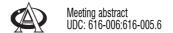


### **MISCELLANEOUS**





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### Case of an anemia in breast cancer in hyperestrogenism

# Preretinal bleeding as an unusual manifestation of thrombocytopenia

KEYWORDS: Breast neoplasms; Anaemia; Anticancer agents, Hormonal

KEYWORDS: Chemotherapy; Thrombocytopenia; Bleeding

Hyperestrogenism has an unfavorable influence on development of the breast cancer. The increase of this hormone in plasma has one additional unfavorable influence: it causes the anemia of hormonal origin. In the case of breast cancer the patient was pale that indicated a kind of anemia of hormonal origin. Examination with radiochromium revealed mild anemia (78% erythrocyte volume), with decrease plasma iron - 9 mol/L., and elevated radioactivity index of the spleen: cor over 1. Ovary irradiation was applied in addition to other therapeutic procedures in order to decrease estrogens in plasma and minimize unfavorable influence on the growth and dissemination of the breast cancer. Anemia was regressed after this therapy: volume of erythrocytes increases by 37%, i.e. 15% above normal values, respectively. Plasma iron came to normal value from 9 to 13%, index spleen: cor decreased i.e. normalized below 1. According to the data from literature hyperestrogenism causes hypocorticism that influences the spleen to decrease physiological destruction of erythrocytes, saving necessary erythopoietic factors (Fe and erythropoietin) needed for erythopoiesis. Ovarian ablation by irradiation of the patient with breast cancer decreases estrogens, increases plasma corticosteroids, spleen function being normal, increases the iron and erythropoietin in plasma, thus improving erythropoiesis and solving anemia. Unfavorable influence of estrogens in plasma causes hormonal improvement of the malignant disease.

A case of a 19 years old patient, suffering from *Carcinoma mixtus testis sinistri* is reported. In the course of the chemotherapeutic treatment (PEI chemoterapeutic regimen) patient noticed symptoms of visual disturbances, dizziness, faint, and malaise. Blood count revealed pancytopenia with platelet count of 15000 per cubic millimeter. Examination by ophthalmologist and ultra sound of the eyes found preretinal bleeding of the right eye Preretinal hemorrhage was due to thrombocytopenia. We could not confirm any other site of bleeding neither in skin nor in mucosis. This case report shows an unusual and the only site of spontaneous bleeding that may occasionally occur.



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## The immunohistochemistry of gastrointestinal stromal tumor

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### Colposcopy in early detection of cervical carcinoma

KEYWORDS: Gastrointestinal stromal tumor; Immunohistochemistry; Interstitial cells

Gastrointestinal stromal tumor (GIT) is a rare neoplasm thought to arise from mesenchymal cells of the gastrointestinal tract. A relationship to the interstitial cells of Cajal (ICCs) has been proposed. A 24-year-old man was referred for surgical therapy because of his abdominal pain. Laparotomy revealed a large tumor in the ileocecal region. Immunohistochemical studies were performed by using immunoalkaline phosphatase (APAAP) technique. A routine histology examination using hematoxylin and eosin staining showed spindle cell morphology with a tendency for nuclear palisading. The immunostaining for desmin, S-100 protein, neurofilament and chromogranin have been negative. Malignant potential of GIT is best estimated by the simultaneous evaluation of clinical parameters and histology of tumor.

KEYWORDS: Colposcopy; Cervical cancer; Quality assurance

The authors present observations about usage of colposcopy as a good clinical practice (GCP) in a selected material. Most frequently, atypical epithelium colposcopically was manifested in the form of "white epithelium", alone or with the other classical colposcopic pictures. The authors have found a relatively good correlation between the colposcopic and histopathologic findings in the group of suspected (Papa III) vaginal smears. It points out the importance of photographic documentation of colposcopic findings.



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### Conization of the *portio vaginalis* cervicis

KEYWORDS: Conization; Uterine cervix; Surgery

The authors present experiences of performing conization after modified bloodless method. In our series only one case of more serious postoperative bleeding was recorded. This problem has been solved by electrocoagulation. Time advantages of the method with the plastic surgery of the portion over the previously used by the conization are emphasized.