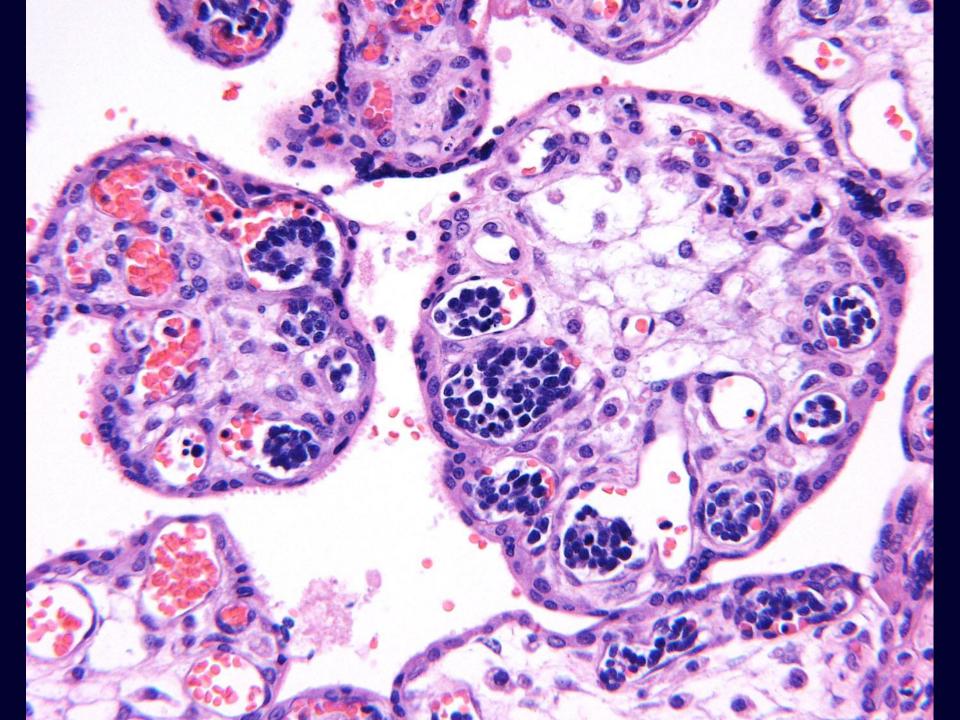
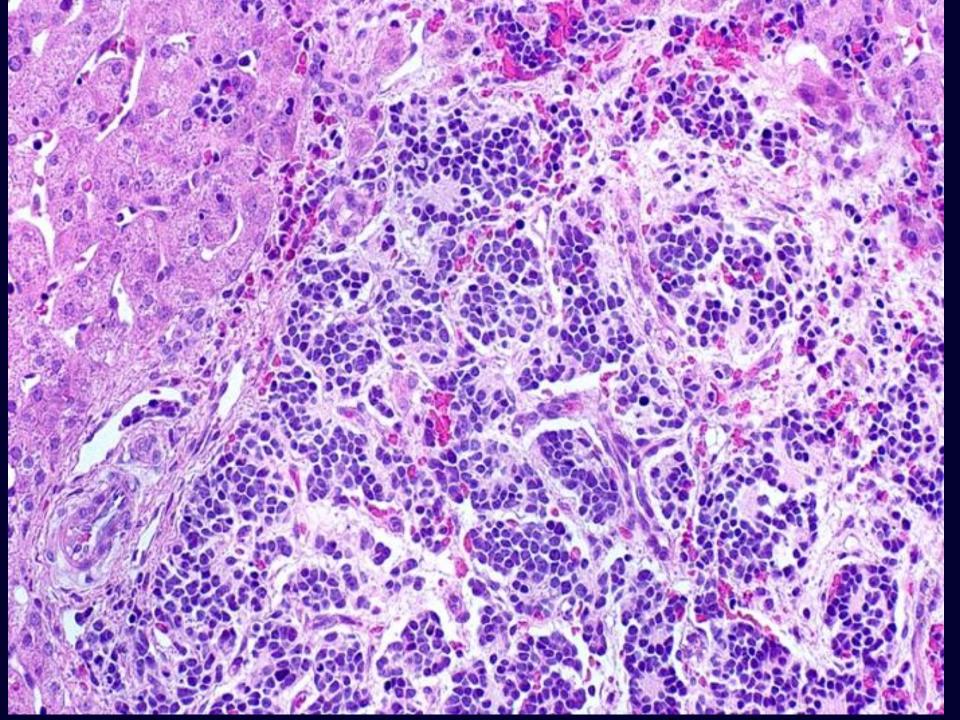
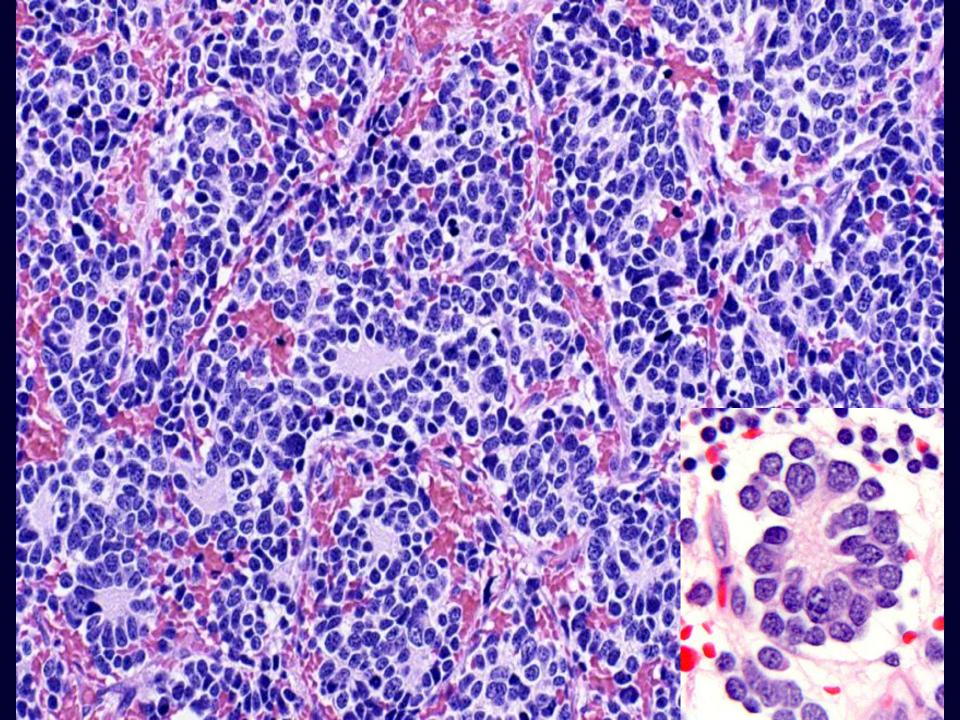
Case 1

Newborn baby Hepatomegaly Adrenal tumor









Stage 4S case

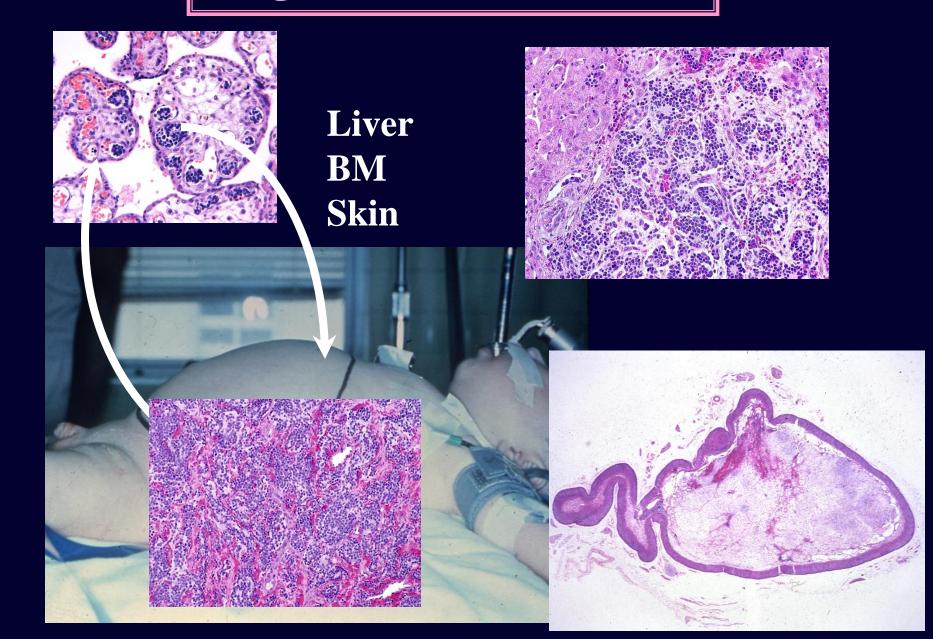
Age: < 1yr

Primary: Stage 1 or 2

Metastasis to:

Liver, Skin, and/or BM (<10% of total nuclear cells) without Bone destruction

Stage 4S Neuroblastoma

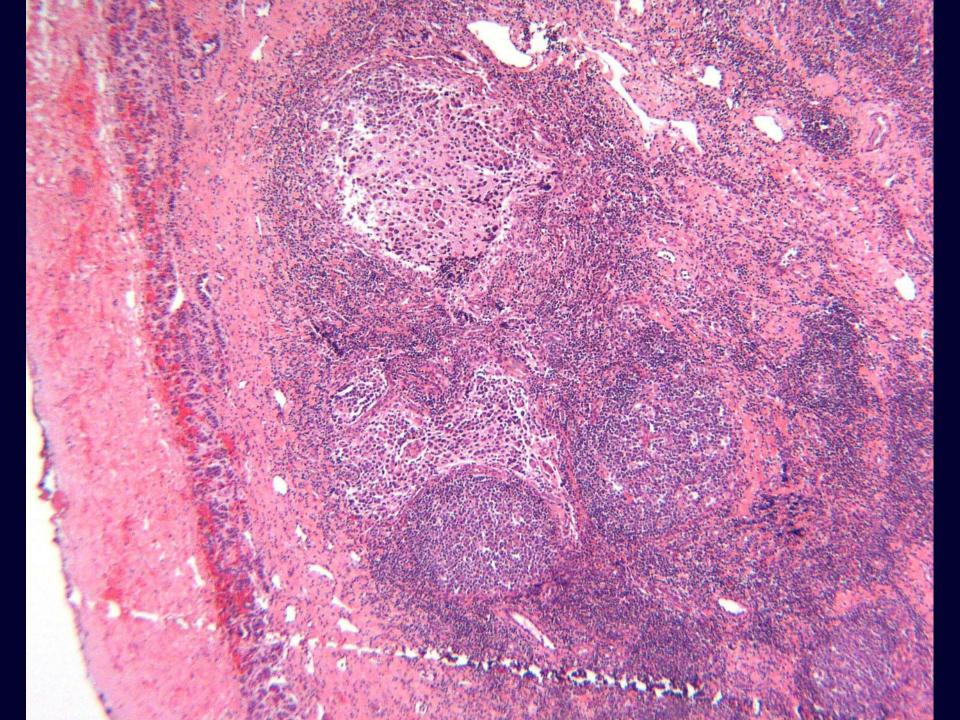


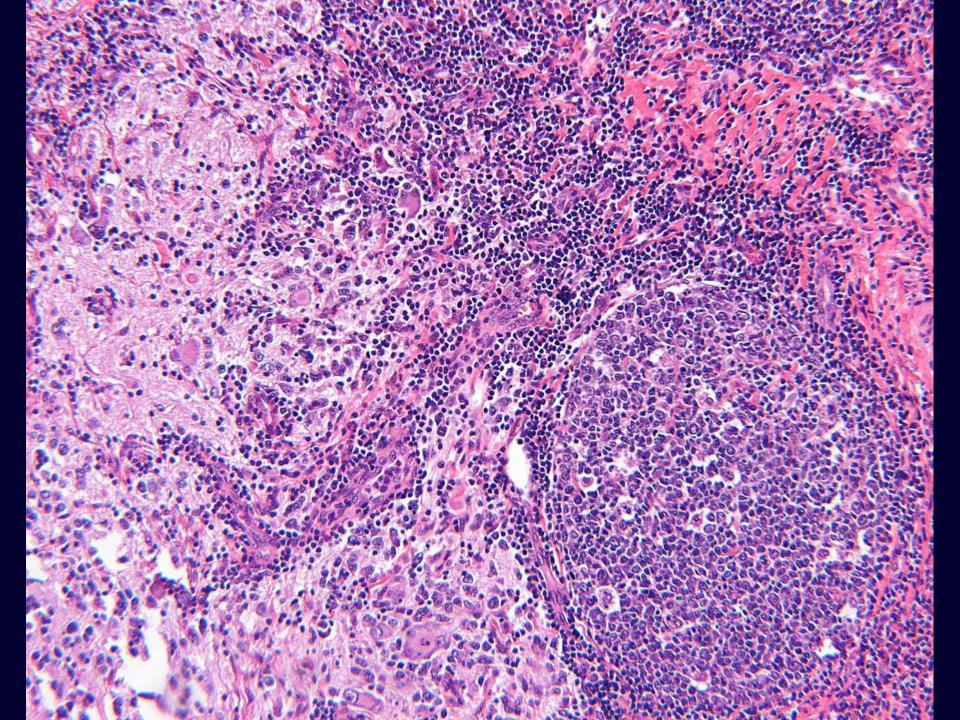
Case 2

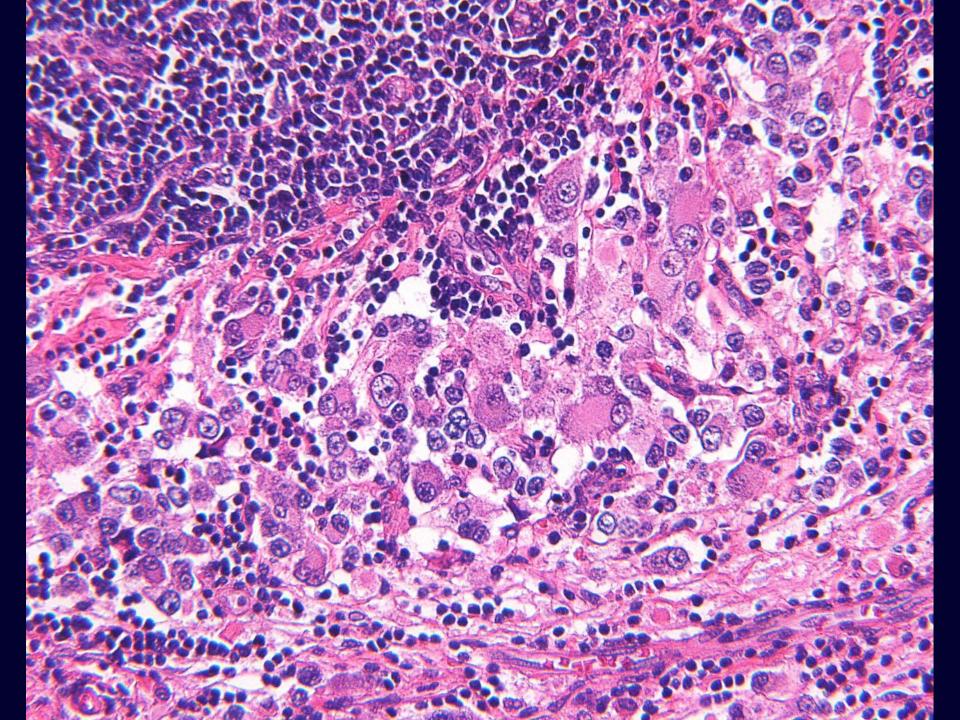
1 year and 8 months of age
Opsoclonus-Myoclonus-Ataxia
Syndrome
Adrenal tumor

Opsoclonus-Myoclonus-Ataxia Syndrome

- Defined by:
 - Slow or rapid onset of ataxia
 - Chaotic rapid eye movements (opsoclonus)
 - Polymyoclonus
- DDx: encephalitis, demyelinating syndromes, intoxications, idiopathic (50%!), para-neoplastic syndrome associated with neural crest tumors
- Seen in 2-3% of children with neuroblastoma
- 70-80% have long-term neurologic deficits







Neuroblastoma (Schwannian Stroma-poor) Differentiating Subtype

Extensive Lymphocytic Infiltrationwith Follicular Formation

Syndromes associated with Neuroblastoma

- Pepper Syndrome:
 - Massive Hepatic Involvement
- Hutchinson's Syndrome" Histology group and
 - Skull and Other Bone Metastasis
- Horner's Syndrome
 - Unilateral Ptosis, Myosis, and Anhidrosis
- Opsoclonus-Myoclonus-Ataxia Syndrome
 - Antineuronal Antibodies
- Kerner-Morrison Syndrome
 - Intractable Diarrhea due to VIP secretion
- Neurocristopathy Syndrome
 - Congenital Central Hypoventilation (Ondine's Curse)
 - Hirschsprung's disease