histopathologic diagnosis. A diagnosis of mucoepidermoid carcinoma, pigmented, low-grade (AFIP Grading Scheme) was rendered. Subsequent CT and PET imaging revealed no evidence of metastasis, and the tumor was fully resected with negative margins under general anesthesia. Immunohistochemical profile demonstrated positive staining for CK5/6 and p63 with focal S100 and mammaglobin positivity.

Conclusion: Mucoepidermoid carcinoma is a common salivary gland malignancy, but the uncommon pigmented variant of MEC can pose confusion for the surgical pathologist.

EVALUATING UTILITY OF PROTEIN S100A7 IN PREDICTING PROGRESSION OF ORAL EPITHELIAL DYSPLASIA.

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Objectives: Protein biomarker, S100A7, in oral dysplasia and squamous cell carcinoma has shown some predictive value for the transformation of dysplasia to cancer. The objectives of this study are: (1) to determine a correlation between the expression of S100A7 and histologic grade of oral dysplastic lesions using immunohistochemistry and an algorithm based on image analysis; and (2) to evaluate whether S100A7 can be utilized as a reliable predictor for progression of low grade oral dysplastic lesions or transformation to carcinoma.

Findings: 8 low grade lesions evolved into high grade lesions, and 7 high grade lesions evolved into higher grade lesions, over time. For the low grade lesions, the average S100A7 immunostaining score was 5.6; three were graded low risk and 5 were graded medium risk by algorithm. One low grade and 3 high grade lesions did not progress and remained stable. For these, the average S100A7 immunostaining score was 5.8; one was graded low risk and 3 were graded medium risk by algorithm. Preliminary analysis suggests S100A7 has increased expression in higher risk lesions.

Conclusion: The identification of a reliable, quantitative measure in the diagnosis of dysplasia and the ability to predict the likelihood of transformation to malignancy will potentially lead to more individualized treatment and better patient outcomes.

LOW-GRADE MUCINOUS SINONASAL ADENOCARCINOMA NON-INTESTINAL TYPE: A CASE REPORT.

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Objetive: Present a case of low-grade mucinous sinonasal adenocarcinoma, non-intestinal type in maxillary sinus. The intestinal type sinonasal adenocarcinomas (I-TSAC) are a very rare neoplasm with similar architectural and cytological features to a G.I. metastatic carcinomas; the non-intestinal type cacinomas are less frequent that I-TSAC.

Case: 70-year-old male with a painless swelling on the zygomatic area, epistaxis and nasal obstruction symptoms with six months of evolution. X-ray examination revealed solid mass occupying the left maxillary antrum, infiltrating the zygomatic arch and the eye orbital floor. The microscopic findings consist in solid-mucionous neoplasm of pleomorphic low columnar cells, the cellular proliferation was arranged in nest with back to back architectural growth pattern, and focal bone invasion, A very loose eosinophilic stroma with mucinous aspect surround the neoplastic nests. Immunohistochemical reactions was positive for CK7, and pS100, being negative for CK20, and MUC-2. PET-scan revealed no systemic disease and confirming no metastatic origin.

Conclusions: The SN-ITACs are a very uncommon neoplasm, localized mainly in the ethmoidal sinus, nasal cavity and maxillary sinus. The SN-ITACs are very likely to the intestinal adenomas and adenocarcinomas, these tumors could be positive to CK20, MUC-2, and CDX-2. The differential diagnosis is the pleomorphic adenoma and its malignant counterpart (Carcinoma ex-pleomorphic adenoma), metastatic adenocarcinomas must be included in the differential diagnosis especially those with gastro-intestinal origin. Renal, breast and prostate carcinomas has been reported with sinonasal metastasis.

SALIVARY GLAND EPITHELIAL NEOPLASMS IN PEDIATRIC POPULATION: A SINGLE-INSTITUTE EXPERIENCE.

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Objectives: Salivary gland epithelial neoplasms are very rare in children and adolescents. The aim of the present study was to determine the clinicopathologic characteristics of salivary gland neoplasms in patients younger than 19 years from January 2005 to December 2017 at our institution according to the 2017 World Health Organization classification of salivary gland tumors.

Findings: During the 13-year period, a total of 77 patients were analyzed. The tumors were located in the parotid (n= 37), submandibular gland (n = 15), and minor salivary glands (n = 25). The mean age was 14.5 years old (ranging from 6 to 18 years). Seventy-two (93.5%) of 77 tumors occurred in the 10−18 year age group, and only 5 in patients aged less than 10 years. The male-to-female ratio was 1:1.08. Fifty tumors (64.9%) were benign and 27 (35.1%) were malignant. The histologic types of adenomas were pleomorphic adenoma (n = 45, 58.4%), myoepithelioma (n = 4, 5.2%), and sebaceous adenoma (n = 1, 1.3%). The histologic types of carcinomas were mucoepidermoid carcinoma (n = 18, 23.4%), secretory carcinoma (n = 4, 5.2%), acinic cell carcinoma (n = 3, 3.9%), adenoid cystic carcinoma (n = 1, 1.3%), and myoepithelial carcinoma (n = 1, 1.3%). Three of the 4 cases of secretory carcinoma were initially diagnosed as cystadenocarcinoma.

Conclusions: Salivary gland epithelial neoplasms in Chinese pediatric patients are rare. There was a roughly equal sex distribution. The vast majority of patients were diagnosed in the 10−18 year age group. Parotid gland was most common involved site, and pleomorphic adenoma was the most common