



25.ULUSAL PATOLOJİ KONGRESİ

Nöropatoloji Slayt Semineri Sellar Bölge Kitle Lezyonları

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OLGU SUNUMU

- 73y, K
- Baş ağrısı
- Kranial MR: Sellar yerleşimli 2x2 cm. hipofize göre daha az kontrast tutan lezyon



24.12.2013 00:48:39
20131223060
iv kontrast
LOC: 9,81
THK: 3 SP: 3,30
HFS

A

P

NEX: 1
EC: 1
SE
FA: 90
TR: 500
TE: 17
AQM: 205\256

Z: 1,65
C: 753
W: 1477
DFOV: 20x18cm
Sıkıştırıldı 7:1
IM: 8 SE: 11

Sayfa: 8 / 12

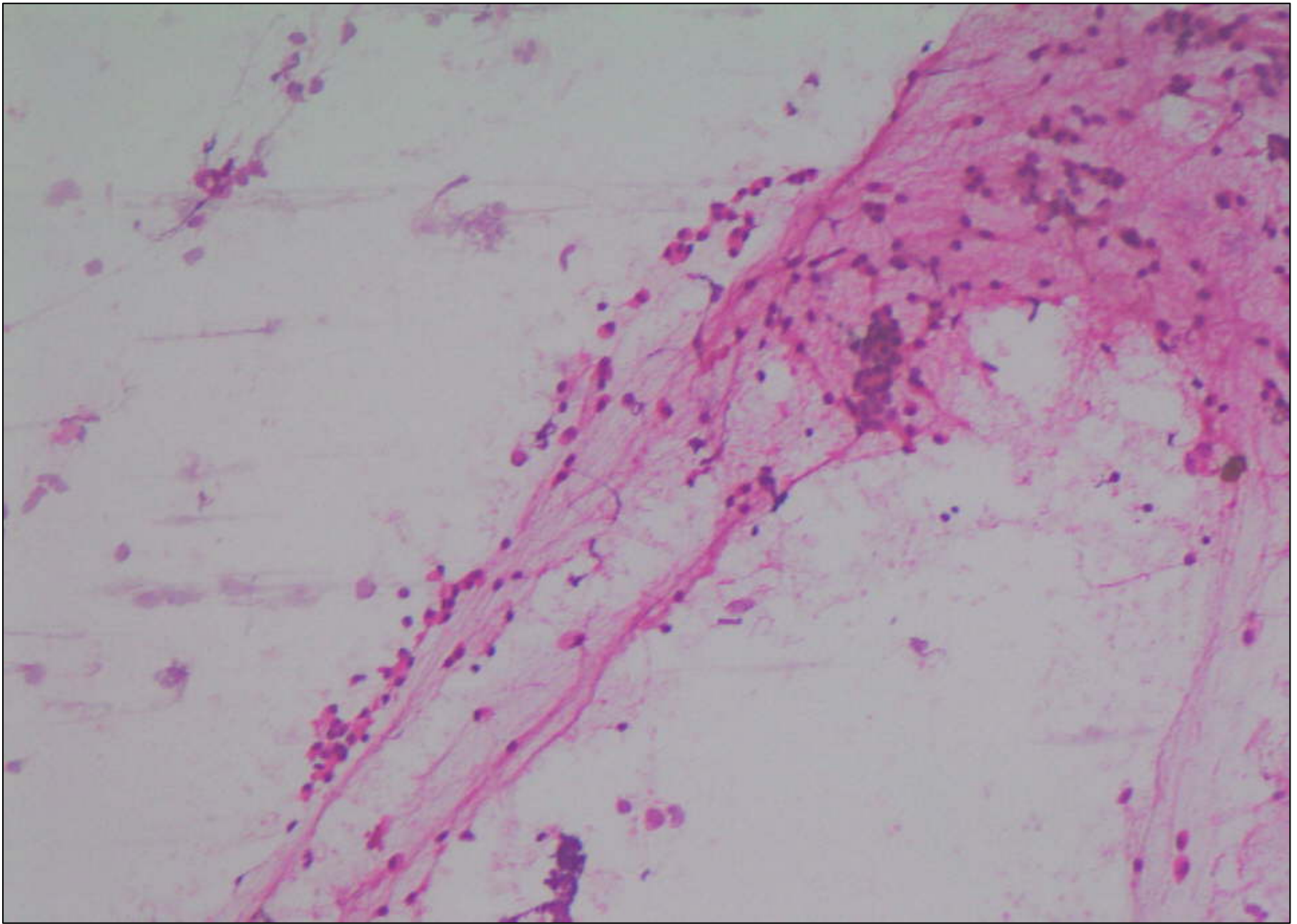
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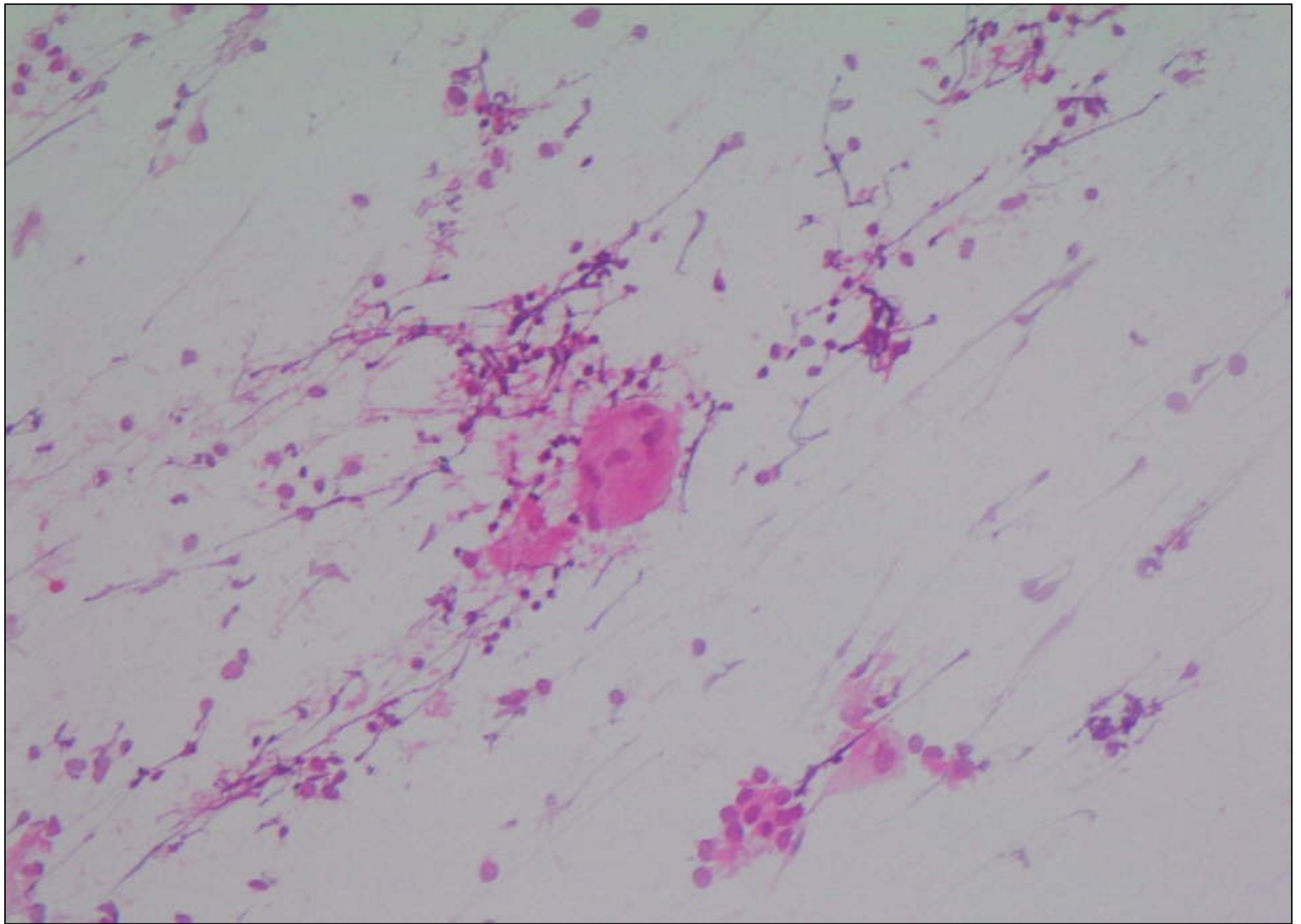


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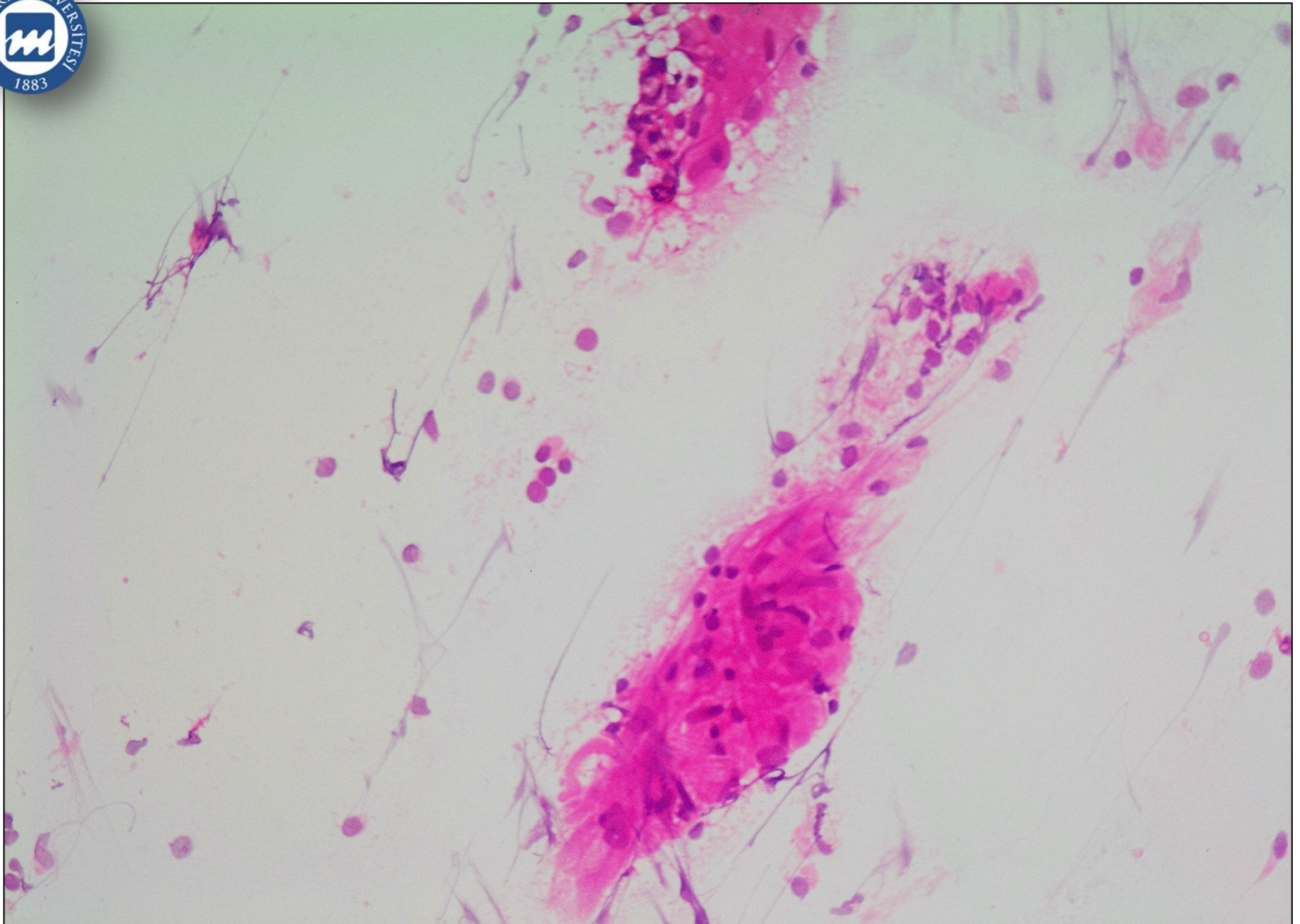
- Sellar kitle ön planda hipofiz adenomu
- Endoskopik transsfenoidal eksizyon
- Cerrahi sırasında frozen tanı isteđi

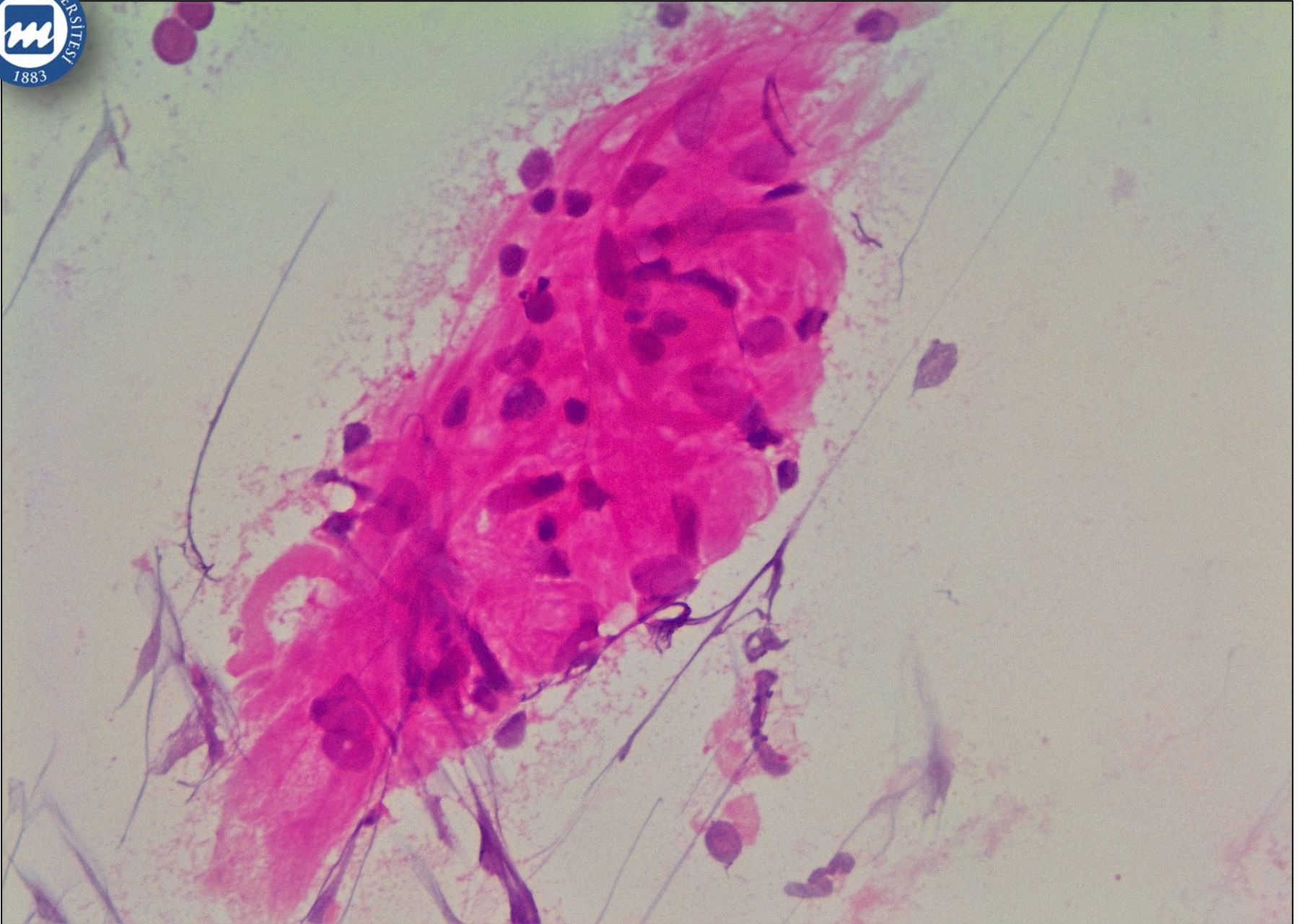


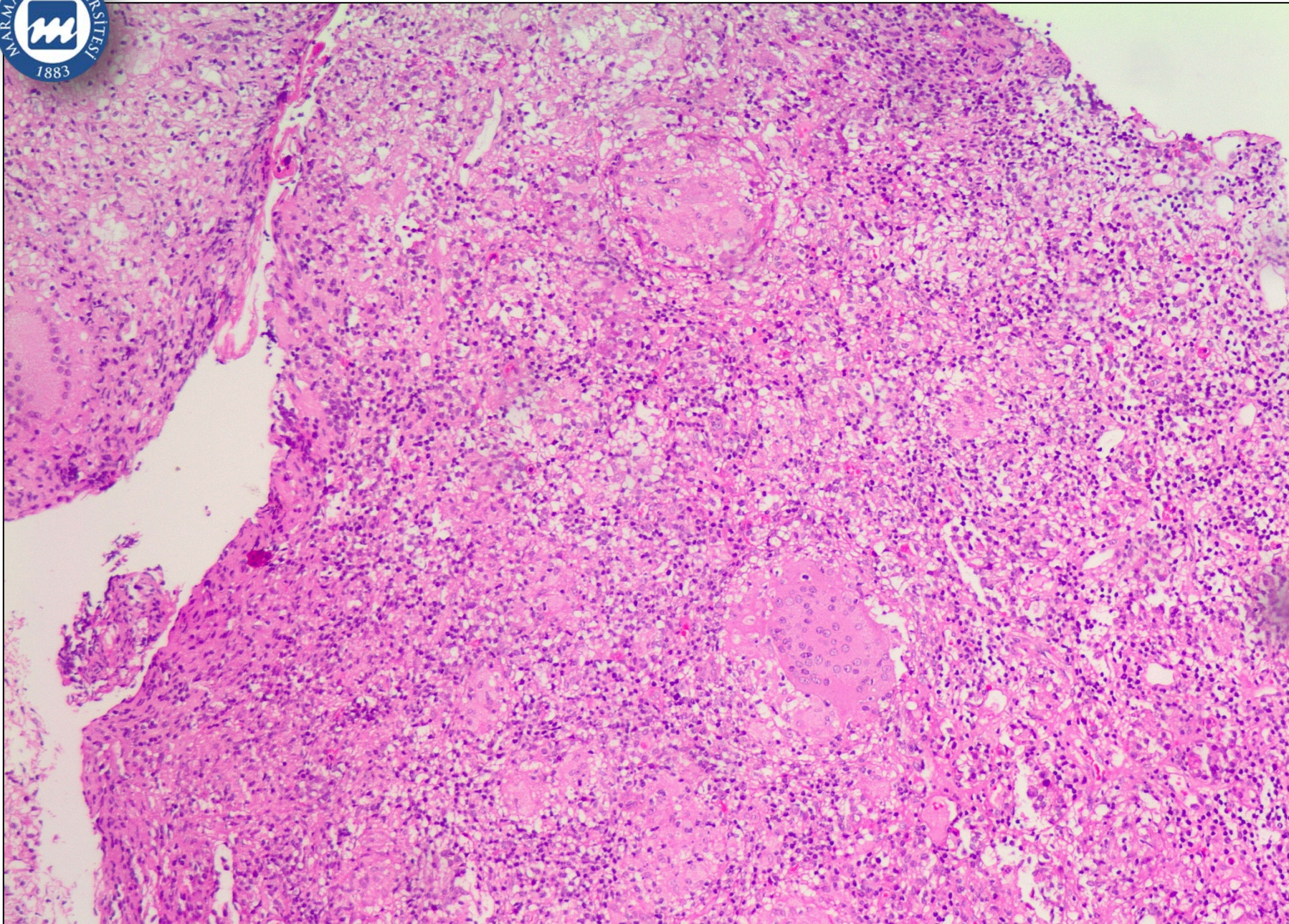
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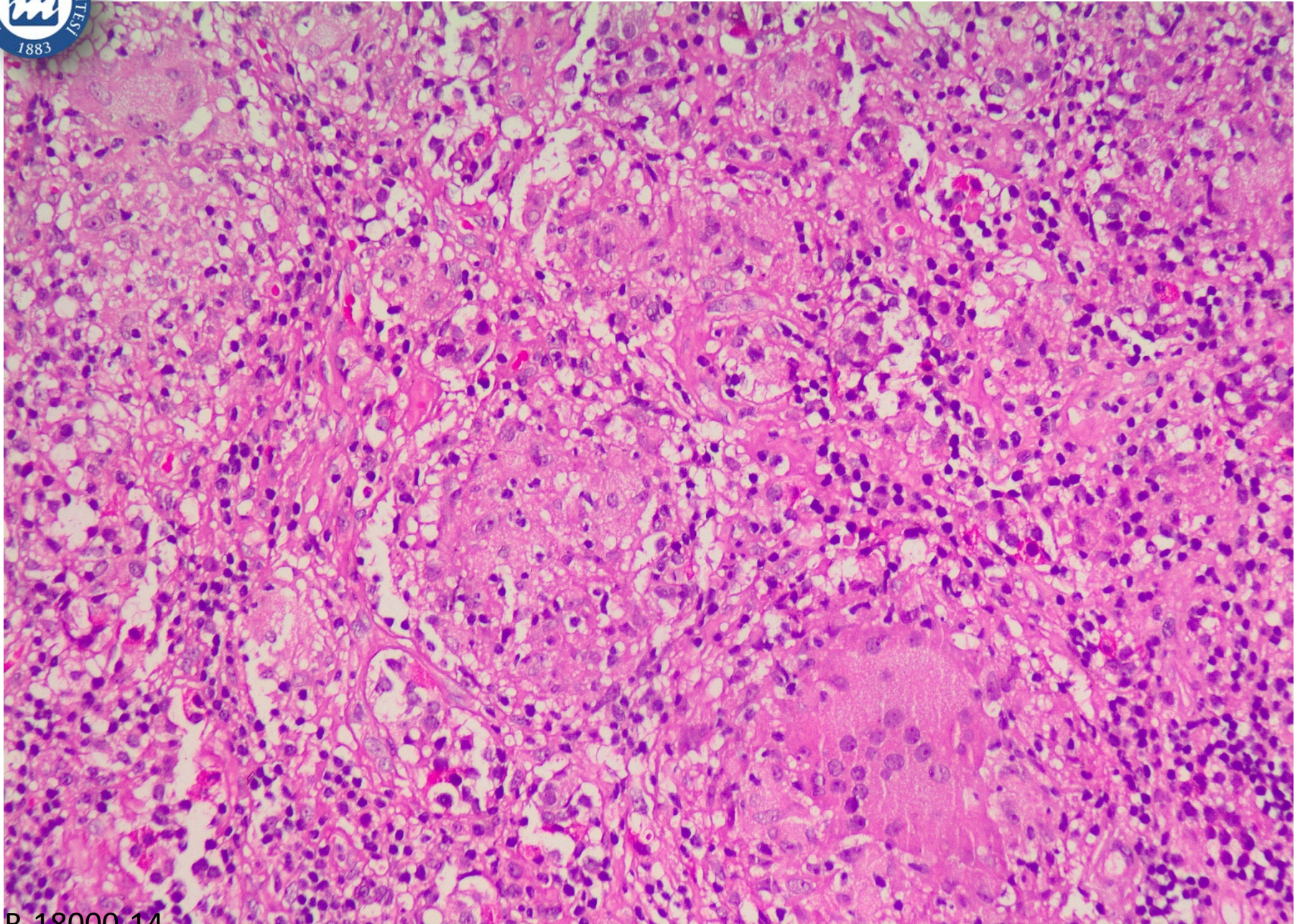


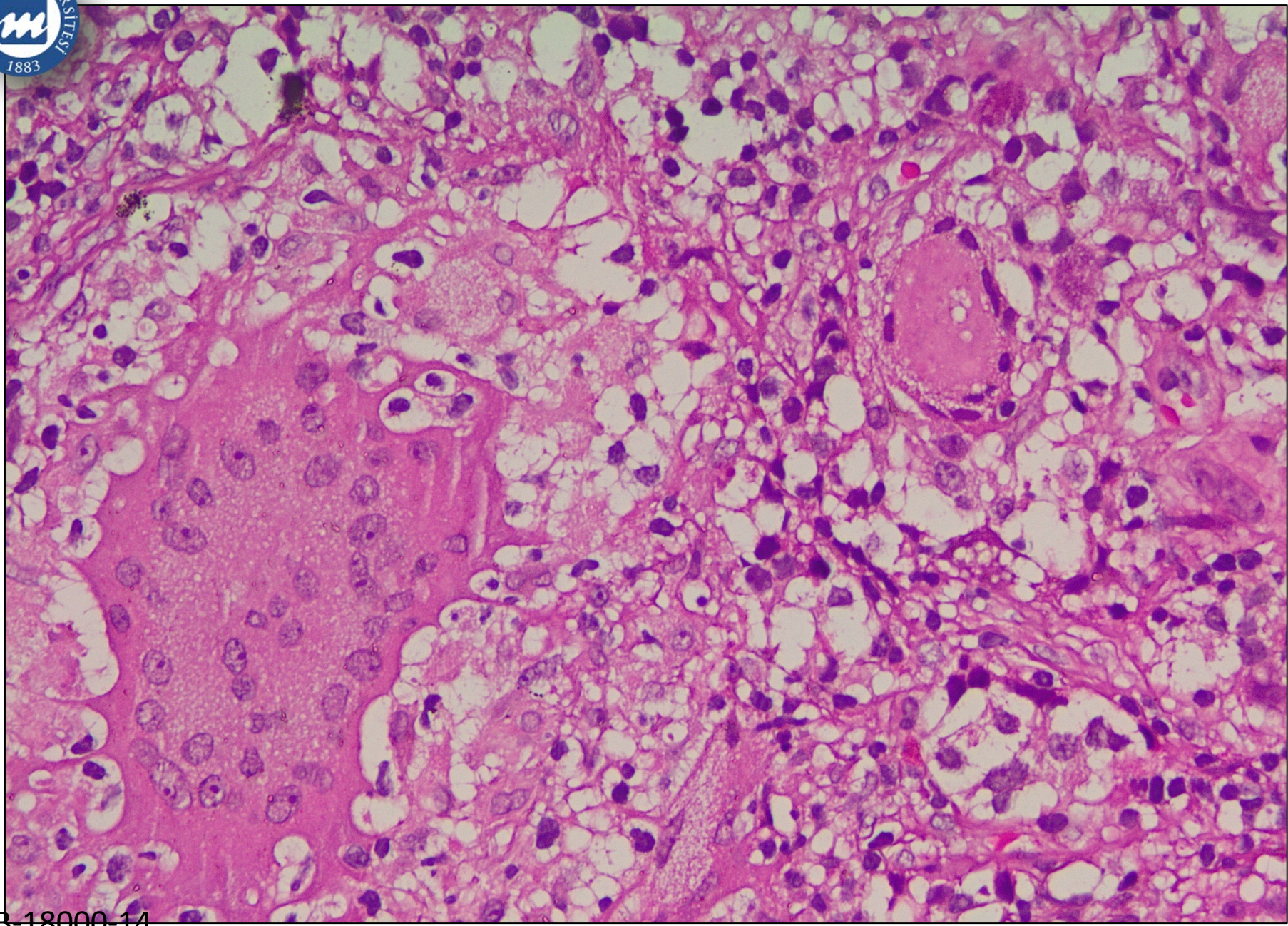
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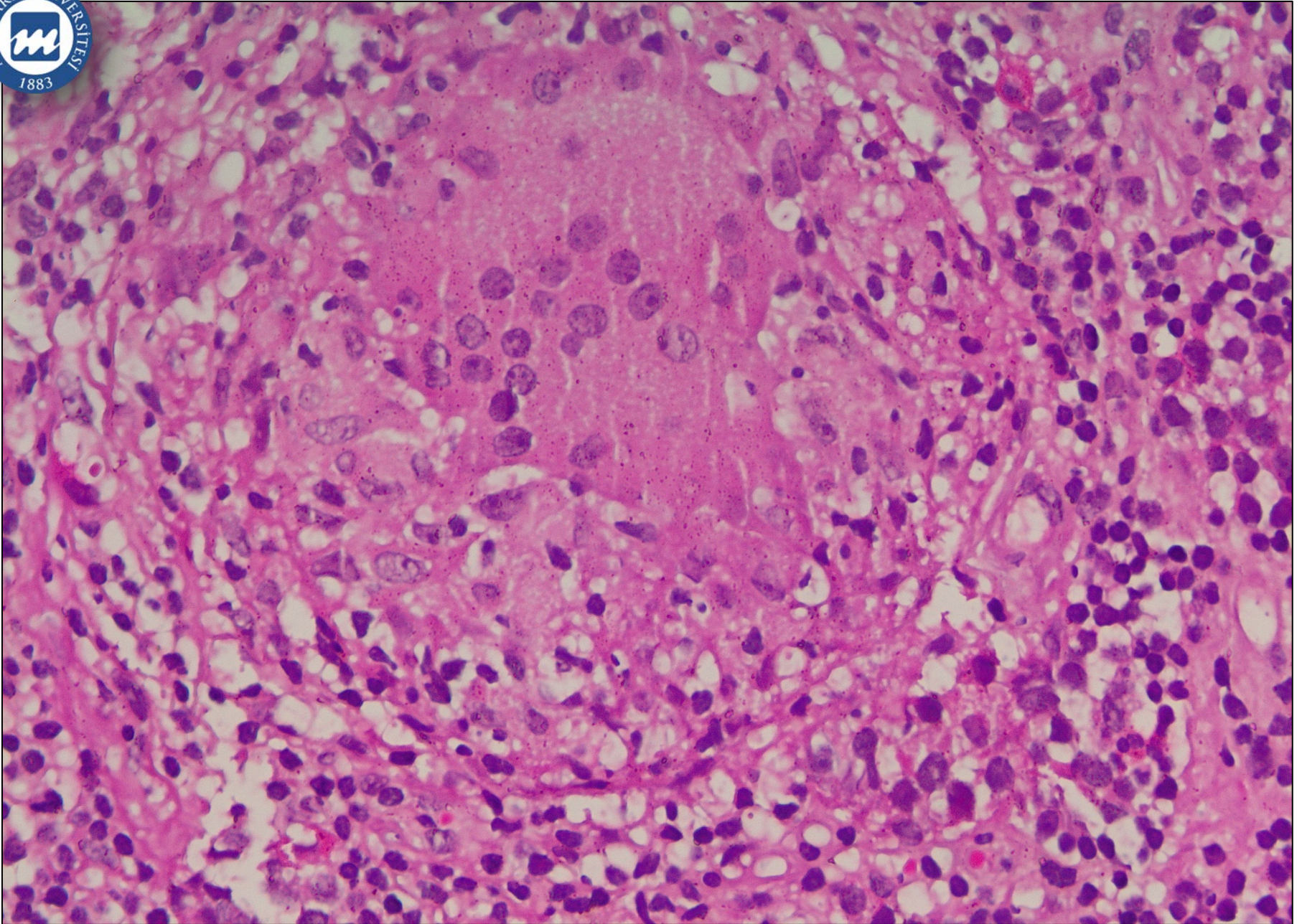


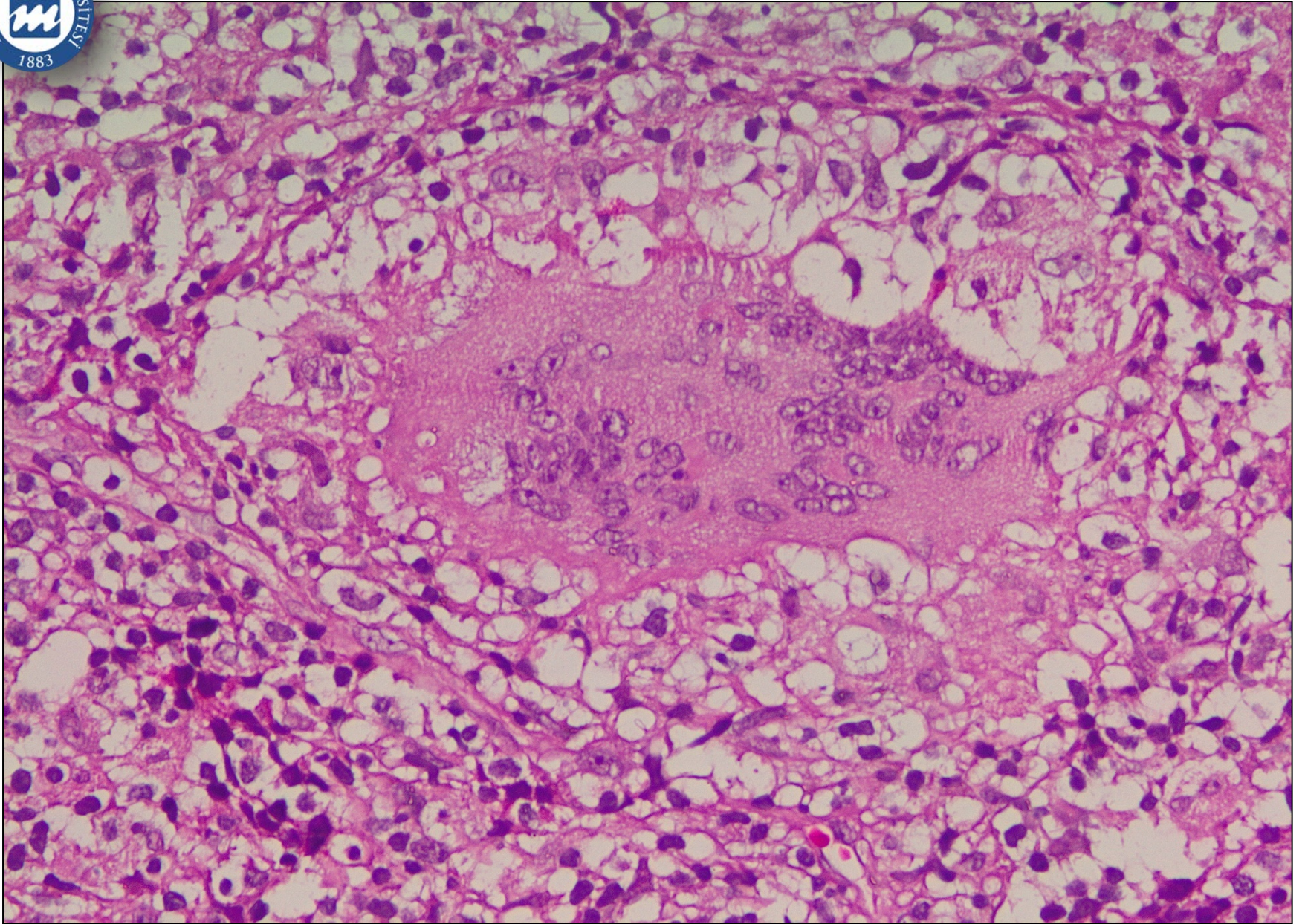


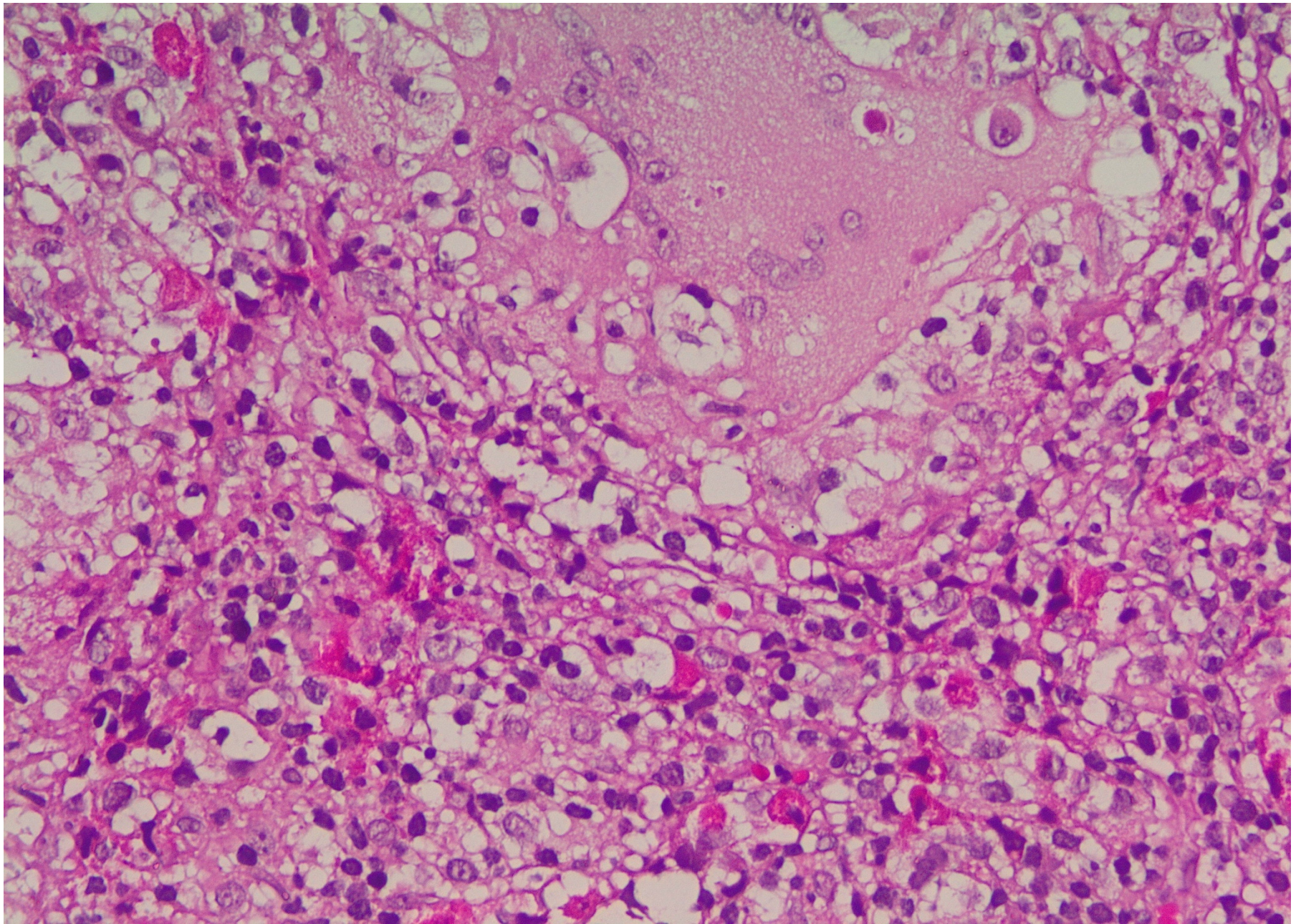




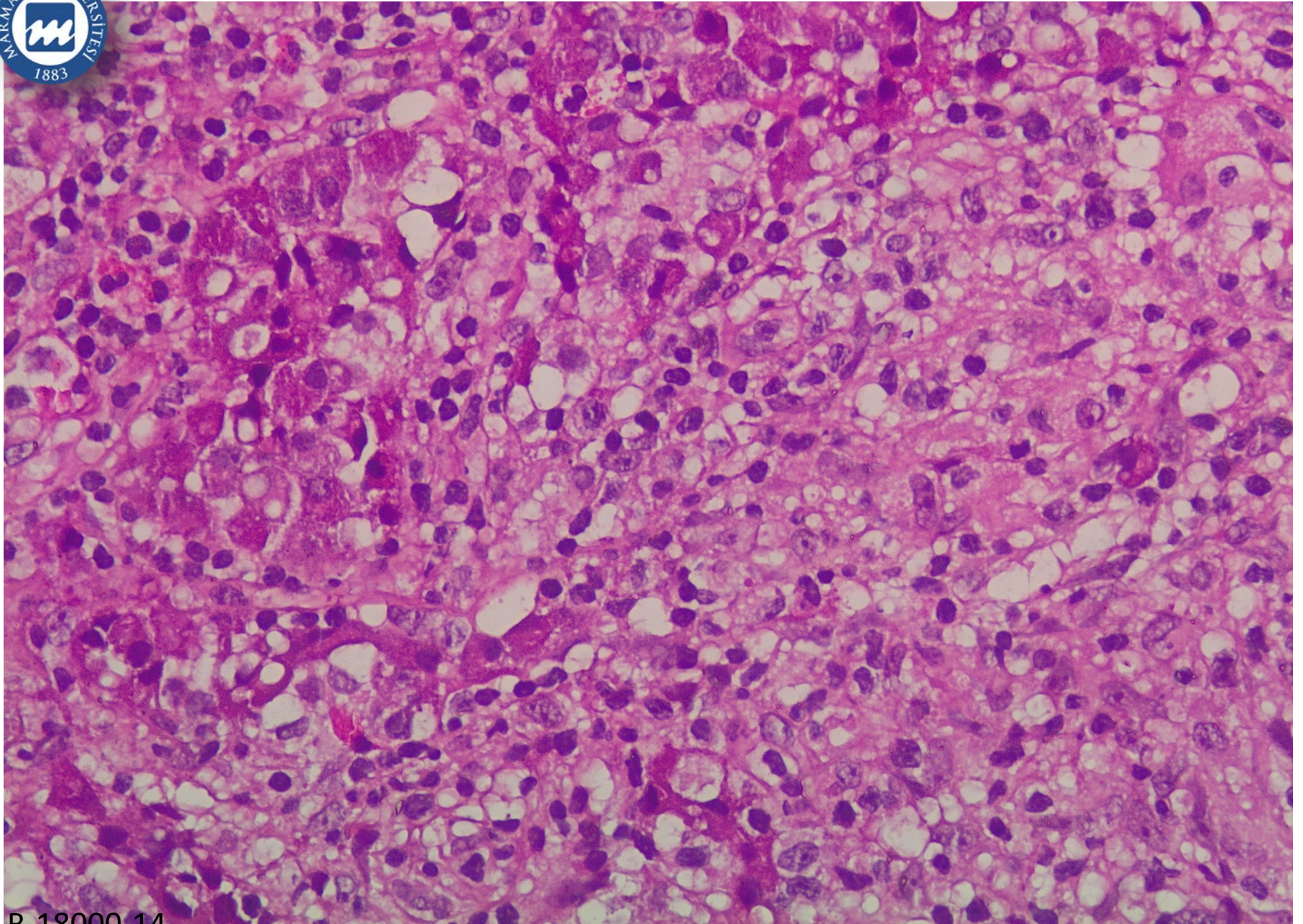


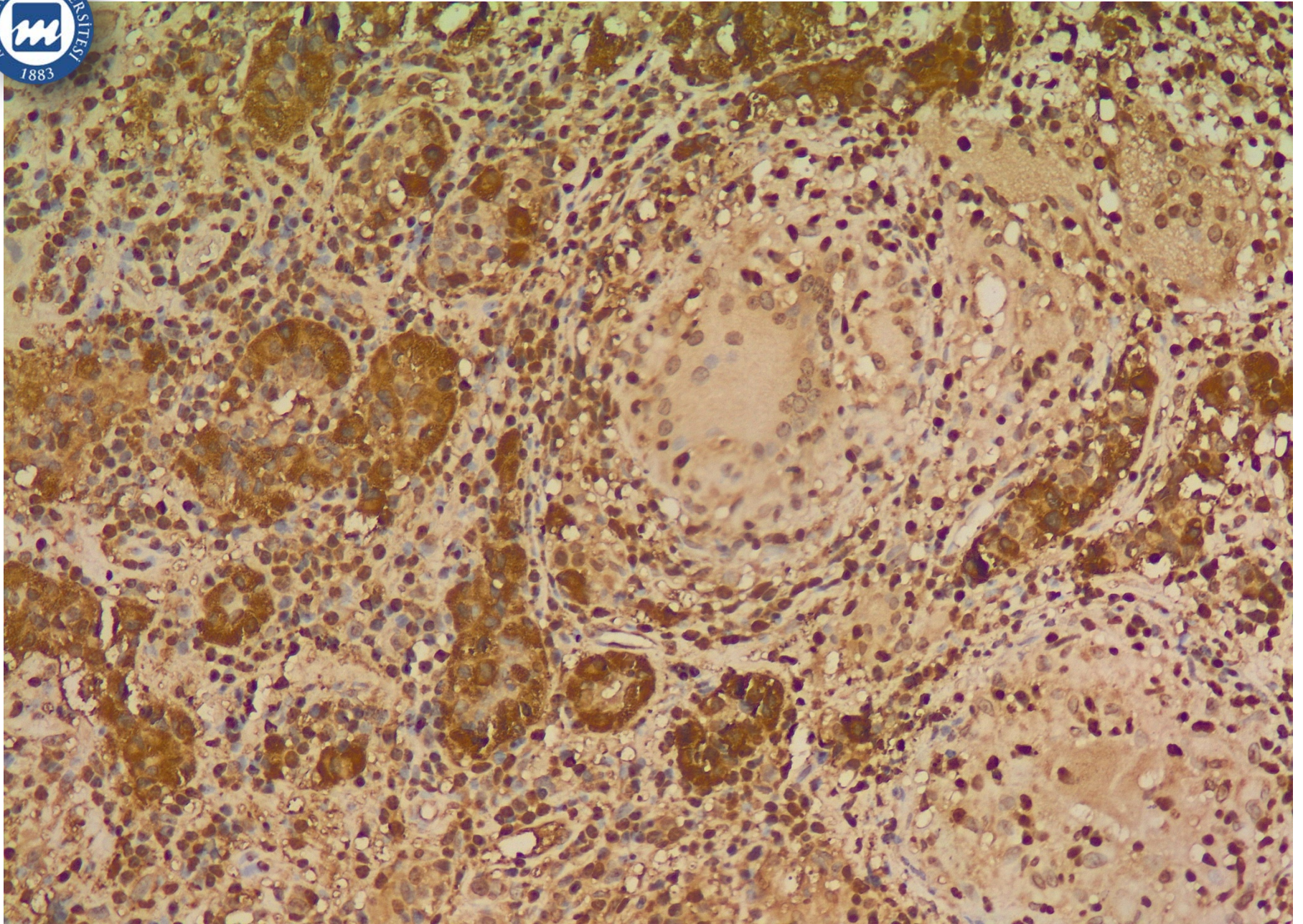




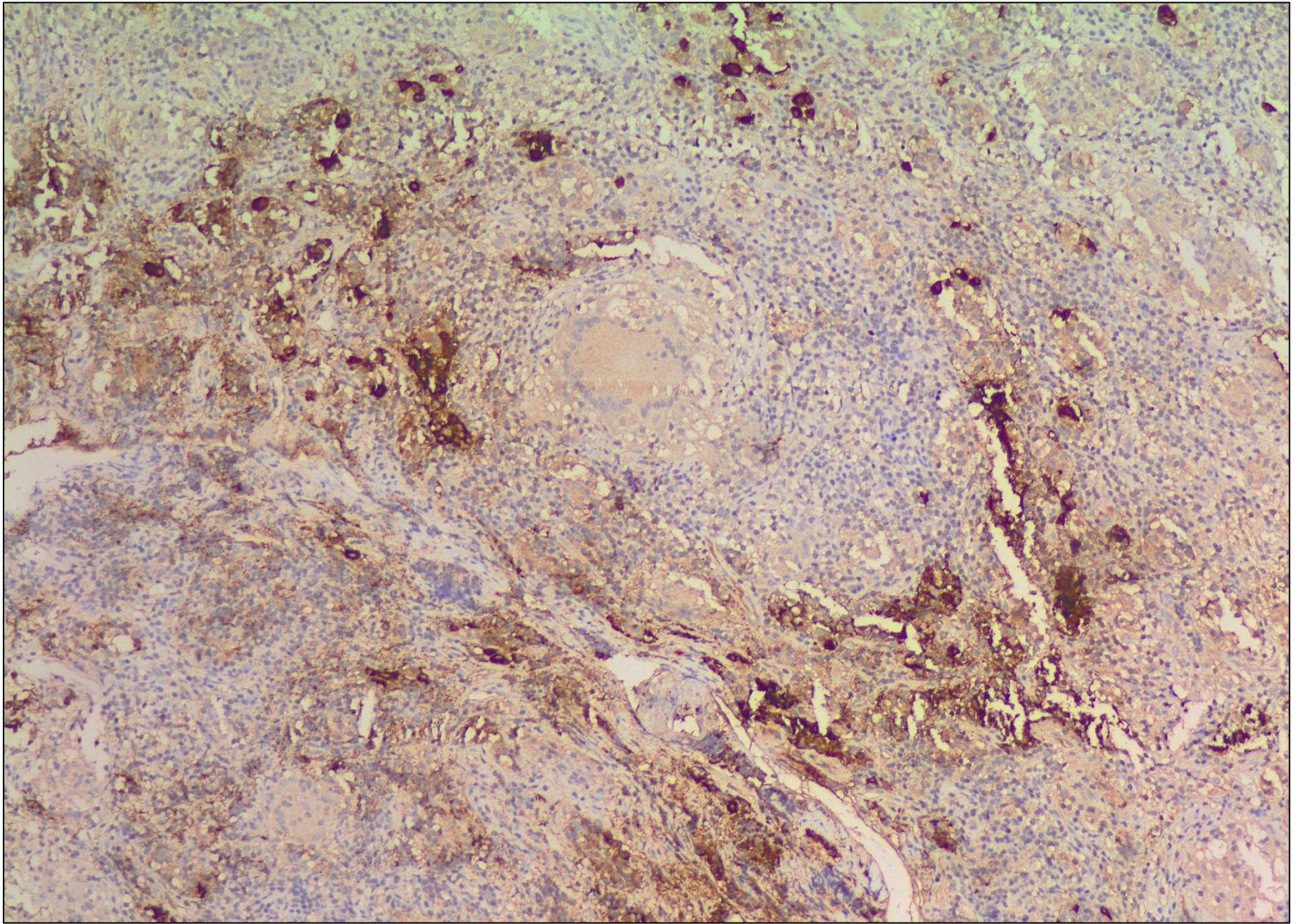


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ACTH



GH



Ayırıcı tanı

- Enfeksiyöz (Tbc, Sfilis)
- Sarkoidoz
- Sellar bölgenin inflamatuvar lezyonları
 - İdiopatik granümatöz hipofizit
 - Ksantogranümatöz hipofizit



Tanı

- İdiopatik granüloamatöz hipofizit



İdiopatik Granülomatöz hipofizit

- İlk kez 1917 Simmonds
- Otoimmün hastalık
- <%1 pitüiter lezyon
- K=E
- Diabetes insipidus ve panhipopitüitarizm
- Tiroid, adrenal, testis te benzer tutulum



İdiopatik Granülomatöz hipofizit

- Hipofizde büyüme-adenomu taklit eder
- Geç dönemde küçülür-sert



İdiopatik Granülomatöz hipofizit

- Non-kazeifiye granülomatöz inflamasyon
- Schaumann cisimcikleri
- Hafif lenfositik infiltrasyon
- İyi forme granülom
- Kronikleştikçe fibrozis
- Hipofizin destrüksiyonu



İdiopatik Granüloamatöz hipofizit

- patogenezi;
- Anti-pitüitary autoantibody (APA)
- Lenfositik hipofizit ile aynı lezyon mu?

Hunn et al. Idiopathic granulomatous hypophysitis: a systematic review of 82 cases. Pituitary (2014) 17:357-365



İdiopatik Granüloamatöz hipofizit

- Tedavi;
- Cerrahi eksizyon +/- kortikosteroid

Idiopathic granulomatous hypophysitis: a systematic review of 82 cases in the literature

Benjamin H. M. Hunn · William G. Martin ·
Steven Simpson Jr. · Catriona A. Mclean

362

Pituitary (2014) 17:357–365

Table 3 Comparison of outcomes between cases managed with excision and excision and corticosteroids, and excision and biopsy and corticosteroids

Outcome	n/N (%)		<i>p</i> value
	Excision only (n = 30/82)	Excision and corticosteroids (n = 23/82)	
Symptom resolution	19/21 (90.5)	13/19 (68.4)	<i>p</i> = 0.098
Need for hormone replacement therapy	17/26 (65.4)	18/20 (90.0)	<i>p</i> = 0.067
Recurrence	2/25 (8.0)	3/20 (15.0)	<i>p</i> = 0.46

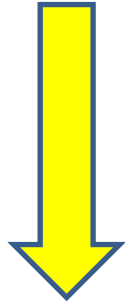
Outcome	n/N (%)		<i>p</i> value
	Excision only (n = 30/82)	Biopsy and corticosteroids (n = 9/82)	
Symptom resolution	19/21 (90.5)	7/8 (87.5)	<i>p</i> = 0.82
Need for hormone replacement therapy	17/26 (65.4)	8/9 (88.9)	<i>p</i> = 0.21
Recurrence	2/25 (8.0)	1/9 (11.1)	<i>p</i> = 0.78

Significance of difference in outcome by treatment group assessed by logistic regression

Sellar Bölgenin İnflamatuvar Lezyonları



İdipatik Granülomatöz
hipofizit



Lenfositik hipofizit



Ksantomatöz/
ksantogranülomatöz
hipofizit



IgG4 ilişkili
hipofizit

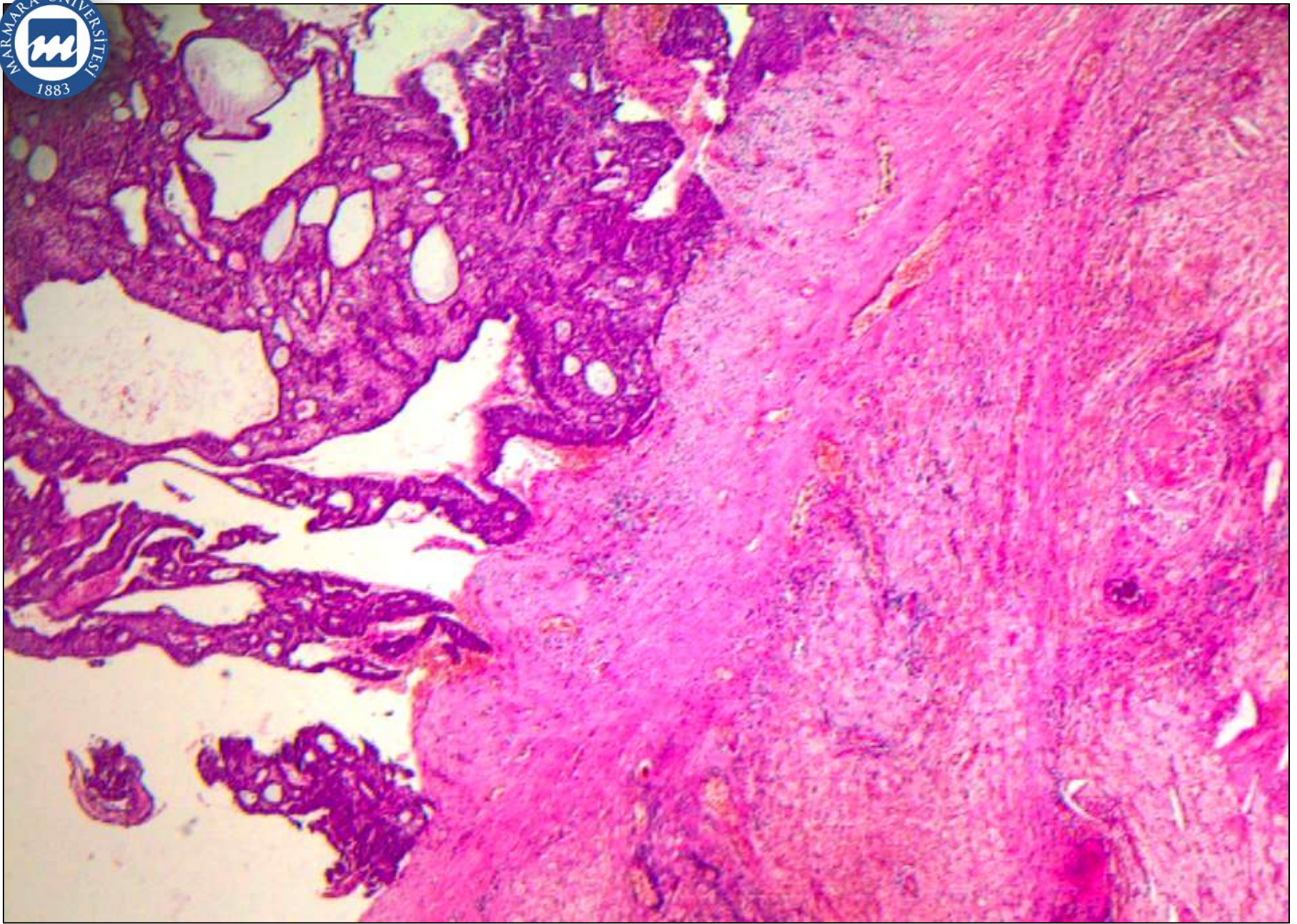
Xsantogranüloamatöz hipofizit

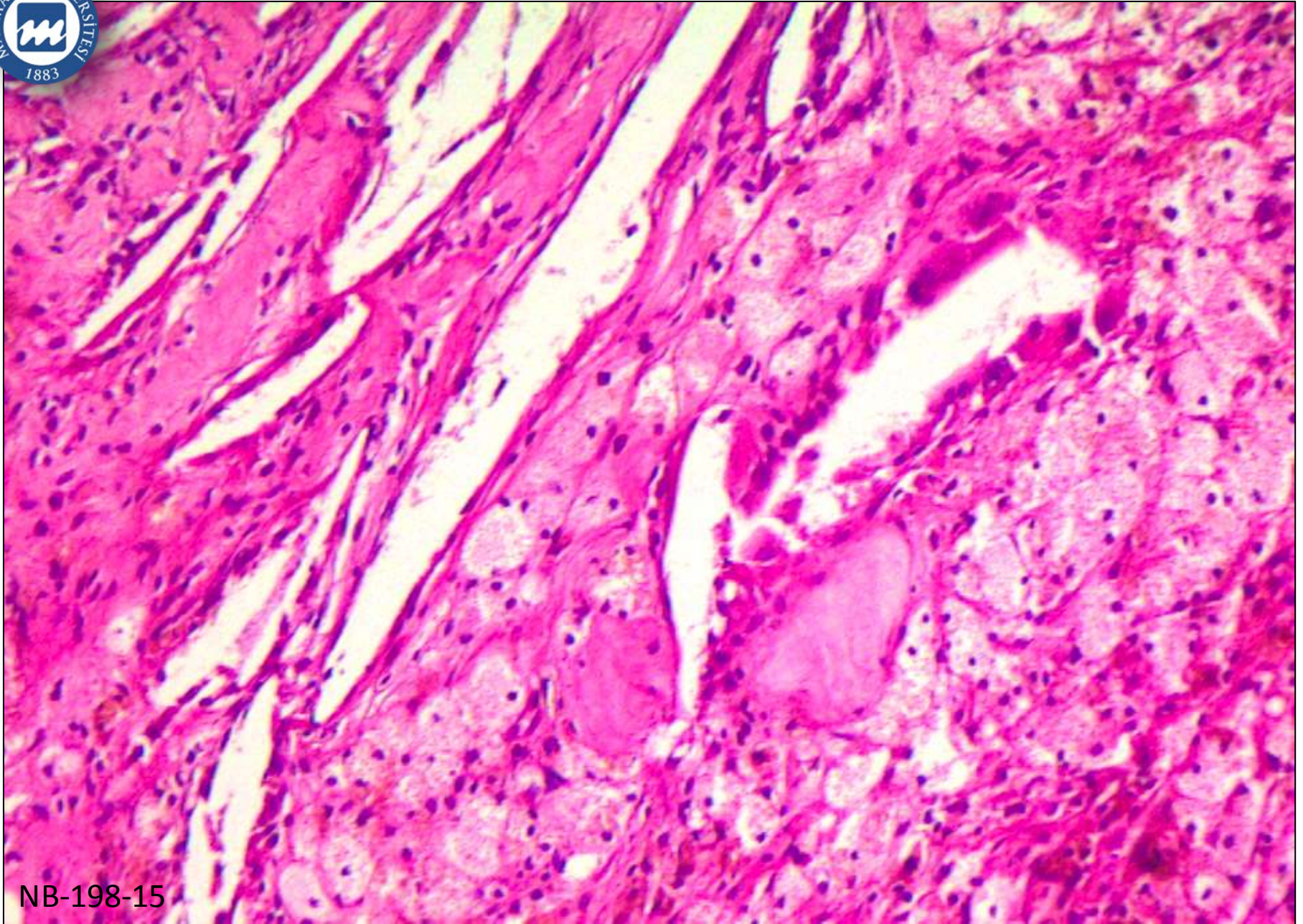
- Kolesterol kleftleri
- Hemosiderin birikimi
- Multinükleer dev hücre
- Makrofaj birikimi
- Fibrozis

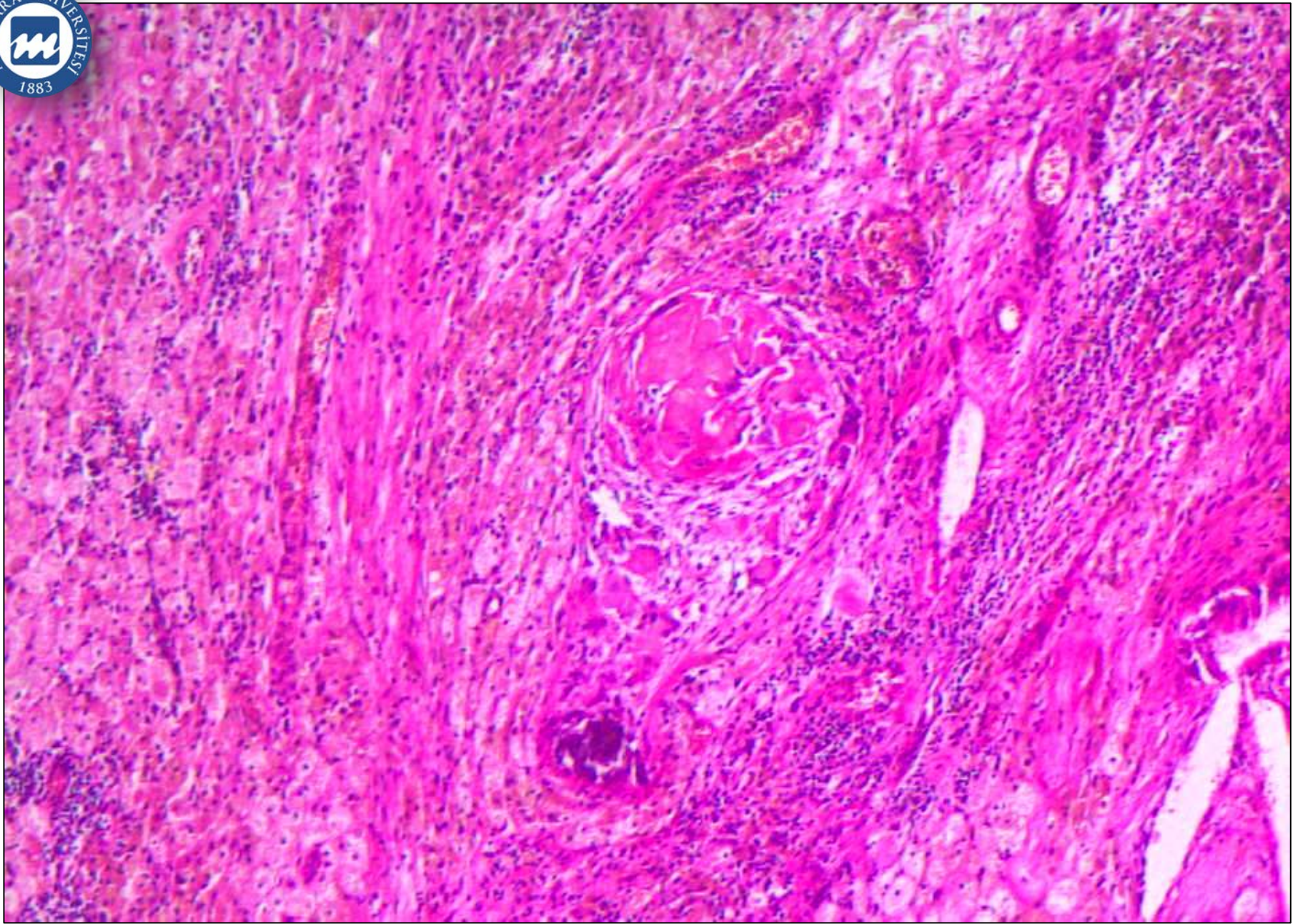
Ksantogranüloamatöz hipofizit

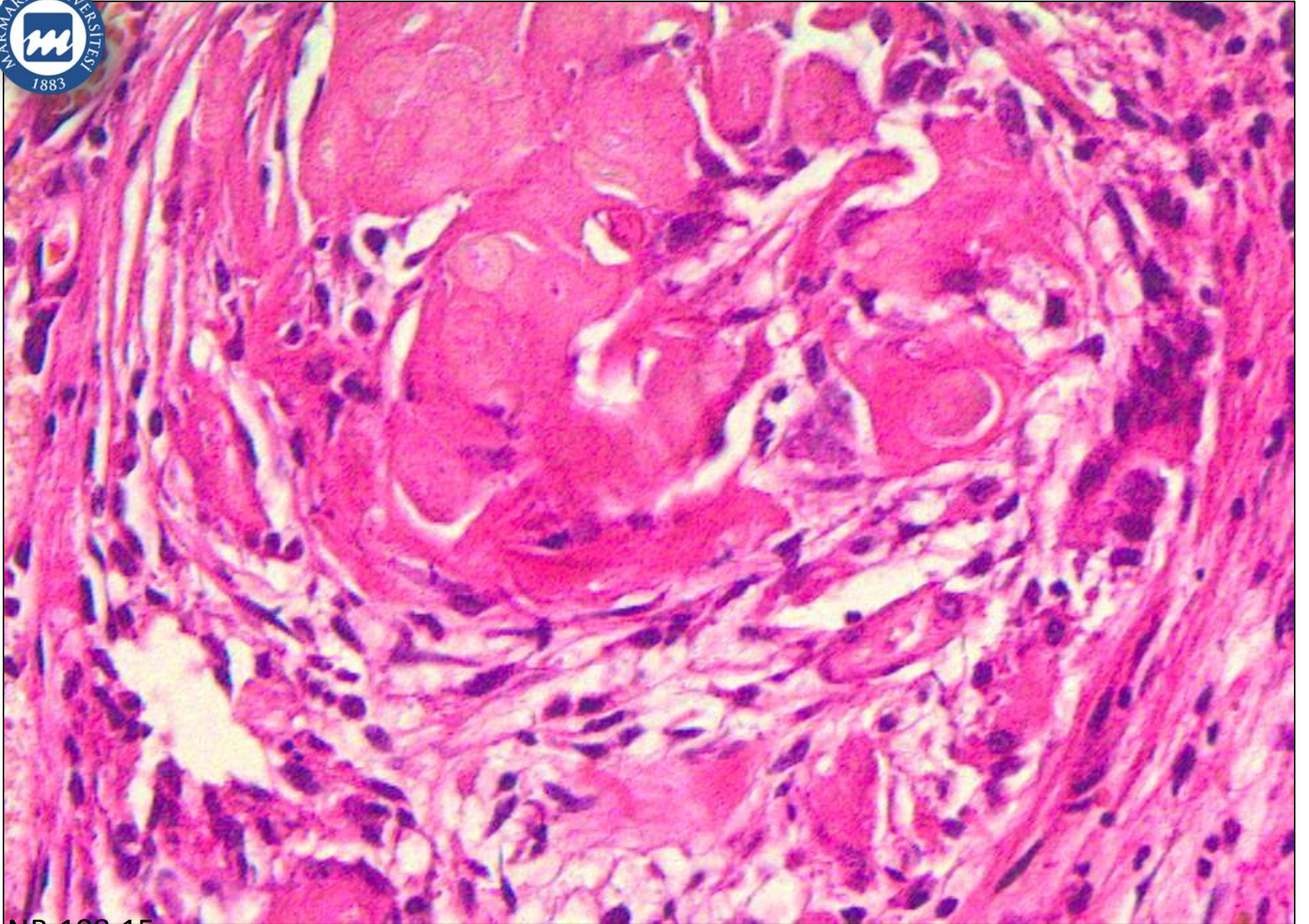
- Primer:
 - Otoimmün hastalık
 - İzole ya da sistemik hastalığın tutulumu
- Sekonder:
 - Lokalize inflamasyon
 - Kraniofarengioma/Rathke kisti

Kraniofarengioma çevresi



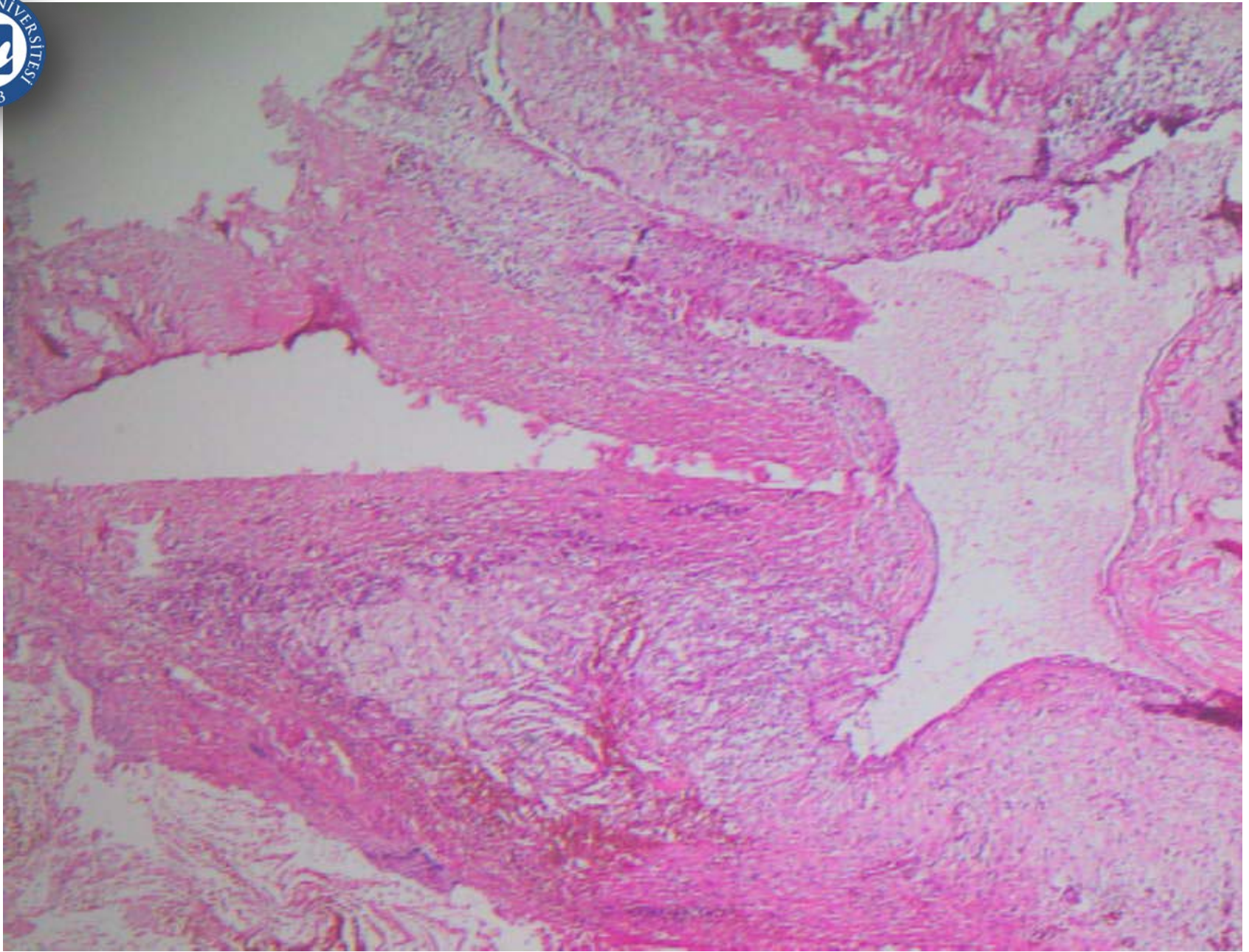


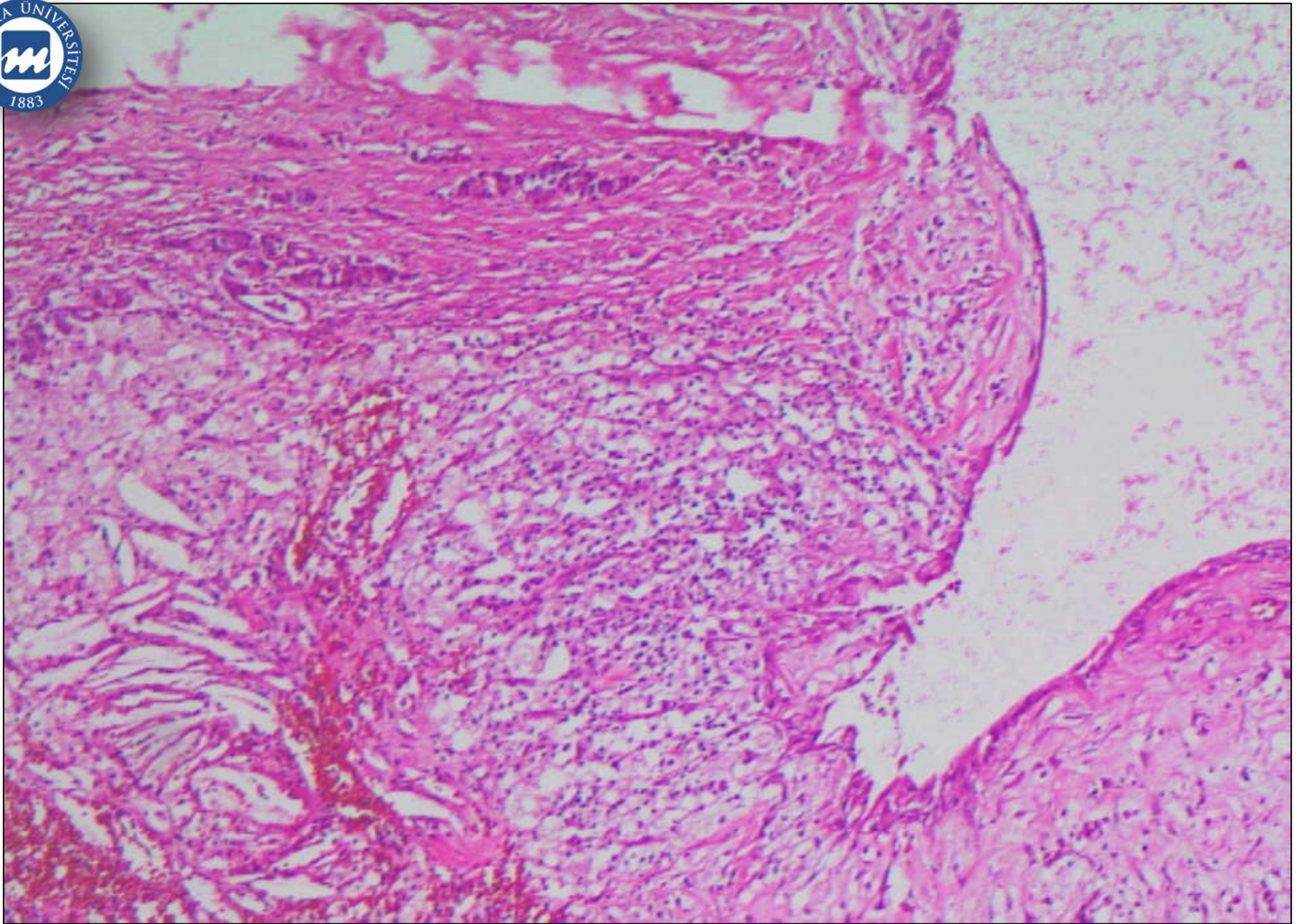


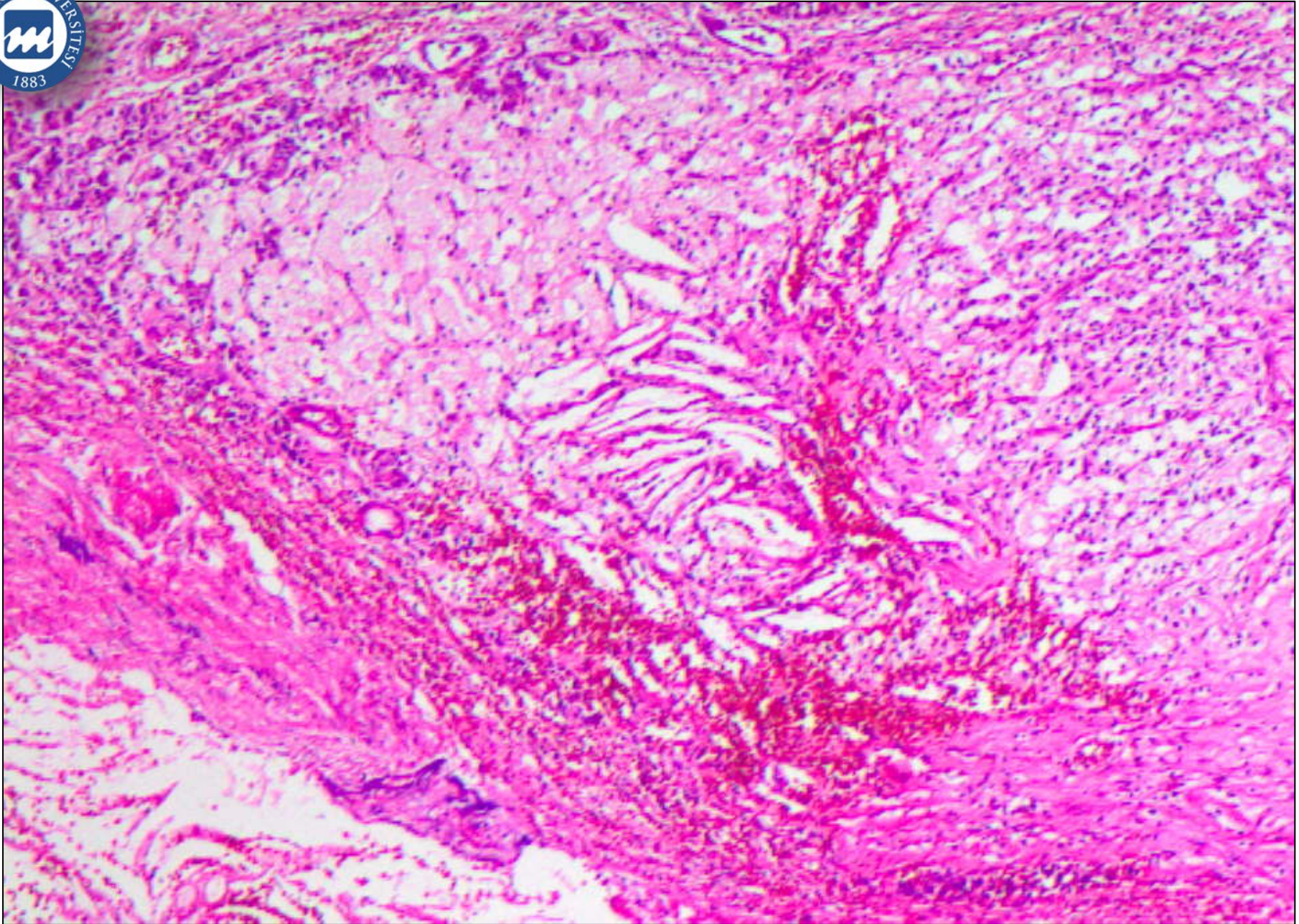


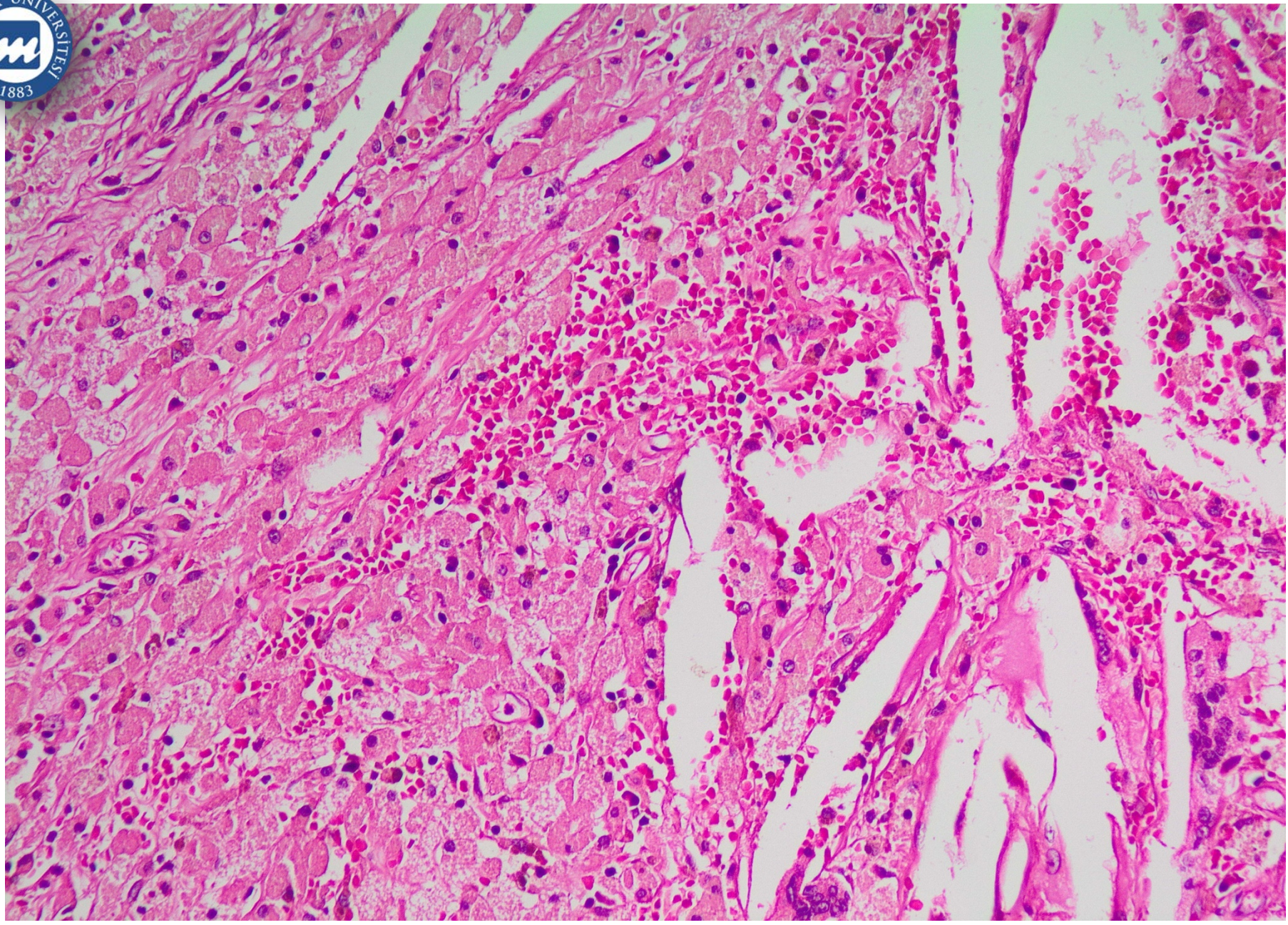


Rathke kleft kisti çevresi







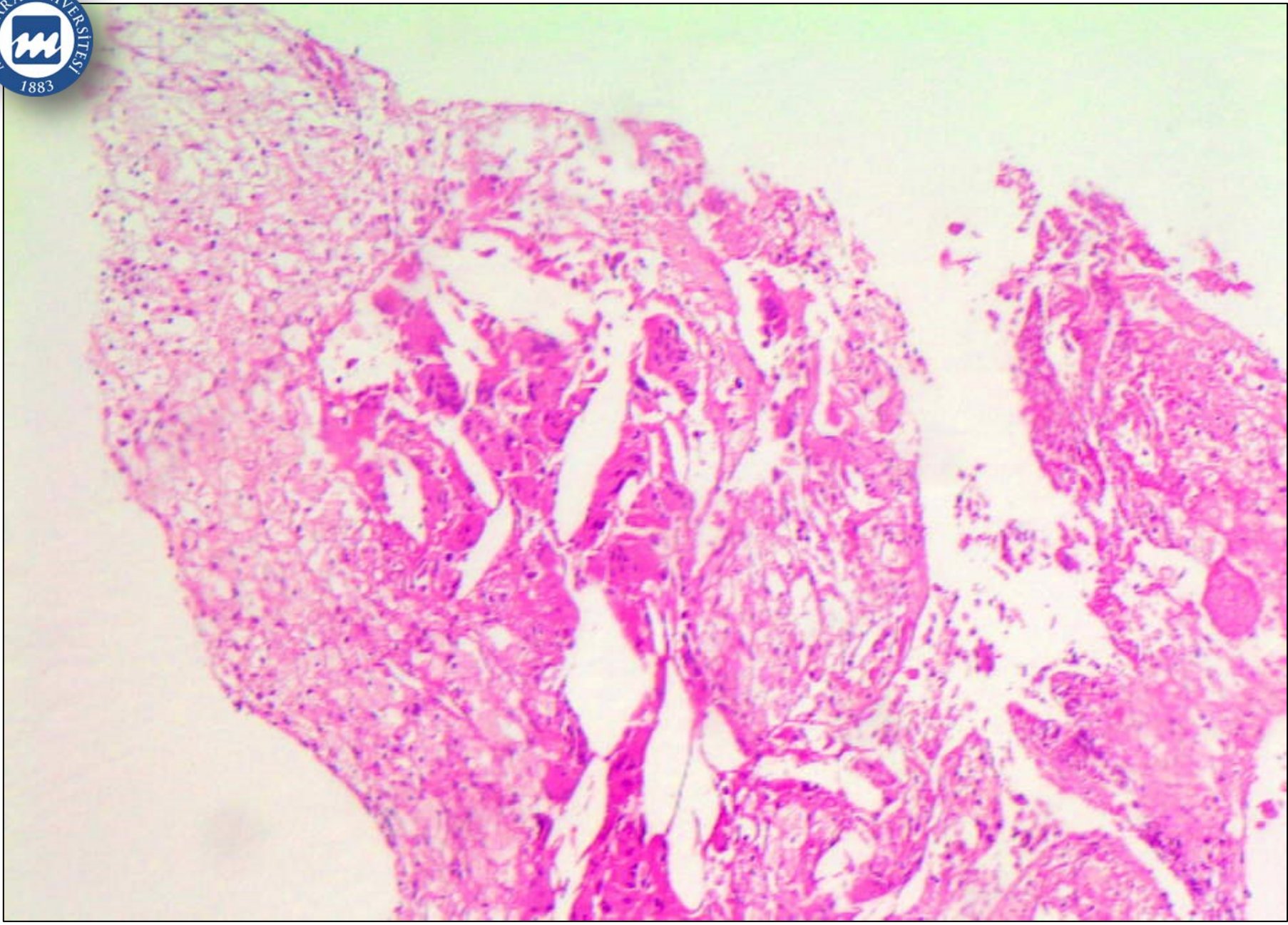


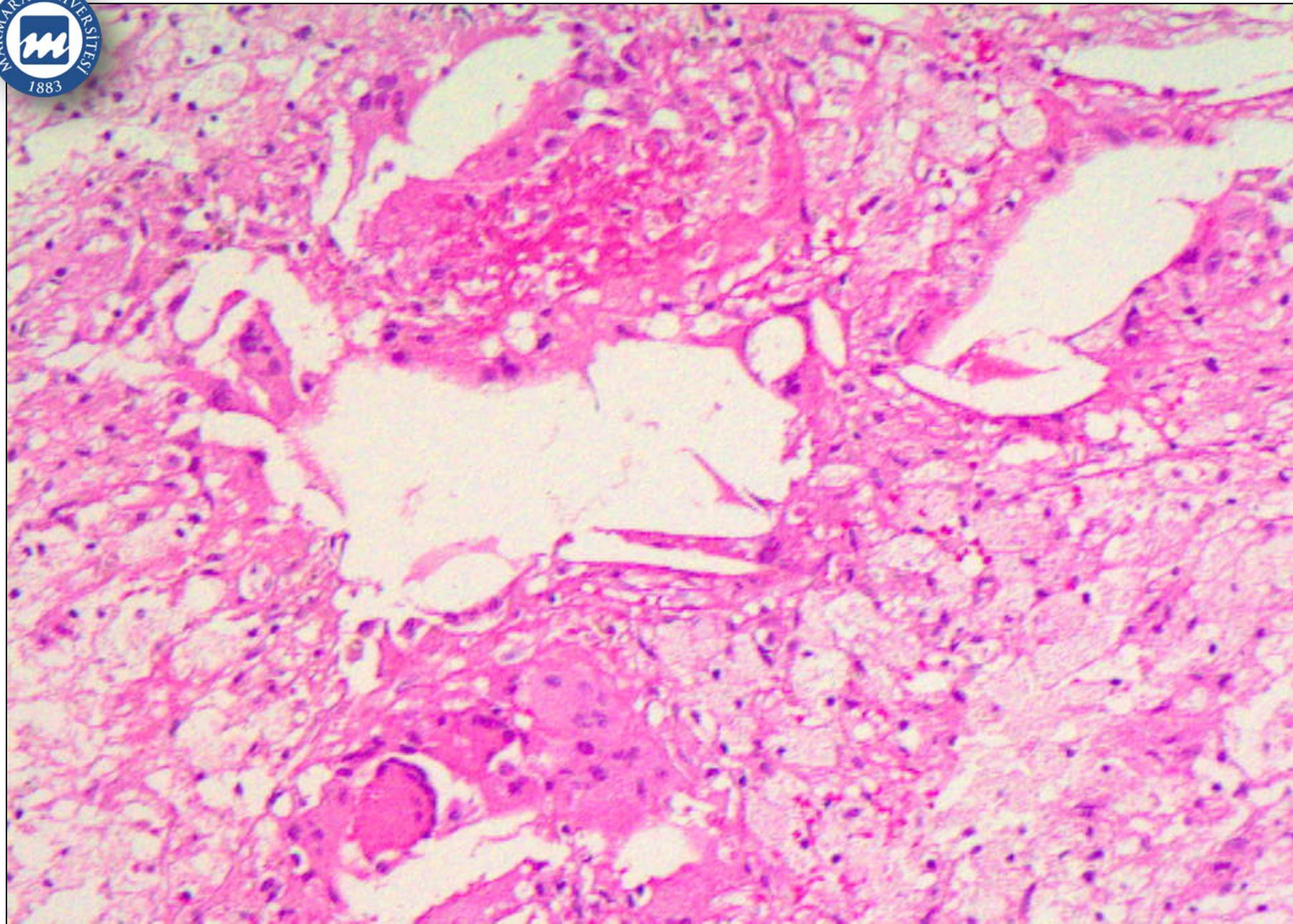


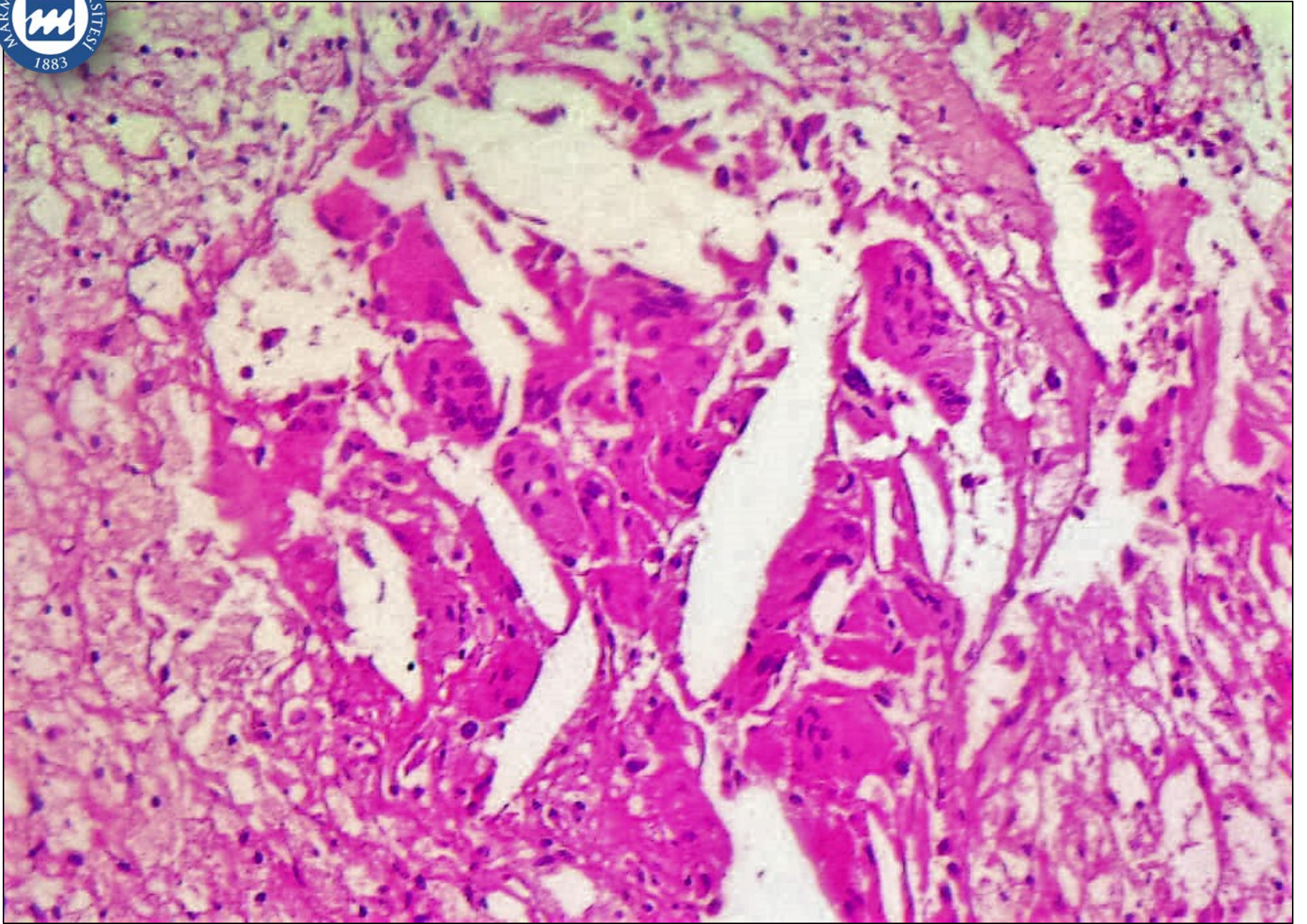
Primer ksantogranüloamatöz hipofizit

- Genç erişkin

Xanthogranulomatous hypophysitis: a rare and often mistaken pituitary lesion



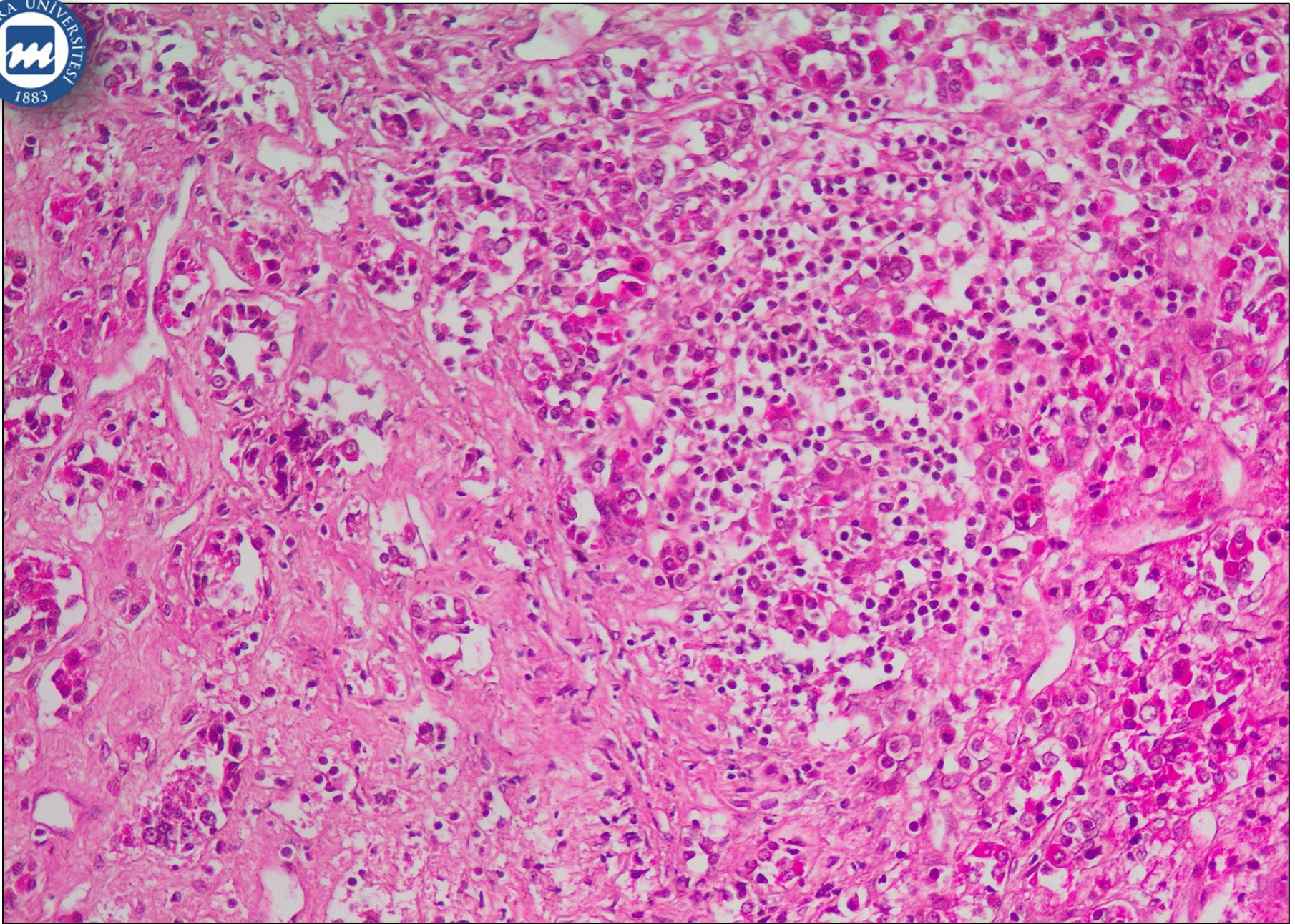


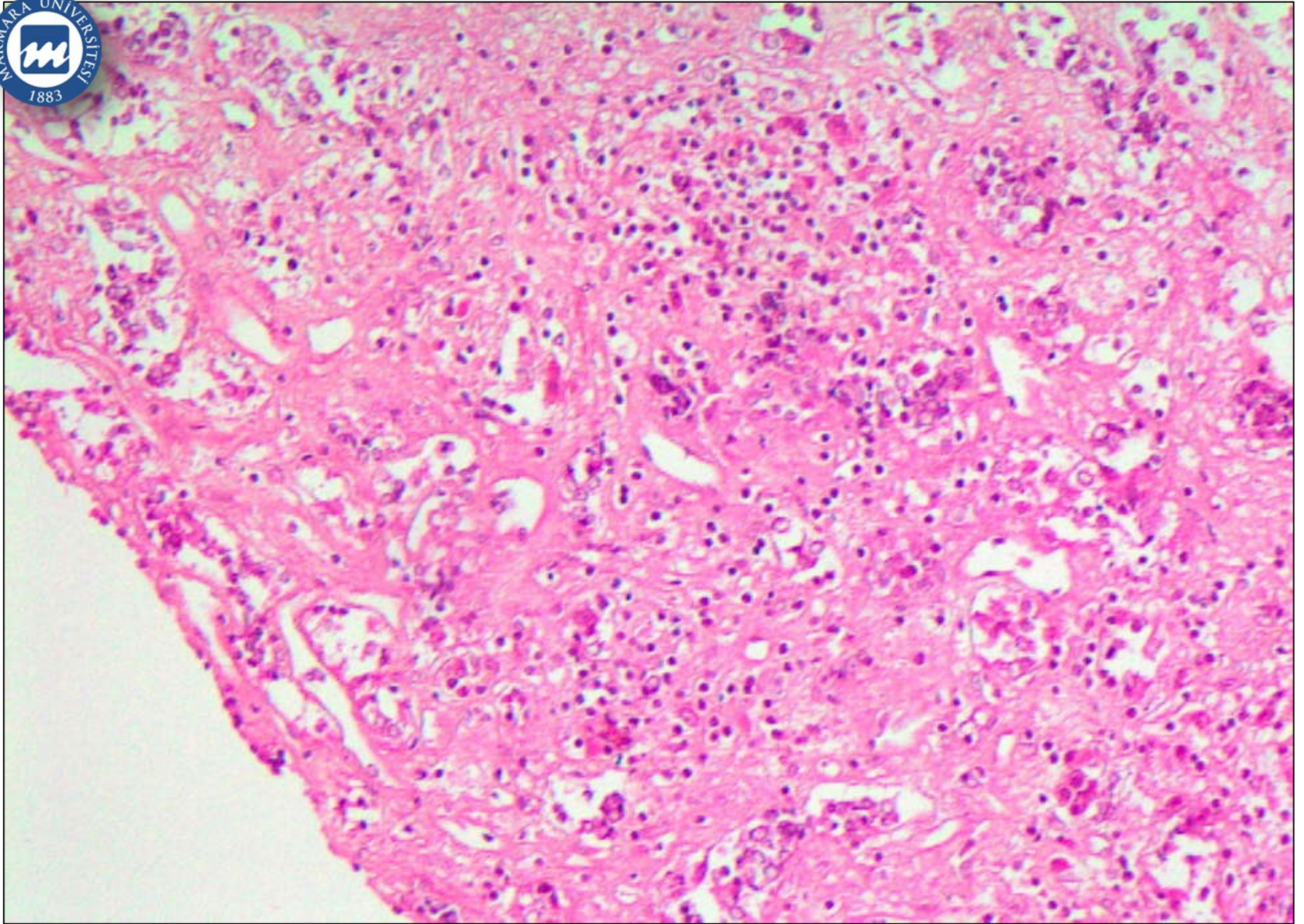


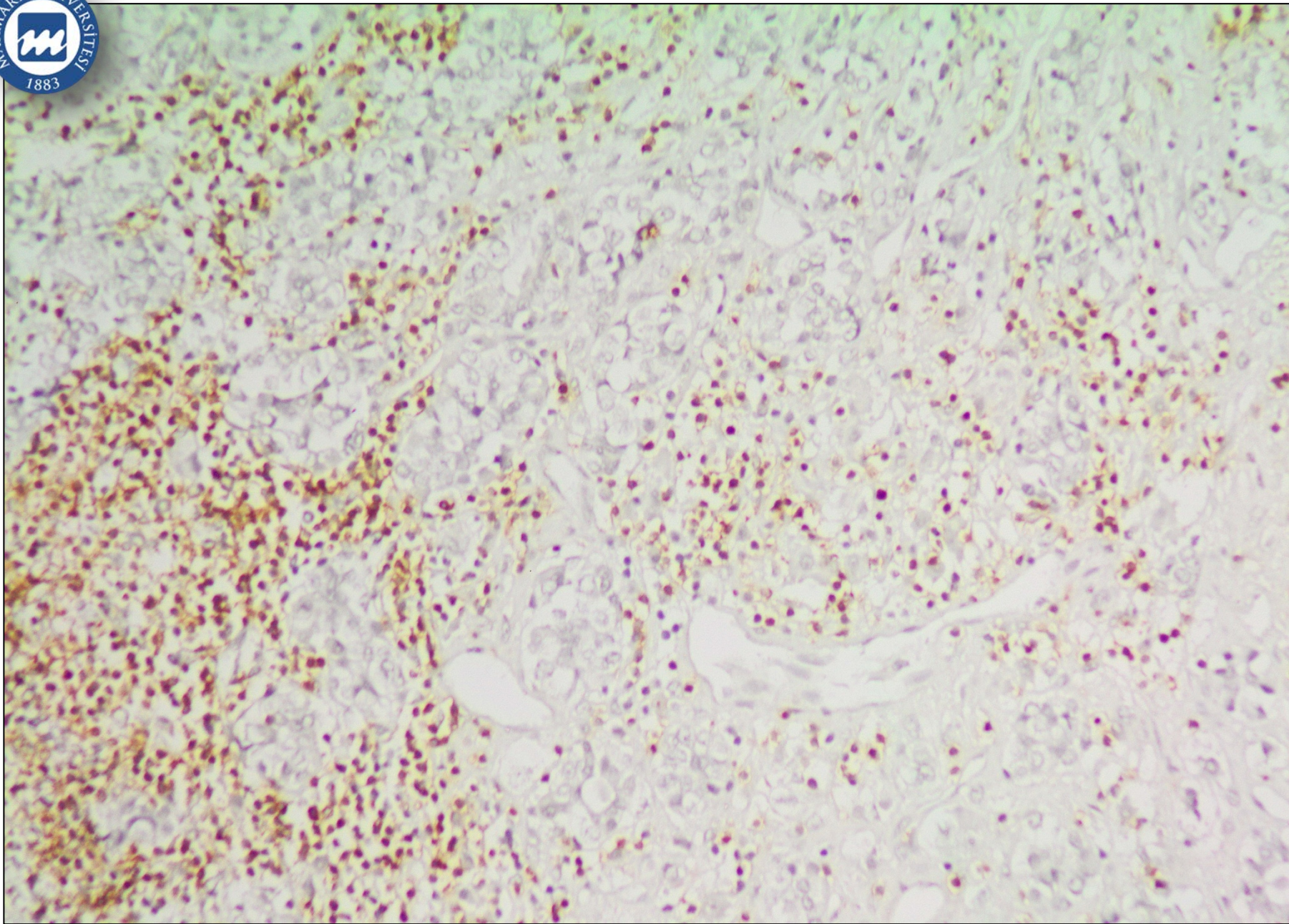


Lenfositik hipofizit

- Otoimmün lenfositik infiltrasyon
- K>E
- Gebelik/postpartum ilişkili
- Anterior, posterior ve infundibulum tutulumu







CD 3



IgG4 ilişkili hastalık

- Fibro-inflamatuvar
- Lenfoplasmasitik infiltrasyon
- IgG4(+) plasma hücreleri
- Storiform fibrozis
- Serum IgG4 düzeyinde artış



IgG4 ilişkili hipofizit

- Riedel tiroiditi
- Mikulicz hastalığı
- Retroperitoneal fibrozis
- Tubulointerstisyel nefrit
- 2004 ilk kez: IgG4 ilişki hipofizit

1 Leporati P, Landek-Salgado MA, Lupi I, Chiovato L & Caturegli P 2011 IgG4-related hypophysitis: a new addition to the hypophysitis spectrum. *Journal of Clinical Endocrinology and Metabolism* **96** 1971–1980. (doi:10.1210/jc.2010-2970)

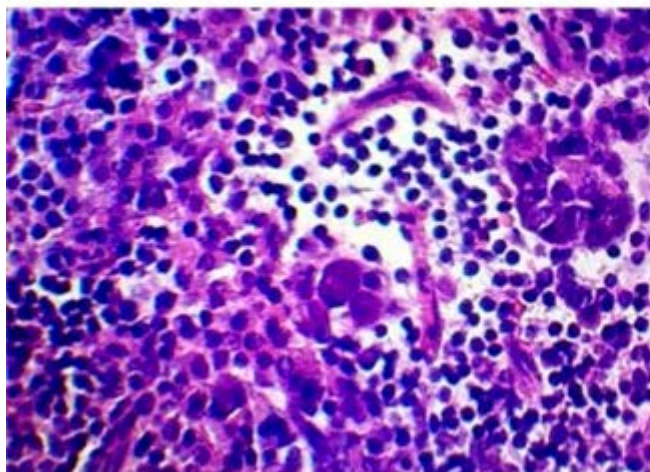


Histologically confirmed isolated IgG4-related hypophysitis: two case reports in young women

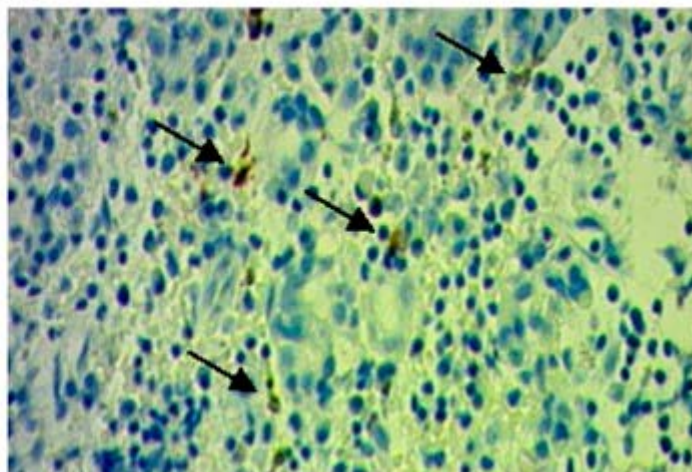
Gabriela Alejandra Sosa¹, Soledad Bell¹, Silvia Beatriz Christiansen², Marcelo Pietrani³, Mariela Glerean¹, Monica Loto¹, Soledad Lovazzano¹, Antonio Carrizo⁴, Pablo Ajler⁴ and Patricia Fainstein Day¹

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Email

A



B





Aklımızda kalsın....

- Sellar bölgede non-neoplastik inflamatuvar lezyonlar da kitle lezyonu olarak karşımıza çıkabilir...