



## CASE BRIEF

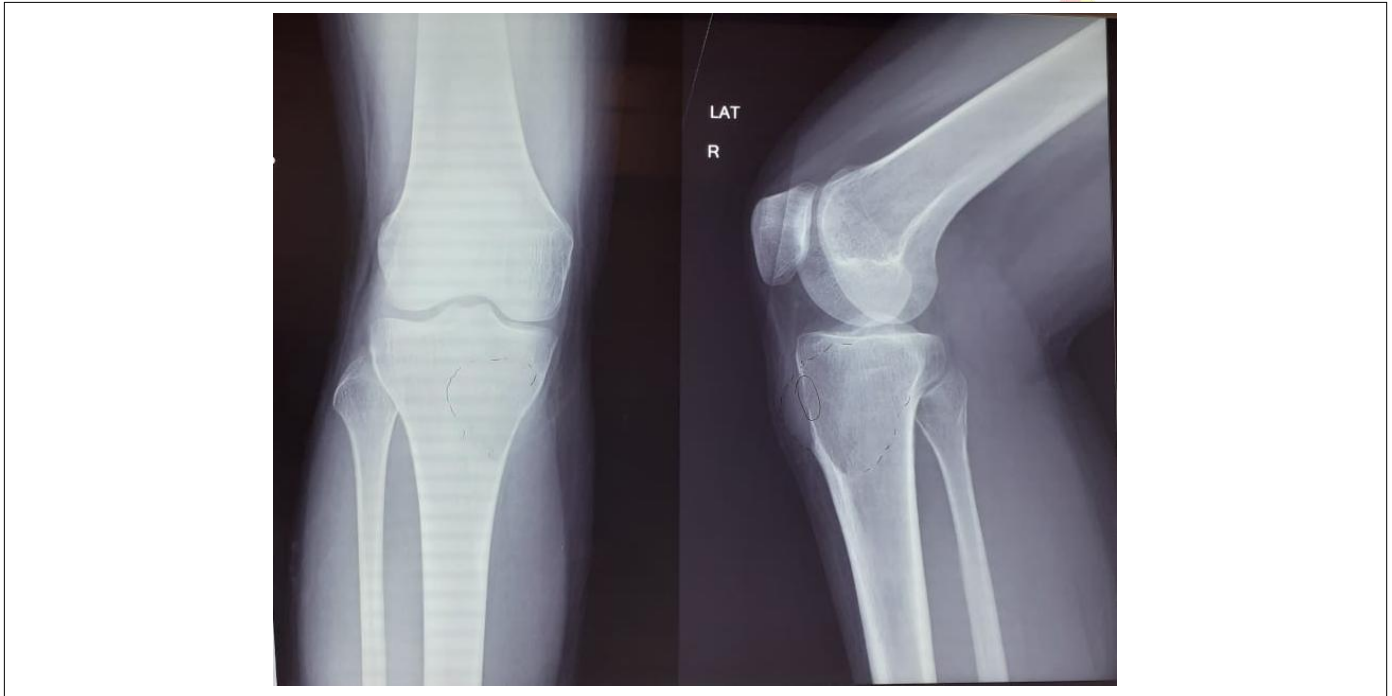
Name: [REDACTED]  
Age: 22 years, female  
Address: [REDACTED]  
Contact no: [REDACTED]  
MRD No: TYR/126/2020  
Diagnosis: Giant cell tumor right proximal tibia  
Date of Diagnosis: 27/02/2020  
Surgery: Extended curettage/Bone grafting and plating.  
Date of Surgery: 04/03/2020

### BRIEF SUMMARY OF THE EVENTS:

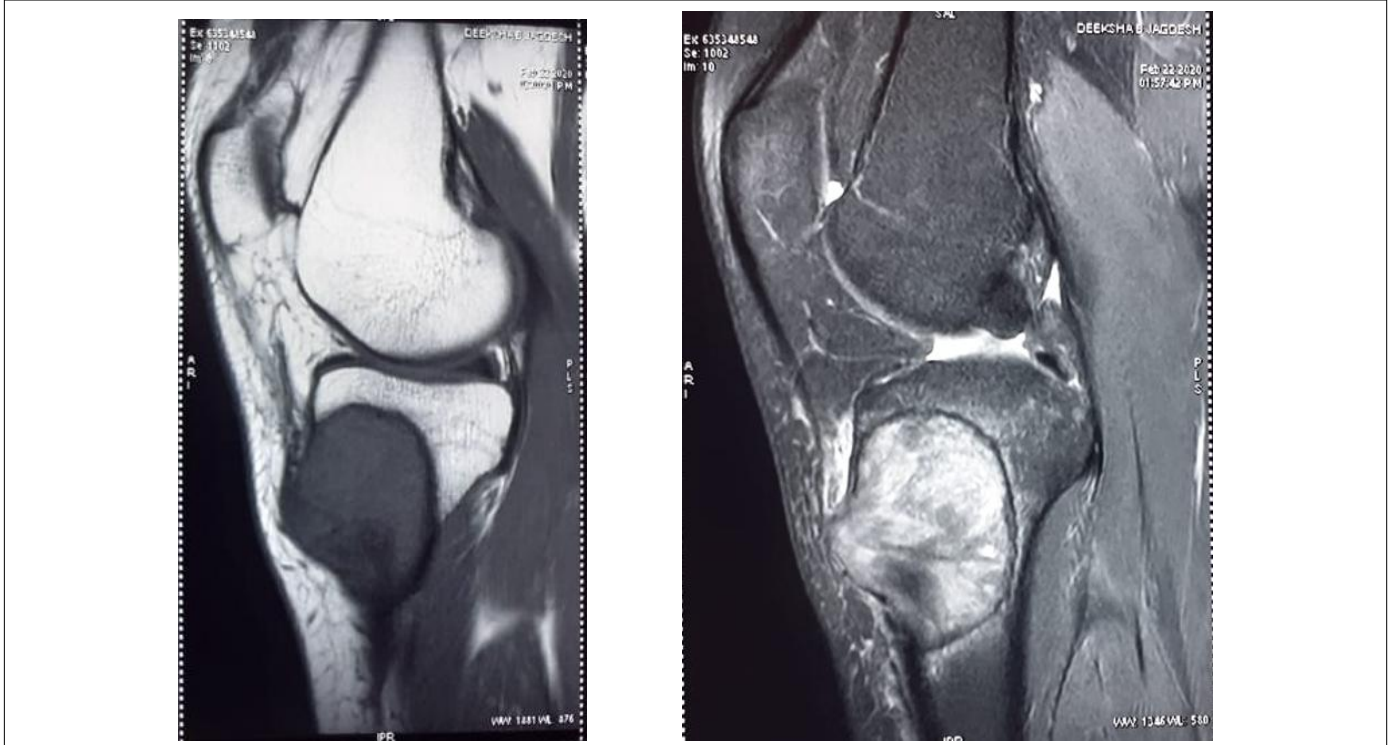
DATE	EVENTS	FINDINGS
Sept 2019		C/O of pain in the proximal tibia
Jan 2020		Noticed swelling, No night pain and no other constitutional symptoms.
22 <sup>nd</sup> Feb 2020	MRI	Giant cell tumor/Solid variant of aneurysmal bone cyst/ Chondromyxoid fibroma.
25 <sup>th</sup> Feb 2020	J needle biopsy	Consistent with giant cell tumor of the right proximal tibia.
3 <sup>rd</sup> Mar 2020	PET CT Scan	Suggestive of GCT.
4 <sup>th</sup> Mar 2020	Surgery	Extended curettage/Bone grafting and plating.
4 <sup>th</sup> Mar 2020	HPE	Features are of Giant cell tumour of bone.



## X-RAY IMAGES: 22/02/2020



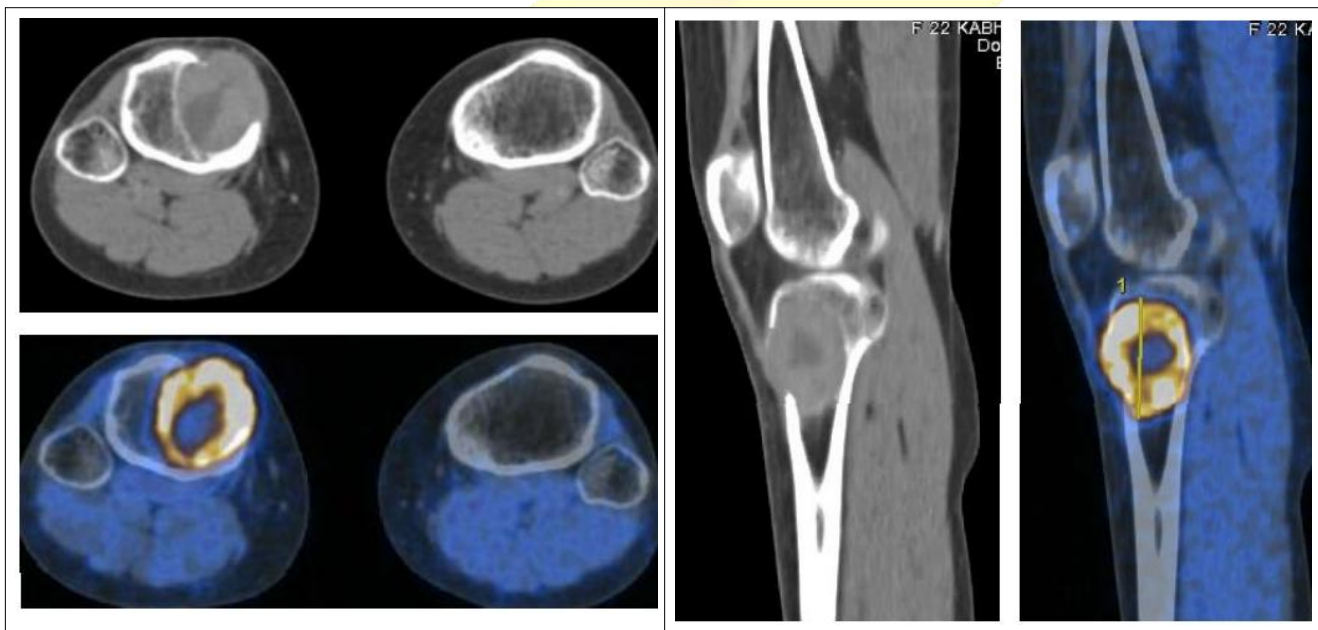
## MRI IMAGES: 22/02/2020



**Findings:**

1	Well defined inhomogeneously enhancing mass lesion within the anterior portion of medial tibial condyle and metadiaphyseal region.
2	<ul style="list-style-type: none"> <li>• Giant cell tumor</li> <li>• Solid variant of aneurysmal bone cyst.</li> <li>• Chondromyxoid fibroma.</li> </ul>

**PET CT IMAGES:03/03/2020**



**Findings:**

1	4 x 3.3 x 5.2 cm expansile osteolytic lesion in the epimetaphyseal region of the proximal right tibia, narrow zone of transition with cortical discontinuity and minimal extraosseous soft tissue, suggestive of GCT.
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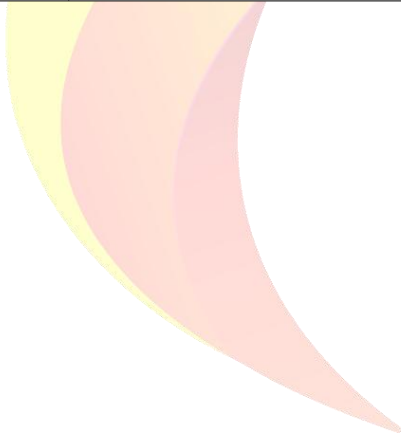
**HISTOPATHOLOGY (J Needle Biopsy) 25/02/2020:**

**Findings:**

1	Consistent with giant cell tumor of the right proximal tibia.
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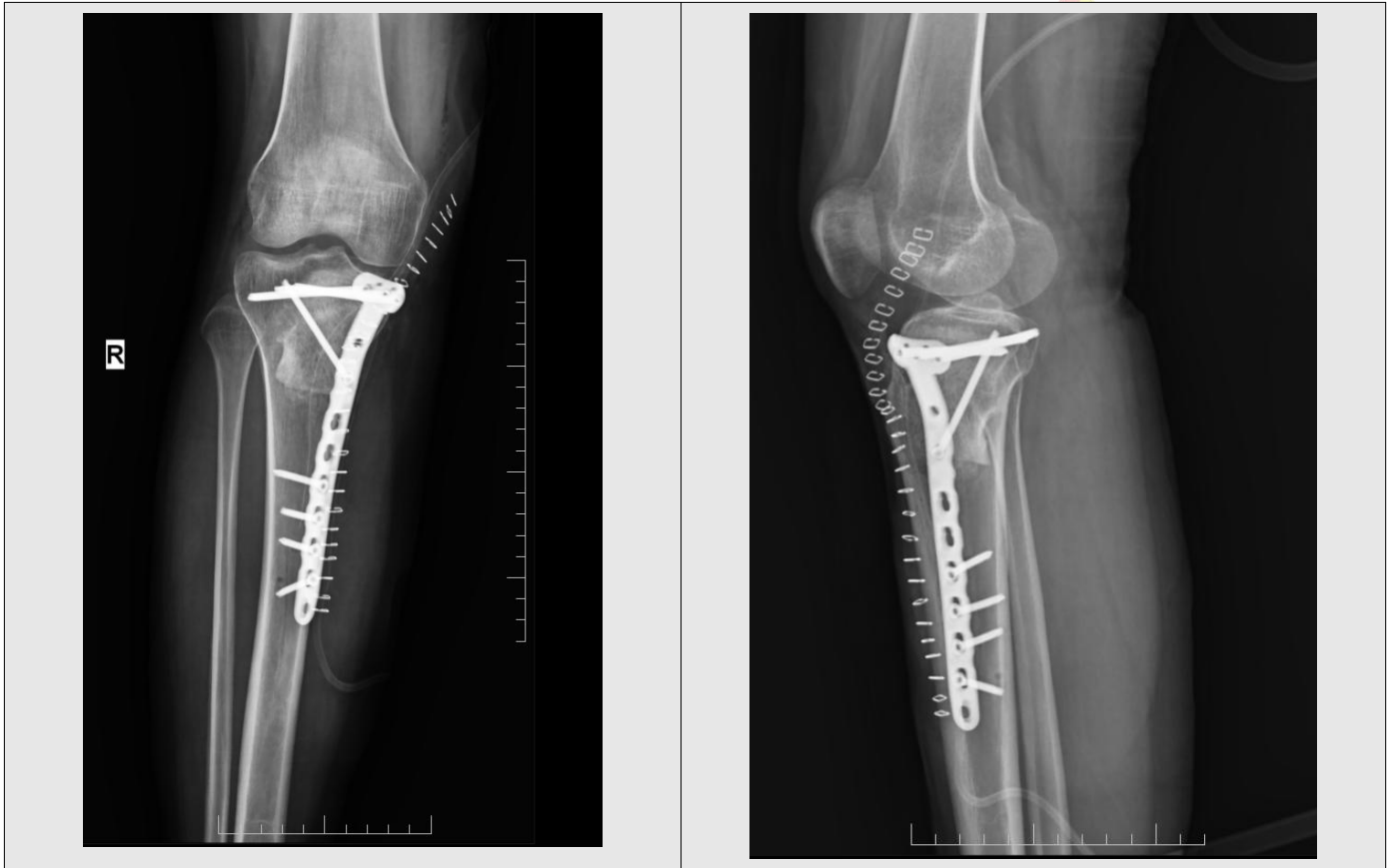


OPERATIVE IMAGES: 04/03/2020

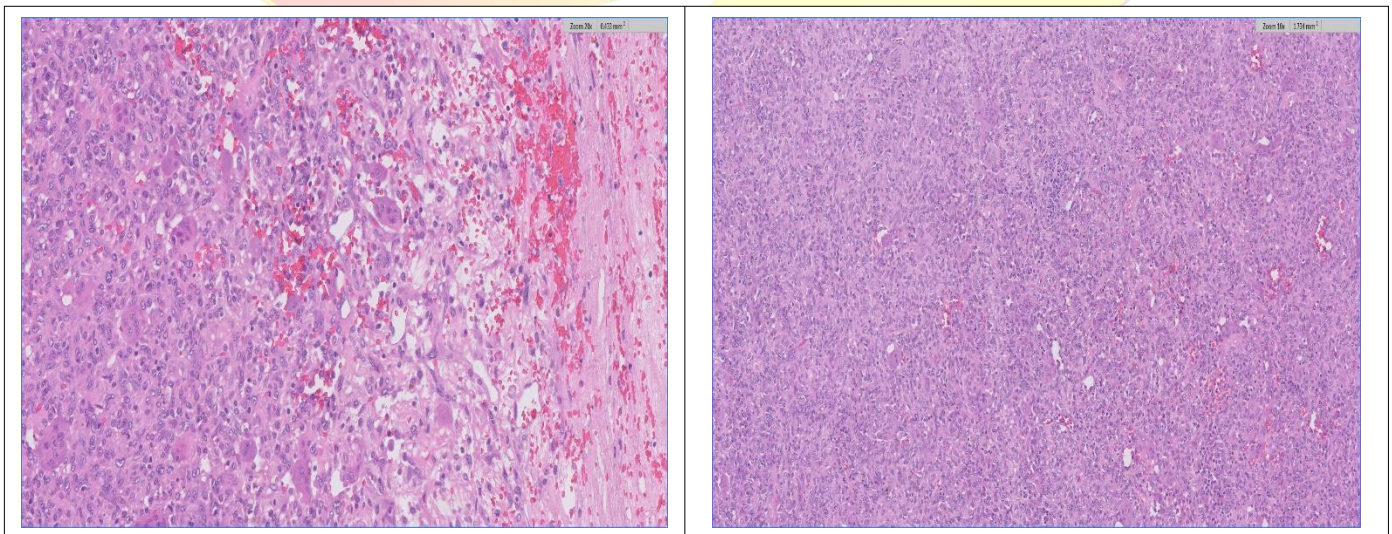




POST-OP X-Ray: 04/03/2020



HISTOPATHOLOGY IMAGES 04/03/2020:



**Findings:**

1	Sections reveal a cellular lesion formed of bimodal population of uniformly distributed osteoclastic giant cells in an ovoid to spindle shaped stromal cells. A few mitoses are seen. At places vascular spaces lined by giant cells are noted. Hemosiderin laden macrophages are seen. No evidence of malignancy seen.
2	Features are of Giant cell tumour of bone.

**PROPOSED RECOMMENDATION AS DISCUSSED IN TYR MULTIDISCIPLINARY SARCOMA TUMOUR BOARD:**

1	Wound healing well, continue physiotherapy as advised.
2	To review once in 3 months for every 2 years and for every 6 months for next 3 years.

**OUR MDT TEAM MEMBERS:**

NAME	DESIGNATION
Dr.Pramod Chinder	Consultant Orthopaedic Oncosurgeon
Dr Suraj H P	Orthopaedic Oncosurgeon
Dr.Srinath D	Orthopaedic Oncosurgeon
Dr. Sreeraj.	Orthopaedic Oncosurgeon
Dr. Aparna	Consultant Oncopathologist
Dr. Kunal	Consultant Oncopathologist
Dr. Imran	Consultant Oncopathologist
Dr. Kumaraswamy	Consultant Radiation Oncologist
Dr. Vikram Maiya	Consultant Radiation Oncologist
Dr. Shivakumar	Consultant Radiologist



## OUR TEAM MEMBERS:

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Mrs.Veena	Secretary	9148663925

Prepared by: Tejashvini.

Checked by: Dr.Pramod.S.Chinder