*ejpmr, 2022, 9(2), 521-523*

**SJIF Impact Factor 6.222**

**EUROPEAN JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH**

www.ejpmr.com

Case Study

ISSN 2394-3211

EJPMR

# PLEOMORPHIC SARCOMA AXILLARY REGION: RARE SOFT TISSUE SARCOMA

**Dr. Rajesh Kumar, Dr. Medha Kaith, Dr. Sushma Makhaik and Dr. Rohit Bhoil**

Department of Radio-Diagnosis IGMC Shimla.

***Corresponding Author: Dr. Rajesh Kumar**
Department of Radio-Diagnosis IGMC Shimla.
**Email ID:**

**Article Received on 22/12/2021** **Article Revised on 12/01/2022** **Article Accepted on 01/02/2022**

## INTRODUCTION

Twenty percent of soft tissue sarcomas show no line of differentiation and are classified as undifferentiated sarcomas. These lesions are most often undifferentiated pleomorphic sarcoma (previously known as pleomorphic malignant fibrous histiocytoma).

Undifferentiated pleomorphic sarcoma usually occurs in older adults and may arise at any location in the body. Men account for two-thirds of cases. Clinical signs and symptoms of undifferentiated pleomorphic sarcoma are usually nonspecific. Fever, weight loss, and abdominal pain have been reported for those patients with intra-abdominal lesions. Undifferentiated pleomorphic sarcoma is the most common sarcoma to develop at sites of prior irradiation.

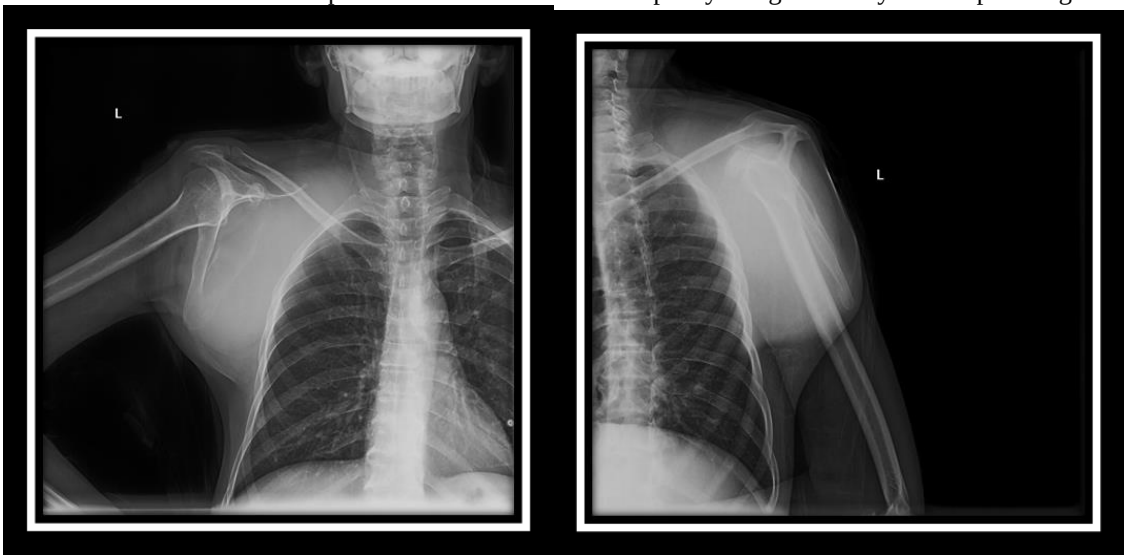
Here we describe a case of pleomorphic sarcoma in the axillary region.

## CASE REPORT

Case report of a 56 Y old male who presented with pain and swelling in the right axillary region for 2 months, no h/o fever, no h/o radiating pain, no h/o weight loss. Musculoskeletal examination revealed a large swelling in the right axillary region which was tender however strength and range of motion of right arm was normal. No redness/no discharge seen.

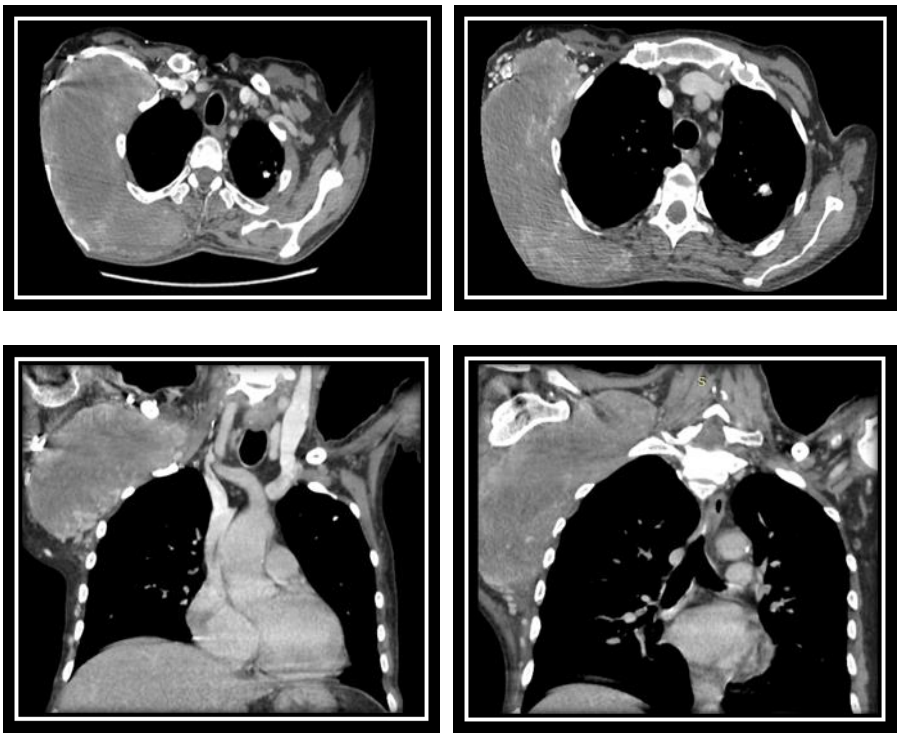
## IMAGING FINDINGS

X-RAY – AP and PA view – showed presence of well-defined radiopacity in right axillary and scapular region.

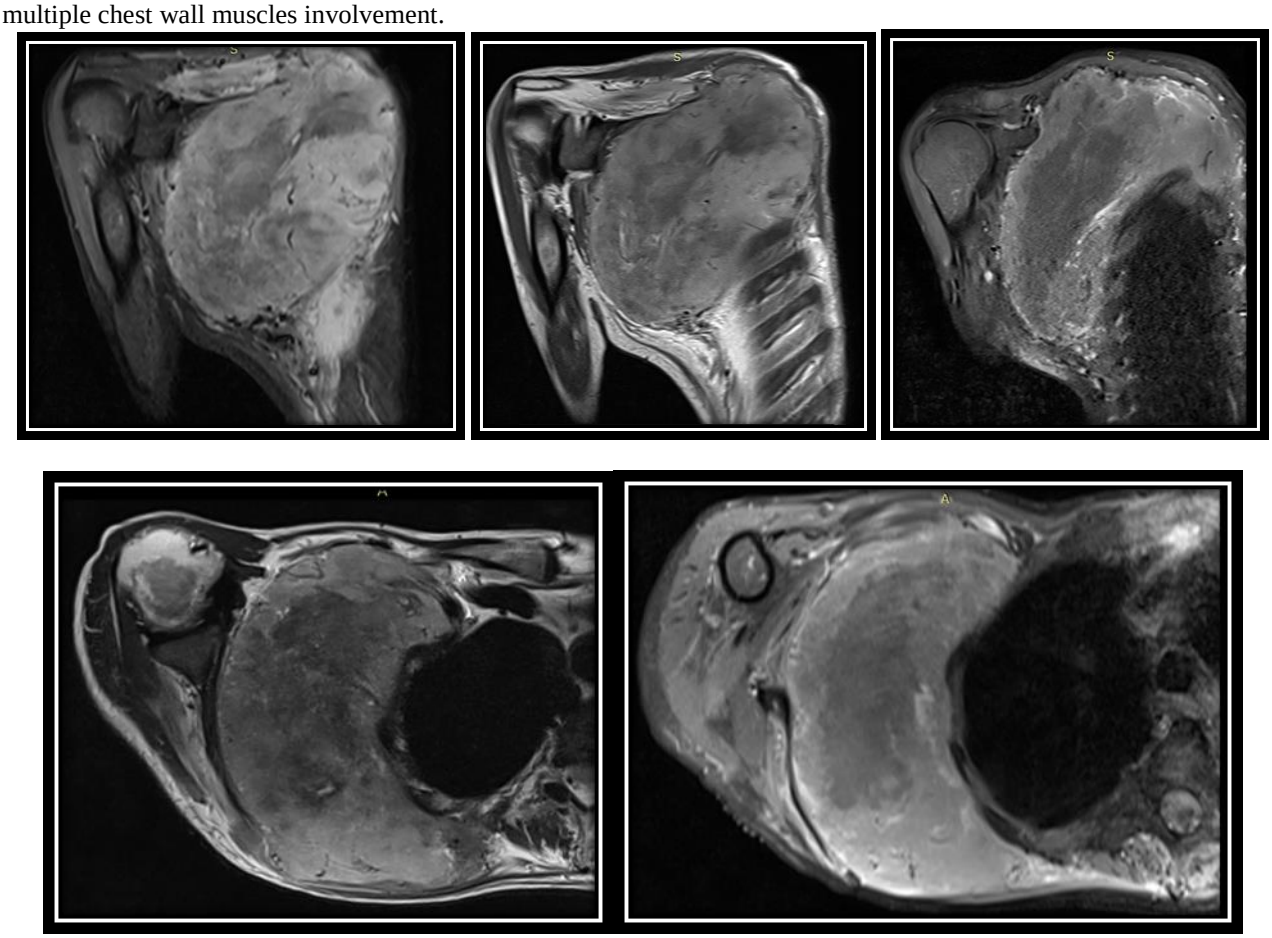


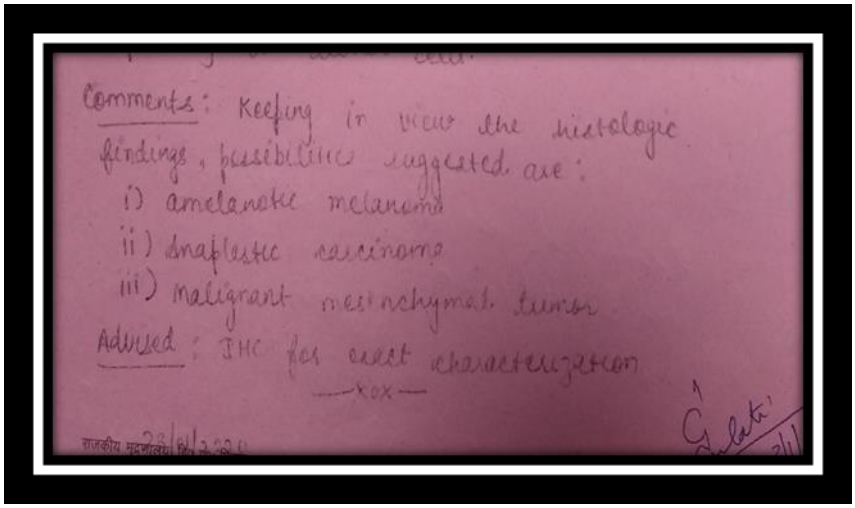
**CECT CHEST FINDINGS**

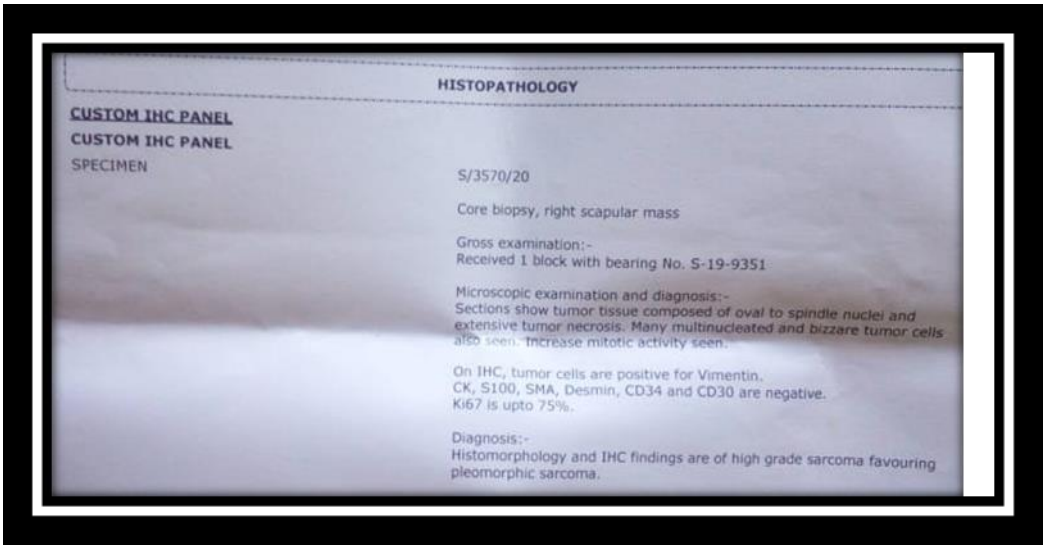
Heterogenously enhancing mass with central necrotic areas seen in the right axillary region involving multiple muscles in that region.



**MRI FINDINGS**- Heterogenously enhancing mass with central necrotic areas seen in right axillary region with multiple chest wall muscles involvement.






**Possibilities**

1. **Amelanotic melanoma**
2. **Anaplastic carcinoma**
3. **Malignant mesenchymal tumor**

Tumor cells positive for

- Vimentin
- CK
- S100
- DESMIN
- Ki67 upto 75%
- CD34 and CD 30 are negative

**Histomorphology and IHC finding are suggestive of high grade sarcoma favouring pleomorphic sarcoma**.

## DISCUSSION

- Undifferentiated pleomorphic sarcomas may arise at any soft-tissue site.
- On CT images, these lesions are well-circumscribed, multinodular, or infiltrating masses of soft-tissue attenuation. Undifferentiated pleomorphic sarcomas are often large at the time of diagnosis and invade adjacent anatomic structures.
- Centrally within the tumor, areas of low-attenuation necrosis, hemorrhage, or myxoid change can be seen on CT images. The tumor may appear cystic with a rim of peripheral enhancement when marked intralesional hemorrhage is present.
- After administration of intravenous contrast material, the enhancement pattern is variable, although regions of marked contrast enhancement and large intratumoral vessels may be seen.

## CONCLUSION

- Knowing the spectrum of common and uncommon soft-tissue sarcomas arising in the abdomen and pelvis and the abdominal wall is important to establish an accurate working differential diagnosis, to determine an early diagnosis.
- **Confident diagnosis of pleomorphic sarcoma is done from imaging, HPE and IHC together**.

## REFERENCES

1. *Angela D. Levy, MD Maria A. Manning, MD Markku M. Miettinen, MD* Soft-Tissue Sarcomas of the Abdomen and Pelvis: Radiologic- Pathologic Features, Part 2— Uncommon Sarcomas.