

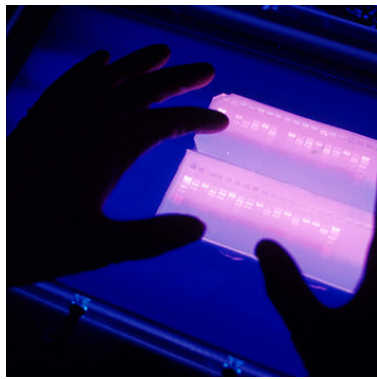
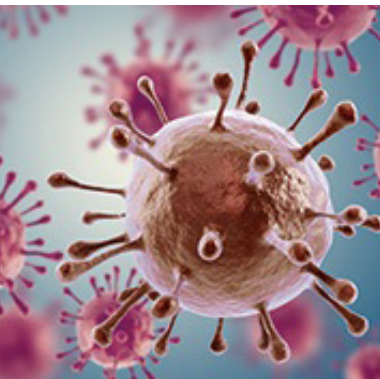
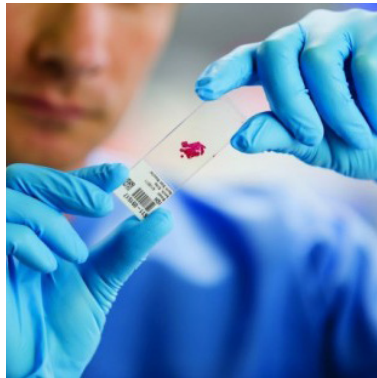
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# Scientific Tracks & Sessions

## September 06, 2018

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### *Pathology & Surgical Pathology 2018*



International Conference on  
**Pathology and Surgical Pathology**  
September 06-07, 2018 | Edinburgh, Scotland

## Anti-Cancer drug NSC-631570 (Ukrain): Induction of the apoptosis in cancer cells

**Wassil Nowicky**

Ukrainian Anti-Cancer Institute, Austria

In the study on the erythroleucemia cells K-562, it was revealed NSC-631570 to bring about the bimodal death of cancer cells. At lower concentrations of NSC-631570, cancer cells die in as a consequence of apoptosis. At higher concentrations, the formation of microtubules is inhibited and polyploidy occurs.

In the tests on human cervix carcinoma cells HeLa, squamous carcinoma cells WHCO5, normal kidney cell line Graham 293, and transformed kidney cell line Vero from African green monkey the researchers of the University of Pretoria, South Africa revealed NSC-631570 'is selectively toxic to malignant cells by causing a metaphase block which is characterised by abnormal chromosomal distribution, and results in the formation of micronuclei and in apoptosis.

The scientists of the Eberhard Karl University (Tübingen, Germany) investigated the effect of NSC-631570 on the cell survival, the cell cycle modification and the apoptosis induction alone and combined with radiation (IR). They discovered NSC-631570 combined with IR increased the toxicity against the cell lines CCL-221 and U-138MG. The normal human skin and lung fibroblasts were protected from the damaging effects of IR.

Estimating the cell proliferation according to the BrdU uptake in the cell lines AsPC1, BxPC3, MiaPaCa2, Jurkat, and THP-1 and the cell cycle phases by means of Giemsa staining, the authors established NSC-631570 at a dose of 10 µg/ml brought about a considerable accumulation of cancer cells in the G2/M phase after 24 h incubation. The apoptosis rate in the peripheral mononuclears was similar at the same incubation conditions. Moreover, the mitogene stimulated lymphocytes showed increased blastogen reaction.

Effect of NSC-631570 on cell survival and apoptosis in the androgen-independent prostate cancer cell line PC-3 was studied. Cell viability was assessed using the dimethyl thiazolyl tetrazolium bromide (MTT) method in PC-3 cells after treatment with Ukrain. The IC50 value was observed in 10 µg concentration of Ukrain. Bax, Bad, and FasL mRNA expression was analyzed by reverse transcriptase-polymerase chain reaction, and protein expressions of p-Akt, Bcl-2, and caspase 10 were determined by western-blot analysis. Nuclei were stained with 4',6-diamidino-2- phenylindole, dihydrochloride (DAPI). NSC-631570 significantly increased the pro-apoptotic mRNA expression of Bad, Bax, and FasL; decreased the cell survival protein p-Akt and the anti-apoptotic protein Bcl-2; and increased the protein levels of cleaved poly(ADP)-ribose polymerase (PARP) and caspase-10. The results of this study suggest that NSC-631570 decreases the cell survival of androgen-independent prostate cancer cells.

### Speaker Biography

Wassil Nowicky, Director of "Nowicky Pharma" and President of the Ukrainian Anti-Cancer Institute (Vienna, Austria). Has finished his study at the Radiotechnical faculty of the technical University of Lviv (Ukraine) with the end of 1955 with graduation to "Diplomingenieur" in 1960 which title was nostrificated in Austria in 1975. Inventor of the anticancer preparation on basis of celandine alkaloids "NSC-631570". Author of over 300 scientific articles dedicated to cancer research. Dr. Wassil Nowicky is a real member of the New York Academy of Sciences, member of the European Union for Applied Immunology and of the American Association for scientific progress, honorary doctor of the Janka Kupala University in Hrodno, doctor "honoris causa" of the Open international university on complex medicine in Colombo, honorary member of the Austrian Society of a name od Albert Schweizer. He has received the award for merits of National guild of pharmacists of America. the award of Austrian Society of sanitary, hygiene and public health services and others.

e: dr.nowicky@yahoo.de



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## Dural Lymphoma

**Muhammad Zulfiqar**

Baptist MD Anderson Cancer Center, USA

**D**ural lymphoma is a rare form of CNS lymphoma. Radiological differential diagnosis includes inflammatory pseudotumor, meningioma, tuberculosis and sarcoidosis. Morphologically, it is usually a low-grade lymphoma, composed of a vaguely nodular proliferation of small mature lymphocytes. There is no consensus on optimal treatment. Therapeutic options include surgical resection, focal radiotherapy or whole brain radiotherapy alone or combined with chemotherapy. This lymphoma has a good prognosis. Clinical,

histological, genetic and prognostic features will be discussed.

### Speaker Biography

Muhammad Zulfiqar is working as a pathologist at Baptist health, USA. He has completed his fellowship in hematopathology from Indiana University Health, USA and a fellowship in Cytopathology from Wayne State University. He has done his four years of residency in Anatomical and Clinical Pathology at St John Hospital and Medical Center, USA. He is board certified in Anatomical and Clinical Pathology from American Board of Pathology and board certified in Hematopathology.

e: mizulfiqar@gmail.com



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## Extranodal NK/T-cell lymphoma, nasal type (angiocentric T-cell lymphoma) not associated with EBV infection: A case report

Cocco P, Boschetto R, Gasparin P P, Farruggio A and Ferri E  
Aulss 6 Veneto Region, Italy

Extranodal NK/T-cell lymphoma, nasal type (ENKL) is a rare lymphoid neoplasm, which in the past has been grouped with a variety of granulomatous diseases. It is characterized clinically by aggressive, unrelenting destruction of the midline structures of the palate and nasal fossa and has an ominous prognosis. Histological diagnosis can be difficult because of extensive tissue necrosis and multiple biopsies are often required.


This is the case report of a 76-year-old male patient who presented with nasal obstruction and foul smelling, ulcerative lesion over the palate of 3 months duration, which had been treated with antibiotics and anti-inflammatories without success. Histopathological examination of the lesion was done and showed a cellular picture, which was pleomorphic with many large or immunoblast-like cells and relatively few small lymphocytes. A striking feature was the angiocentric

distribution of the tumor cells and angiodestruction, which mimed vasculitis. It was confirmed by immunohistochemical analysis that the patient had an ENKL, nasal type. an aggressive, locally destructive, midfacial, necrotizing lesions. with death occurring due to relapse or systemic spread in 50% of the cases. The nonspecific clinical symptoms constitute a major stumbling block in the early diagnosis and management of these lymphomas.

### Speaker Biography

Cocco P graduated in Medicine and Surgery in 1987, specialized in Anatomical Pathology in 1992 and in Hygiene and Preventive Medicine in 2018 at the University of Padua (Italy). She completed a PHD in Risk Management In Health in 2018 at the LUISS (Rome). Since 19 April 1993 he has been working at the Pathological Anatomy and Citodiagnosics Unit of the AULSS 6 Padua (Veneto Region): as Medical Director permanent employment relationship. She has over 30 publications that have been cited over 352 times, and her publication H-index is 10

e: patriziacocco105@msn.com

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## Intracranial falcine chondroma: A case report and review of literature

Ahmed A S Elhakeem and Abd Elhakeem Essa  
Al-Azhar University, Egypt

Chondroma is a benign cartilaginous tumor that usually occurs in extremities but occasionally occurs in brain. Usually intracranial chondromas originated from base of skull, but chondroma of falx is a rare circumstance. Indeed, the intracranial chondromas of the falx is mostly associated with syndromic disorders such as Maffucci's syndrome or Ollier's syndrome. Here, we reported a rare case of falcine chondroma in a 19 years old man who has normal physical examination and no signs of any syndromic disorder. The imaging findings are non-specific, and the diagnosis was made on histopathological

examination. The aim of this paper was to raise attention about chondromas and suggest that chondroma must be ruled out in any patient complain of masses arising from falx.

### Speaker Biography

Ahmed A S Elhakeem is working as a lecturer at the Department of Pathology of Assiut University in Egypt. His professional affiliation entails being a member of International society of Neuropathology, Egyptian society of Pathology and Egyptian society of progenitor cell research. He excels in the subspecialty of Neuropathology with over 10 years of experience in diagnosis of brain and spinal lesions. His research interest also covers cancer stem cells.

e: ahmad.elhakeem2011@yahoo.com



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## The natural death in detention: A case series and review of the literature

**Shirley Jena Stuart**

University of Witwatersrand, South Africa

**Introduction:** Death in detention has been reported to have increased significantly in South Africa in recent years and remains a contentious issue, attracting attention from media and human rights organisations alike. Various contributory factors and pertinent issues have been reported, including overcrowding, suboptimal access of inmates to healthcare, decreased releases on parole for health-related issues, and an increase in the rate of HIV infection amongst inmates.

**Methods:** This is a retrospective review spanning a period of less than twelve months, from October 2015 to September 2016, during which three deaths in detention were seen at Roodepoort Forensic Pathology Services Mortuary. The scene of death was attended to by the pathologist in only two out of the three cases. Blood samples for alcohol concentration analysis, tissue samples for histology and body fluid samples for toxicology were taken at autopsy in all the cases.

**Results:** Each of the three cases have been assessed as being due to natural causes, ranging from meningoencephalitis

to ischaemic heart disease to pneumonia, respectively. Although blood alcohol concentration and toxicology results are forthcoming, the macroscopic and histological findings are of prior significance.

**Conclusion:** A range of issues have surfaced from the analysis of each of the three cases, including lack of communication regarding protocols for scene investigation, delayed access to medical records of the deceased, allegations of negligence against correctional services staff, and overcrowding. Further investigation and ongoing studies in this regard are warranted.

### Speaker Biography

Shirley Jena Stuart is currently working as a specialist in department of Forensic Pathology and Medicine at Witwatersrand Medical School and a specialist Forensic Pathologist at Gauteng Health Department. She also served as a medical officer in Anatomical Pathology at Lancet Laboratories. Also she worked as a Doctor, Community Service Medical Officer at Zithulele Hospital and Mthatha General Hospital.

e: shirley@istari.co.za



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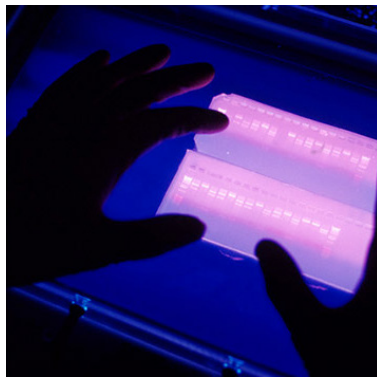
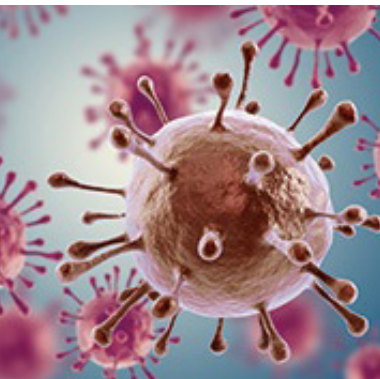
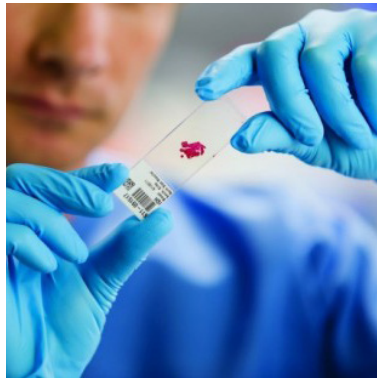
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# Scientific Tracks & Sessions

## September 07, 2018

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### *Pathology & Surgical Pathology 2018*



International Conference on  
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September 06-07, 2018 | Edinburgh, Scotland

# Pathology and Surgical Pathology

September 06-07, 2018 | Edinburgh, Scotland

**Pathology - unsplashed in a world of rapidly growing field the complete product experience with intent of experience of joy and lovability of what one does as a pathologist**

**Sujatha Siddappa**

Institute of Nephro-Urology, India

Remember that it's just not renal pathology, respiratory pathology or gastrointestinal pathology of stuff like subject specific like forensic pathology or cytological pathology either it's a cocktail or blend of the above in addition to marked limitation of geography, legalities ethnicity and religious variation. This talk will not do justice without training for what is not. Training where there is no right or wrong decision. This is an area which is traditionally caught between conservative practice and tradition. The mind set was perfect for the go of the nineties but self-destructive today. The trainees today should be smart people who can work anywhere. It should be an act of power building a culture of freedom and responding.

## Speaker Biography

Sujatha Siddappa has qualified in Pathology, pain and palliative care, human resource management, law regarding fundamental rights, waste management currently pursuing masters in hospital management. Over the last 2 decades and more of pathology practice she has gradually swerved towards renal pathology and GU pathology in the last 10 years. Her forte of interest includes clinical pathology, cytology histopathology, with focus on renal and GU pathology. She has had a good innings in her publication related to GU pathology which have reached out to highly engaged audience with Google scholar and research gate credits nearing 500 reads in the last couple of years and citations.

e: sujathasiddappa@gmail.com



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## Histopathological study of minor salivary gland Tumours: An observational study in the malwa belt of southwest part of Punjab

**Arnav Kumar Roy Choudhury**

Adesh Institute of Medical Sciences and Research, India

**Introduction:** Minor salivary gland neoplasms represent less than 25% of the intraoral salivary neoplasms and only 0.3-1.5% of all the biopsies received in oral pathology laboratories.

**Aims & Objectives:** Histopathological study of minor salivary gland tumors: An observational study in the malwa belt of south west part of punjab. Materials & methods: A prospective clinico-pathological study of 15 cases of benign and malignant neoplastic tumors of intraoral minor salivary glands was conducted in Department of Pathology at Adesh Institute of Medical Sciences and Research, Bathinda over the period of 6 months. The lesions from representative sections were studied and classified according to World Health Organization (WHO) classification.

**Results:** Palate was the most common site constituting 46.6% followed by retromolar region contributing 26%. Histopathologically amongst the 15 cases studied during study period, 8 were benign and remaining 7 were malignant. The most common benign tumor found was Pleomorphic adenoma (87.5%) followed by a single case of oncocytoma (12.5%). Among the 7 malignant tumours most commonly seen

lesion was serous Polymorphous low grade adenocarcinoma (PLGA) contributing 42.8% of all the malignant minor salivary gland lesions followed by adenoid cystic carcinoma (28.5%), mucoepidermoid carcinoma (14.2%).

**Conclusion:** Most of the benign tumors were observed in the age group of 20-40yr, while most of the malignant tumor cases were common in elderly (>40 years) age group. The most commonly seen benign neoplastic lesion was Pleomorphic adenoma whereas Polymorphous low grade adenocarcinoma (PLGA) was the most common malignant salivary gland neoplasm. Histopathology remains the gold standard for the diagnosis along with all other advanced ancillary techniques such as immunohistochemistry.

### Speaker Biography

Arnav Kumar Roy Choudhury has completed his MD Pathology from MGM University of Health Sciences (MGMUHS). He is currently working as assistant professor in the department of Pathology, AIMSR, Bathinda a premier tertiary care hospital. He has published more than 17 papers in reputed journals and has been serving as an reviewer of reputed journals.

e: drarnav2007@gmail.com



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## Intra-pancreatic schwannoma masquerading as a cystic neoplasm of pancreas: A rare case report

Sai Kumar Maley, Nam Dev Vadla, Vikas Reddy Byreddy, Jai Kishan Rao Lomte and Chanakya Charan Tirumala  
Osmania Medical College, India

Intra-pancreatic schwannomas are rare neoplasms, presenting with vague symptoms of abdominal discomfort or pain or sometimes asymptomatic. Preoperative imaging in two-thirds of cases appears as cystic neoplasm's, implying a whipple resection. If a definitive pre-operative diagnosis of schwannoma is made confidently, that will spare extensive surgery and associated morbidity. According to the recent literature less than 50 cases are reported in English literature in past 30 years. Here we report a 26 years old female presented with complaints of lump and pain in the abdomen for one year. On local examination 8X7cm hard immobile lump in the epigastrium, extending into right hypochondrium & umbilical regions. Rest of the abdominal examination is unremarkable. Patient was further evaluated by doing routine blood, biochemical and imaging studies. Initial imaging study by ultrasonography revealed lobulated well-defined mass in the head &uncinate process. Contrast enhanced computed tomography (CECT) revealed 8.3 X 7.4 cm heterogenous, well defined lobulated minimal progressive enhancing hypodense lesion noted involving head and neck of pancreas causing compression and dilation of the pancreatic duct (PD-4.4mm). Fine needle aspiration done during ultrasound showed a

gelatinous aspirate. Cytosmear of the aspirate revealed only benign columnar epithelial cells. Provisional diagnosis of Solid pseudopapillary tumour of pancreas was made and case was proposed for surgical management by whipple pancreaticoduodenectomy procedure. Grossly the tumour was identified in the head of pancreas measuring 8X7cm and the surface appeared lobulated. Histopathological examination revealed an encapsulated, well circumscribed tumour with adjacent compressed pancreatic tissue. Tumour tissue is composed of spindle cells with cellular palisading into Antoni A and Antoni B areas. Immunohistochemistry was performed with S-100 diffuse positivity and negative cytokeratin, CD117 and AE1/AE3, confirming the tumour mass as a benign nerve sheath tumour-Schwannoma.

### Speaker Biography

Sai Kumar Maley has completed his residency training in pathology and senior residency from Osmania Medical College. He is interested in research on pulmonary malignancies and his post-doctoral dissertation work was centered on the immunocytochemical diagnosis of pulmonary malignancies in low resource setup's and his work highlighted an effective and economical usage of immunohistochemical markers and worked on the preanalytical variables influence on the outcomes.

e: sai.maley@gmail.com



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