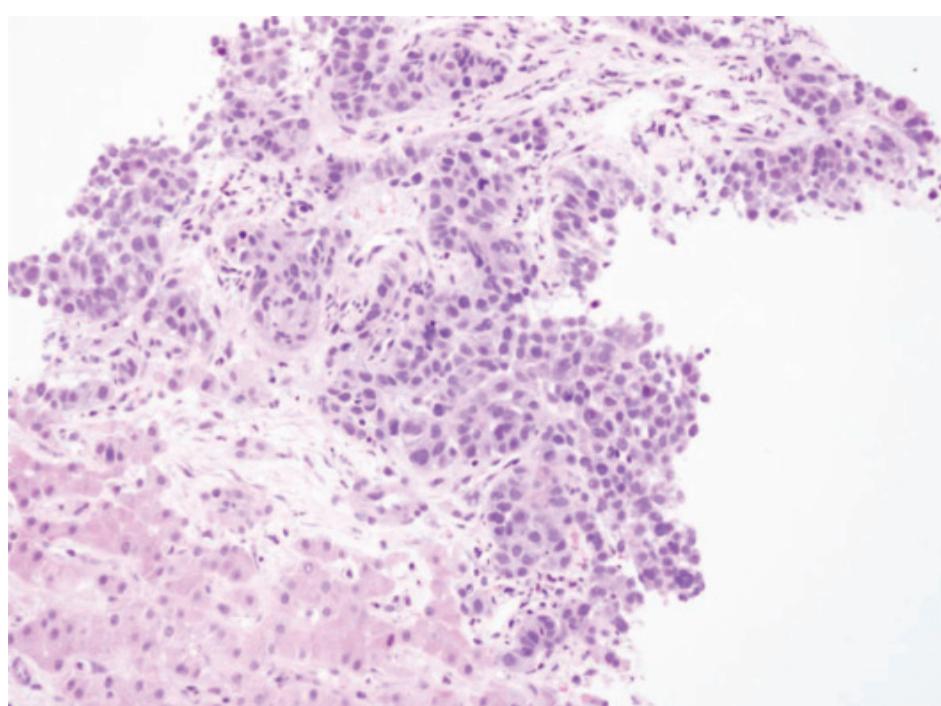
Figure 6.

**What is the most likely diagnosis ?**

(Answer see page 124)

**Case 3**

A 66-year-old woman complained with weight loss and RUQ discomfort. Physical examination revealed hepatomegaly and a mass alining from right upper quadrant to epigastrium. She had neither history of HBV nor HCV infection and normalized AFP. On abdominal US, multiple hepatic echogenous mass lesions shown the biggest  $6.2 \times 3.4$  cm in size were demonstrated. Abdominal CT revealed confirm heterogeneously enhancing multiple hepatic mass lesions, suspected of metastatic tumor. The liver biopsy was performed and showed presence of tumor sheets arranging in trabecular pattern and rimming with endothelial cells. Some of tumor cells contain bile pigment as in Figure 7-9. The immunohistochemistry stain for HepPar1 is positive (Figure 10).

**Figure 7.****Figure 8.**

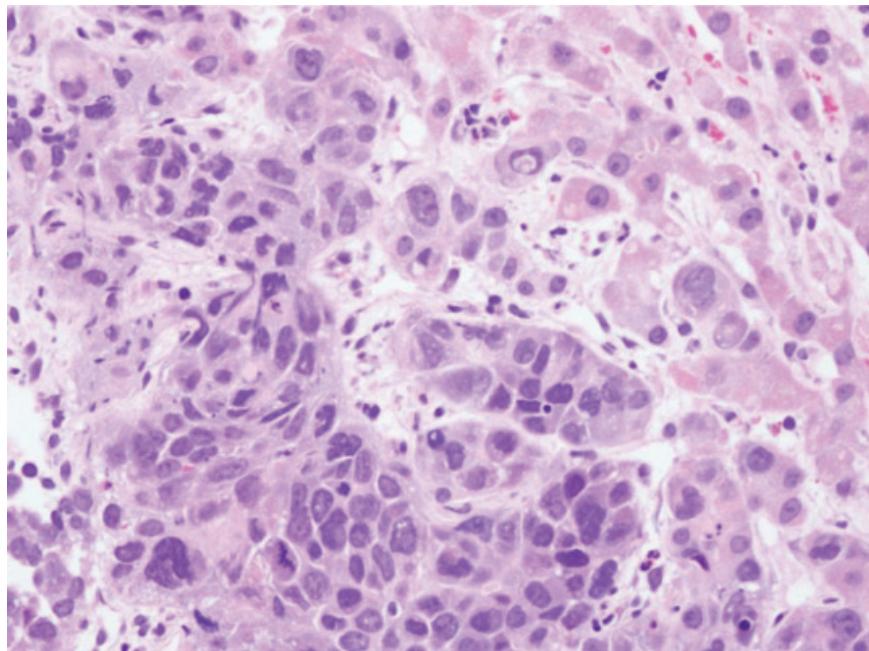


Figure 9.

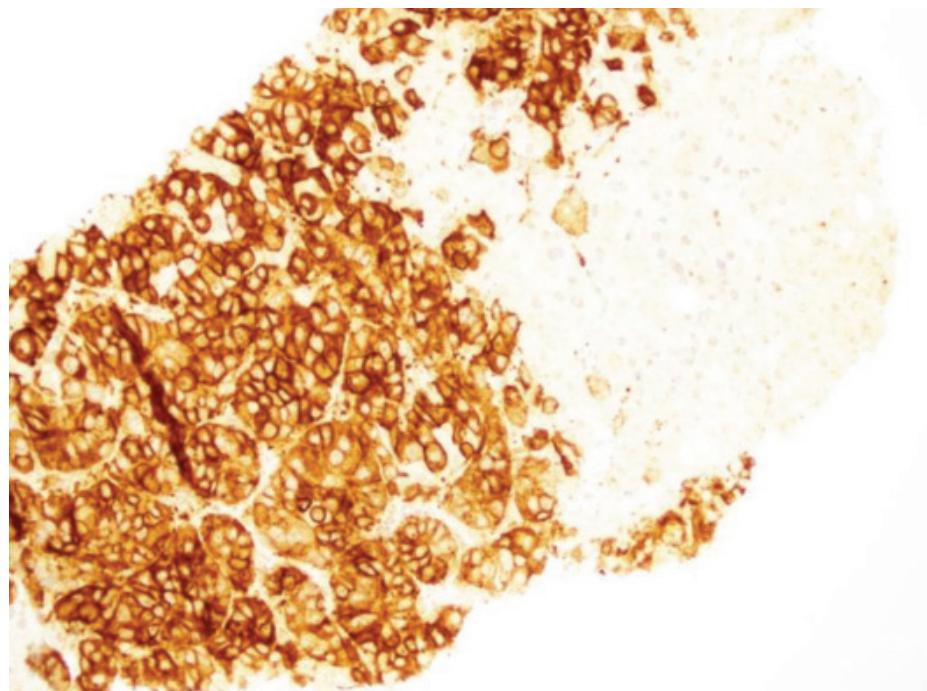


Figure 10.

**What is the most likely diagnosis?**

(Answer see page 124)

**Answer for patho corner**

Case 1 = Metastatic squamous cells carcinoma of cervix

Case 2 = Metastatic prostatic adenocarcinoma

Case 3 = HCC, multinodular type