

## **International Conference and Exhibition on**

## **Lung Disorders & Therapeutics**

July 13-15, 2015 Baltimore, Maryland, USA

## Mesothelioma mimics

Hasleton P S
University of Manchester, UK

The histological diagnosis of pleural mesothelioma can be very challenging to the histopathologist. Separation of benign from malignant pleural disease is one the most difficult areas in pleural pathology and this topic will be considered. In 22% of 217 cases coming to the US and Canadian Mesothelioma Panel, there was disagreement between one or more panelists as to whether a case was mesothelioma or benign. Mesothelioma has three subtypes such as epithelioid, sarcomatoid (including desmoplastic) and biphasic. The differential diagnosis will therefore be considered in these three categories with demonstration of how to separate the entities. The diagnosis of mesothelioma requires full clinico-radiological-pathological correlation, the availability of adequate samples for the histopathologist, including the parietal pleura, which can provide helpful pointers and the use of special stains, including immunocytochemistry. However special stains have their limitations, as will be shown.

philiphasleton@gmail.com

## **Pulmonary Tumour Thrombotic Microangiopathy (PTTM)**

Hasleton P S<sup>1</sup>, Booton R<sup>1</sup>, Azzawi M<sup>2</sup> and Woodcock A A<sup>1</sup> University of Manchester, UK
<sup>2</sup>Manchester Metropolitan University, UK

 ${f P}$ ulmonary tumour thrombotic microangiography (PTTM) is a rare cause of pulmonary hypertension (PH) and is usually discovered at post-mortem. It is associated with gastric and rarely with other carcinomas. We describe the pulmonary vascular pathology and propose a role for transforming growth factor  ${f \beta 1}$  (TGF ${f \beta 1}$ ) in the causation of the vascular occlusion.

philiphasleton@gmail.com

**Notes:**