Actinomycosis of the gynaecological tract is well described in patients with intrauterine contraceptive devices. Pseudoactinomycotic radiate granules (PAMRAG) of the endometrium are also well recognised and should not be confused with organisms. This paper highlights the coexistence of both actinomycosis forming a central nidus (Gram, silver positive filamentous organisms) surrounded by PAMRAG with eosiophilic club-like structures (again not to confuse the latter with Splendore—Hoeppli phenomenon). This study also documents these combined lesions in the cervix and vulva. PAMRAG comprise calcium, lipid, glycoprotein, copper, phosphate and iron.

American Journal of Surgical Pathology
December 2009


TLE1 encodes a transcriptional co-repressor and, using a commercially available antibody, was found to be over-expressed in 100% (with diffuse nuclear staining) of synovial sarcomas (a positive predictive value of 92% and a negative predictive value of 100%).


The Merkel cell polyoma virus is now an established oncocenic virus associated with Merkel cell carcinoma (occurring in about 50–80% of cases). This study shows that the virus is absent in other neuroendocrine carcinomas by PCR, establishing diagnostic specificity for Merkel cell carcinoma in this context.


Fluorescence in situ hybridization for chromosome 6 and 11 aberrations distinguishes nevoid melanoma from mitotically active naevi.
fibrosis (1833) and related lung/pleural
disease (1886).

Archives of Pathology and
Laboratory Medicine
December 2009

Correspondence rarely features in these updates/snippets, but this letter/response to the editors addresses an often debated but poorly defined diagnosis of 'indefinite for dysplasia' in Barrett oesophagus and inflammatory bowel disease. These authors, contending that this is not an exact science, uses this diagnosis in three instances with a focus of columnar cell atypia: associated active inflammation, technical associated artefact, and deep crypt dysplasia with surface maturation.


Most laboratories in developed countries are now faced with MRI-guided core needle biopsies of the breast (resulting in considerable major workload implications). This study demonstrates (with a cohort of 439 patients) that only one level is needed to arrive at an accurate diagnosis. This was demonstrated in about 95% of patients, with the remainder adding more information but not altering the diagnosis or patient outcome.

Weinreb I, Cunningham KS, Perez-Ordonez B, et al. CD10 is expressed in most epithelioid hemangioendotheliomas: a potential diagnostic pitfall. *Arch Pathol Lab Med* 2009;133:1965–8. Another tumour that can be CD10 positive. Seven of nine primary epithelioid haemangioendotheliomas were positive.

Histopathology
December 2009

An excellent review of the bone marrow trephine biopsy that covers all practical, technical (including molecular techniques like immunohistochemistry, in situ hybridisation and PCR) aspects and, importantly, incorporates aspirate, peripheral blood and imaging results.


A long-noted diagnostic pitfall that many experienced surgical pathologists have encountered is the presence of intravascular lymphocytosis in acute appendicitis. This paper highlights this potential mimic of chronic lymphocytic leukaemia and attributes this phenomenon to surgical manipulation and the innate immunity of the patient.

Diagnostic Histopathology
December 2009
This issue contains a mini-symposium on the pathology of the uterus and fallopian tube. There are good reviews on current concepts in tubal neoplastic pathology, the molecular genetics of endometrial carcinoma, and very practical piece on problematical areas in the reporting of endometrial carcinomas in hysterectomy specimens. Well worth reading.

Human Pathology
December 2009

Myoepithelial tumours of the salivary gland, breast, skin and soft tissue are well described. This review of four cases covers the authors’ experience in the vulva. As with all unusual tumours in unusual sites, awareness of morphology is critical to accurate diagnosis. Two tumours were composed entirely of ovoid or spindle-shaped cells, one was composed entirely of epithelioid cells, and in the other tumour there was a mixture of spindled and epithelioid cells. Small foci of ductal differentiation with squamous metaplasia were present in one case, and a minor stromal component, which varied from myxoid to hyalinised, was present in all cases. In all cases, the tumour cells were positive for epithelial markers (cytokeratins and/or epithelial membrane antigen) and the myoid markers, α smooth muscle actin and calponin. Desmin was positive in three cases. S100 and p63 were positive in one of the four neoplasms.

Competing interests None.
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