

SYNOVIAL CELL SARCOMA

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Abstract — Ten cases of synovial cell sarcoma are reported. The youngest patient was a 2½ years old boy with synovial cell sarcoma of the knee and the oldest one was a man with synovial cell sarcoma of the elbow.

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Key words: Synovial cell; sarcoma

CASE REPORT

Our cases were as follow:

(1): A two and half year-old boy, with a soft tissue tumor near his left knee (Fig.1).

(2): A 33 year old man with a mass proximal to the patient's right wrist (Fig. 2).

(3): A 78-year-old man with pain in his right elbow (Fig. 3).

(4): A 18-year-old with a soft tissue near his left shoulder (Fig. 4).

(5): A 44-year-old man with a large soft tissue mass near his right hip with more than one year duration (Fig.5).

(6): A 38-year-old man with pain and a mass in his right hip (Fig. 6).

(7): A 9-year-old boy with a mass near his left knee (Fig. 7 a and b).

(8): A 14-year-old-boy with a soft tissue mass in the middle of his left leg with more than two years duration. X-ray showed soft tissue calcification (Fig. 8a,b and c).

(9): A 33-year-old woman with a soft tissue mass near her left ankle (Fig. 9).

(10): A 22-year-old girl with a soft tissue mass on distal phalanx of her third toe (Fig. 10).

INTRODUCTION

This highly malignant but rare tumor was once thought to arise from the synovial lining of joint or tendon sheaths because of its proximity to these structures. Pathologically, synovial cell sarcoma are a solid, whitish fleshy mass (1,2,3) with a slow but insidious invasion of the soft tissues. It is most common in young and middle-aged adults (4,5). This malignant tumour has a poor prognosis, with early pulmonary metastases (4) or spread to local lymph nodes. Histologically, the tumor is composed of masses of fusiform cells (7,8,9), but the picture is characterized by the formation of spaces or clefts lined by cuboidal cells which suggest the formation of synovial cavity, hence the name given to this tumor. Treatment is by wide excision, if this is practicable, with preoperative and postoperative radiotherapy. Tumor involves a joint amputation offers the best hope of cure.

DISCUSSION

This malignant tumor usually arises near a joint. The typical patient is a young adult.

There was a slightly male predominance. Patients had an mass or pain or both. X-ray showed soft tissue calcification; the pattern of metastasis was most frequently by the way of blood vessels to the lungs and lymph node involvement were more common in the lower extremities. The common site was near the knee joint. The consensus of most review articles is that primary amputation with or without regional node dissection is better than local excision. At present, multidrug adjuvant chemotherapy is advised for systemic control.

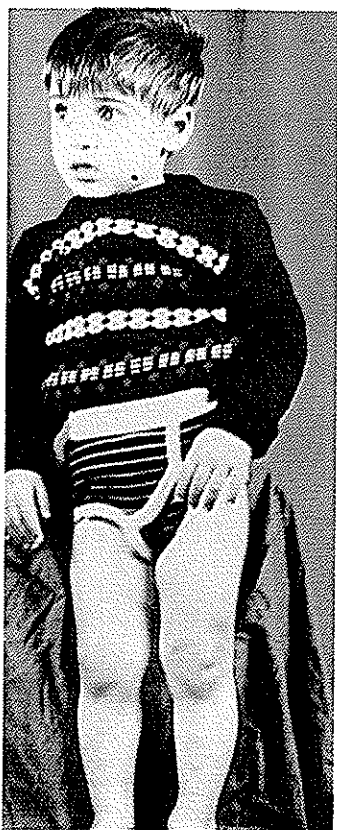


Fig. 1. A soft tissue tumor near left knee



Fig. 3. 72-year-old patient with a mass in right-ellow



Fig. 2. Mass proximal to the patients right wrist

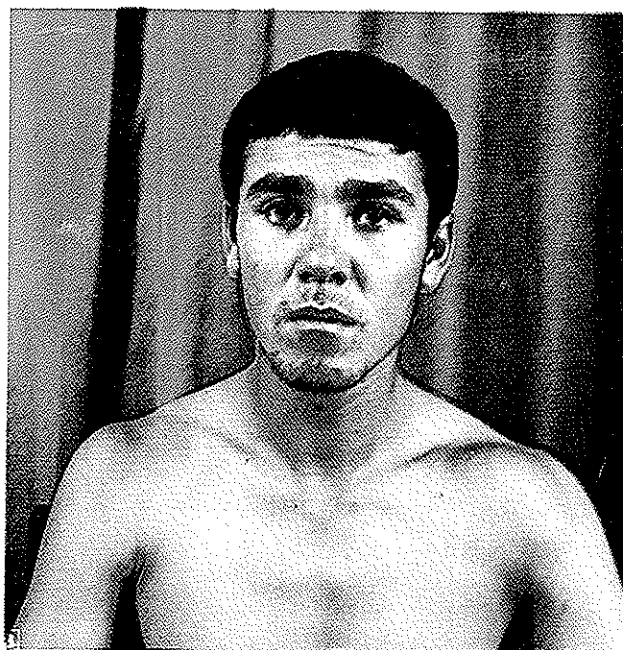


Fig. 4. Patient with soft tissue mass near his shoulder



Fig. 5. Patient with soft tissue mass near his' right hip.

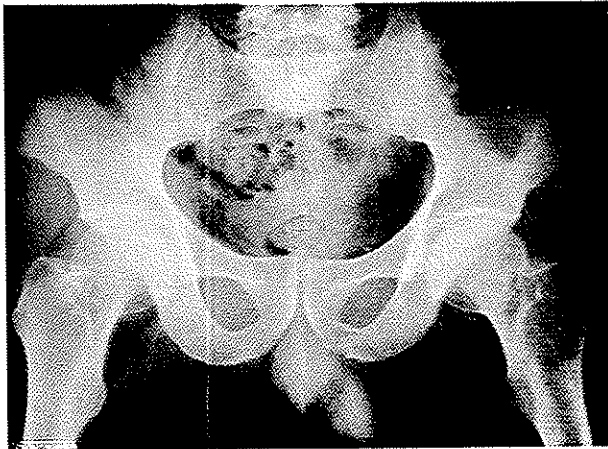
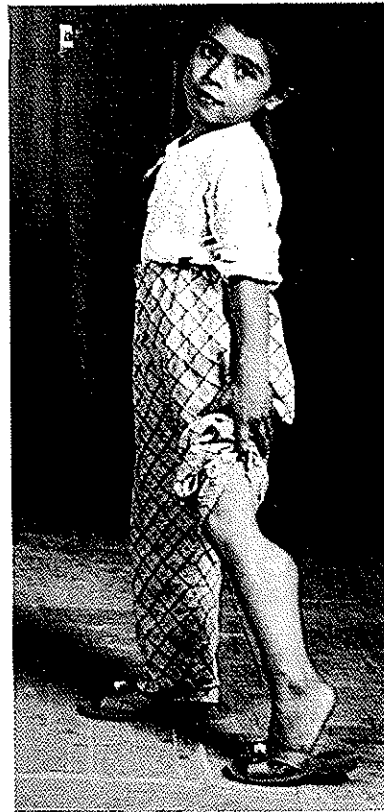


Fig. 6. The X-Ray of the pelvic of a patient with a mass is his right hip.



Fig. 7. (a) The photograph and (b) the X-Ray of case 7.



(a)



(b)



(c)

Fig. 8. The X-Ray, the photograph and the CT scan of the case 8.

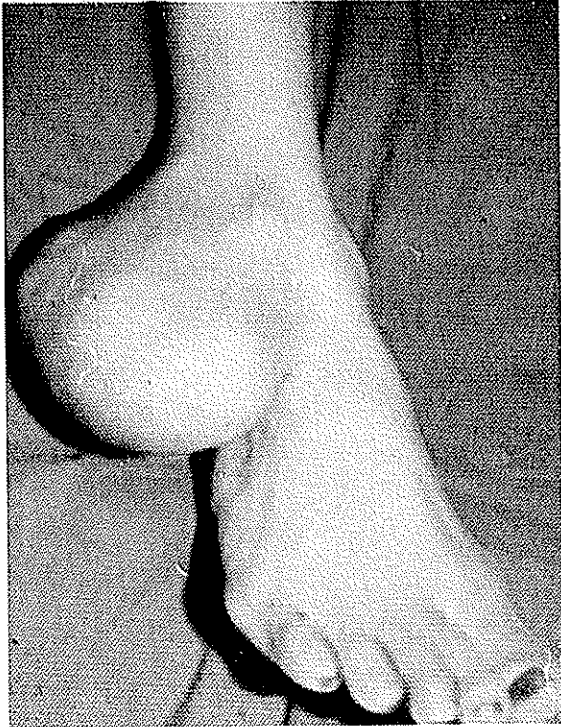


Fig. 9. A 33 year-old woman with a soft tissue mass near her ankle.

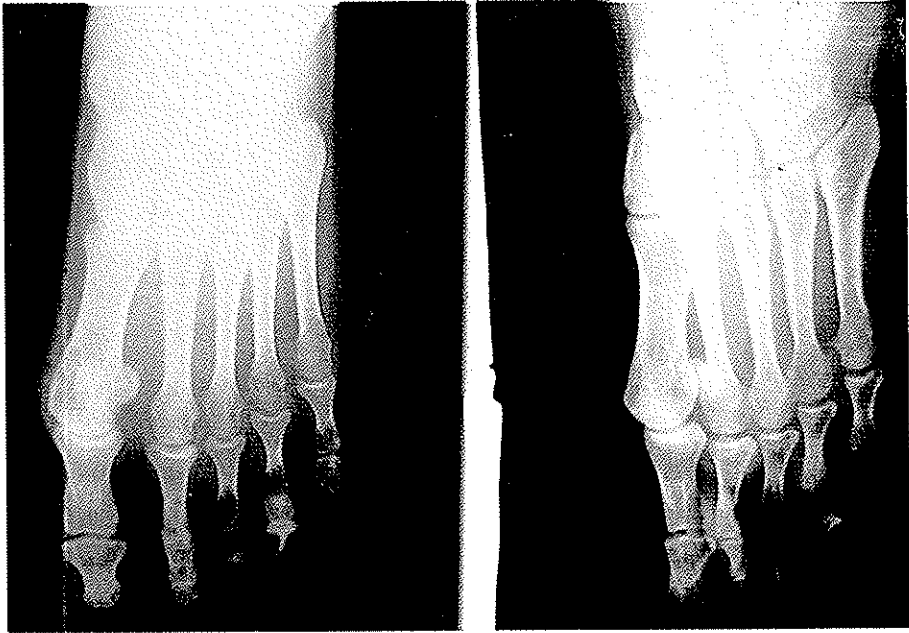


Fig. 10. The X-Ray of the patient's foot with a soft tissue mass on distal phalanx of her third toe.

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