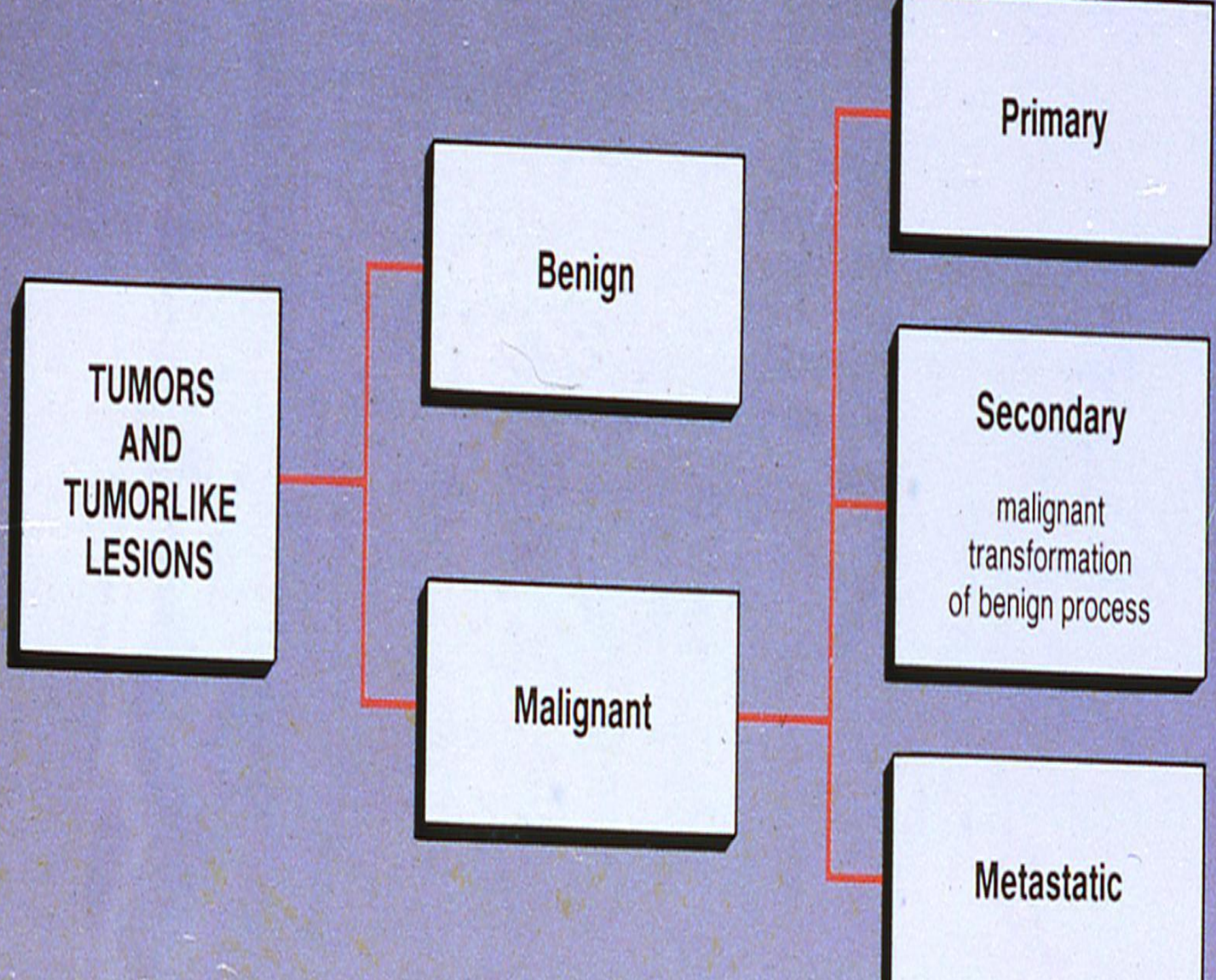


BONE TUMORS

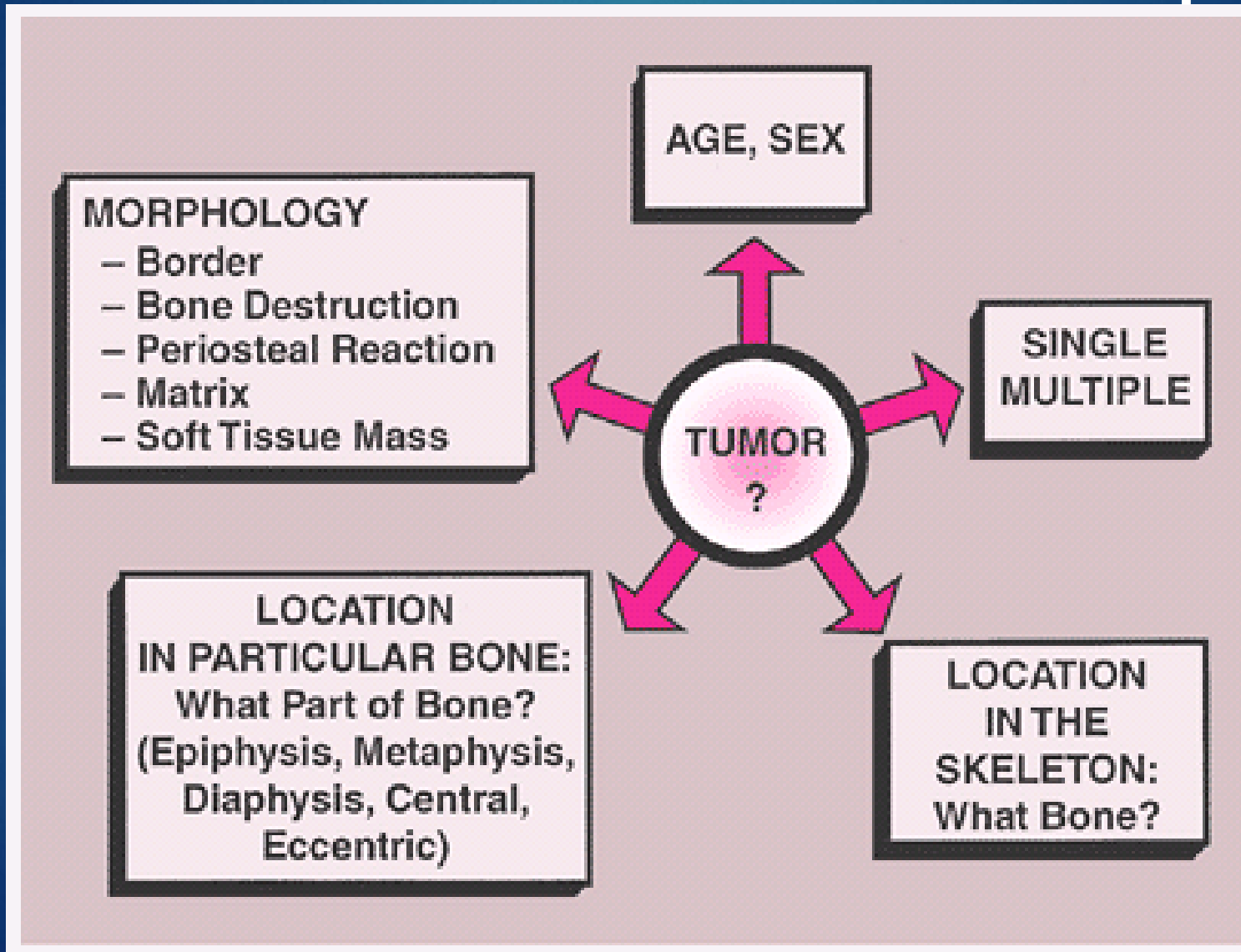
BONE TUMORS

- ▶ Bone tumors are classified into:
 - ▶ Primary bone tumors
 - ▶ Secondary bone tumors (Metastasis)
- ▶ Most are classified according to the **normal cell of origin** and apparent pattern of differentiation



Histologic Type	Benign	Malignant
Hematopoietic (40%)		Myeloma
		Malignant lymphoma
Chondrogenic (22%)	Osteochondroma	Chondrosarcoma
	Chondroma	Dedifferentiated chondrosarcoma
	Chondroblastoma	Mesenchymal chondrosarcoma
	Chondromyxoid fibroma	
Osteogenic (19%)	Osteoid osteoma	Osteosarcoma
	Osteoblastoma	
Unknown origin (10%)	Giant cell tumor	Ewing tumor
		Giant cell tumor
		Adamantinoma
Histiocytic origin	Fibrous histiocytoma	Malignant fibrous histiocytoma
Fibrogenic	Metaphyseal fibrous defect (fibroma)	Desmoplastic fibroma
		Fibrosarcoma
Notochordal		Chordoma
Vascular	Hemangioma	Hemangioendothelioma
		Hemangiopericytoma
Lipogenic	Lipoma	Liposarcoma
Neurogenic	Neurilemmoma	

Analytic approach to evaluation of the bone neoplasm



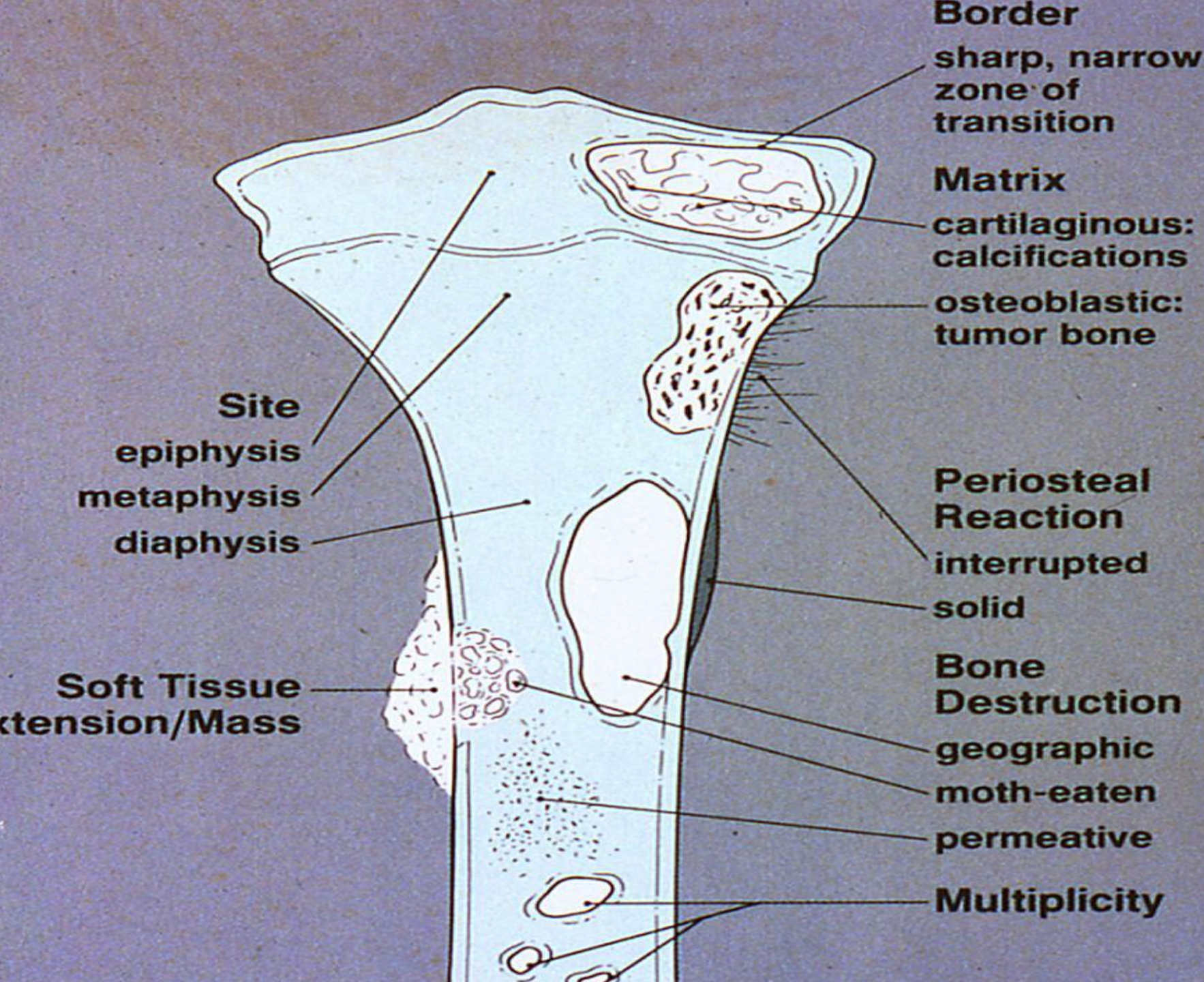
Evaluation

- ▶ History
- ▶ Physical examination
- ▶ Investigations; labs, imaging
- ▶ Biopsy

Radiography



- ▶ Information yielded by radiography includes :
 - ▶ Site of the Lesion
 - ▶ Borders of the lesion/zone of transition
 - ▶ Type of bone destruction
 - ▶ Periosteal reaction
 - ▶ Matrix of the lesion
 - ▶ Nature and extent of soft tissue involvement



Benign Lesion

Malignant Lesion

well defined,
sclerotic border

lack of soft
tissue mass

solid
periosteal
reaction

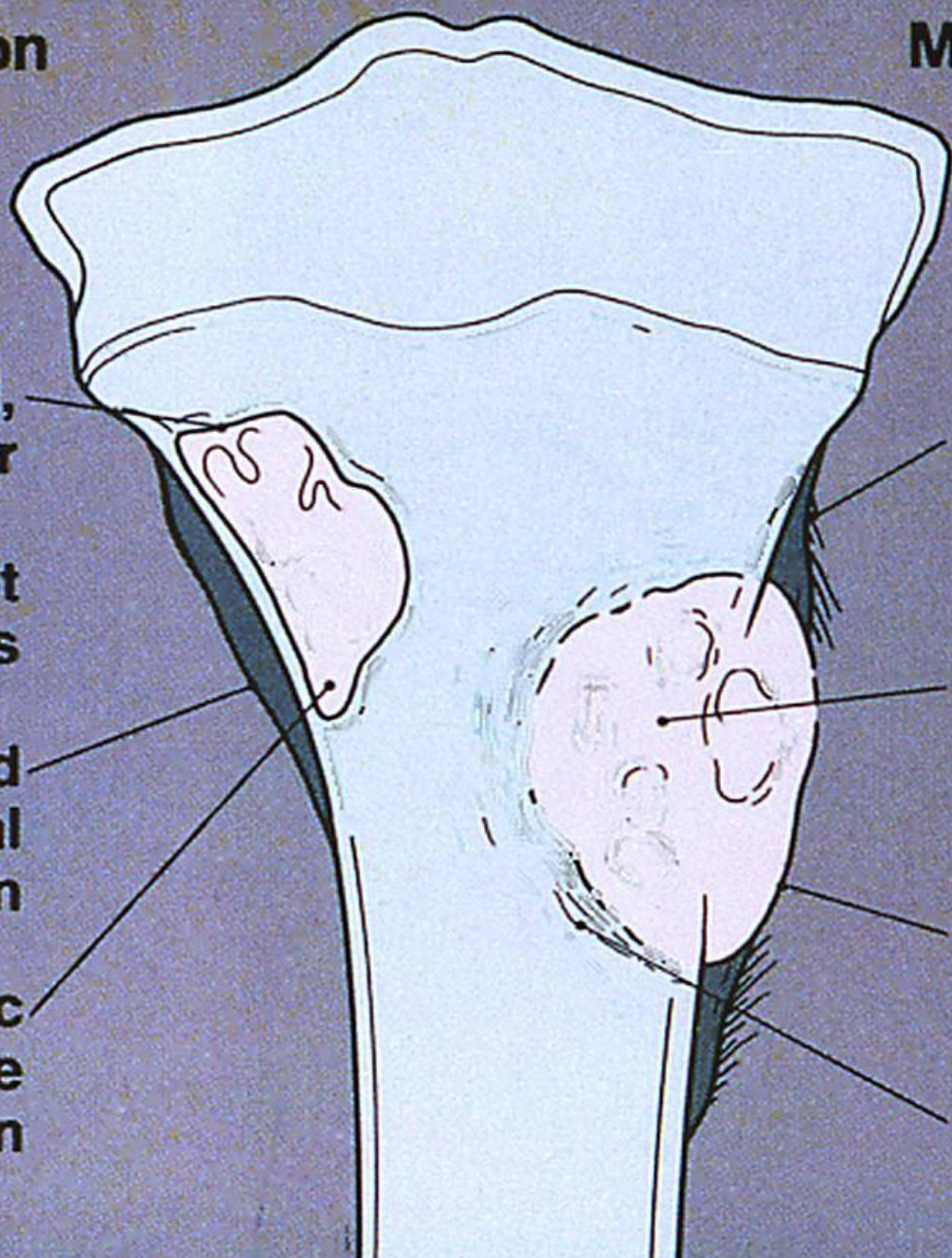
geographic
bone
destruction

interrupted
periosteal
reaction

moth-eaten
or permeative
bone destruction

soft tissue
mass

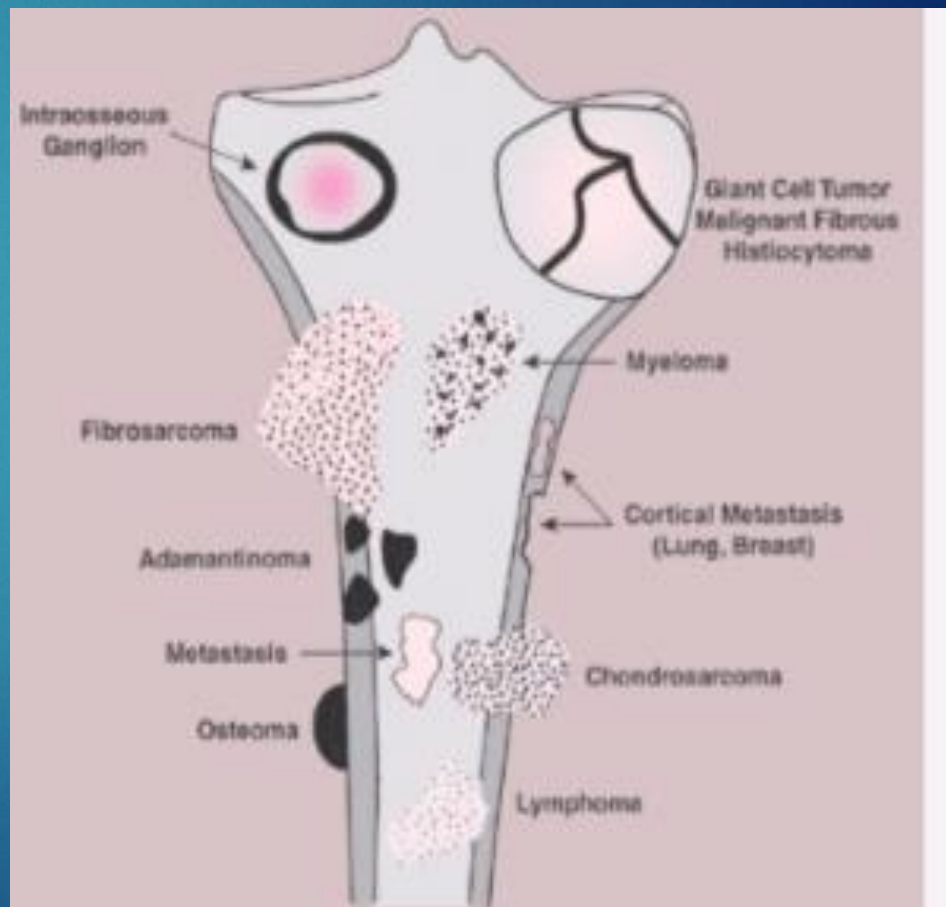
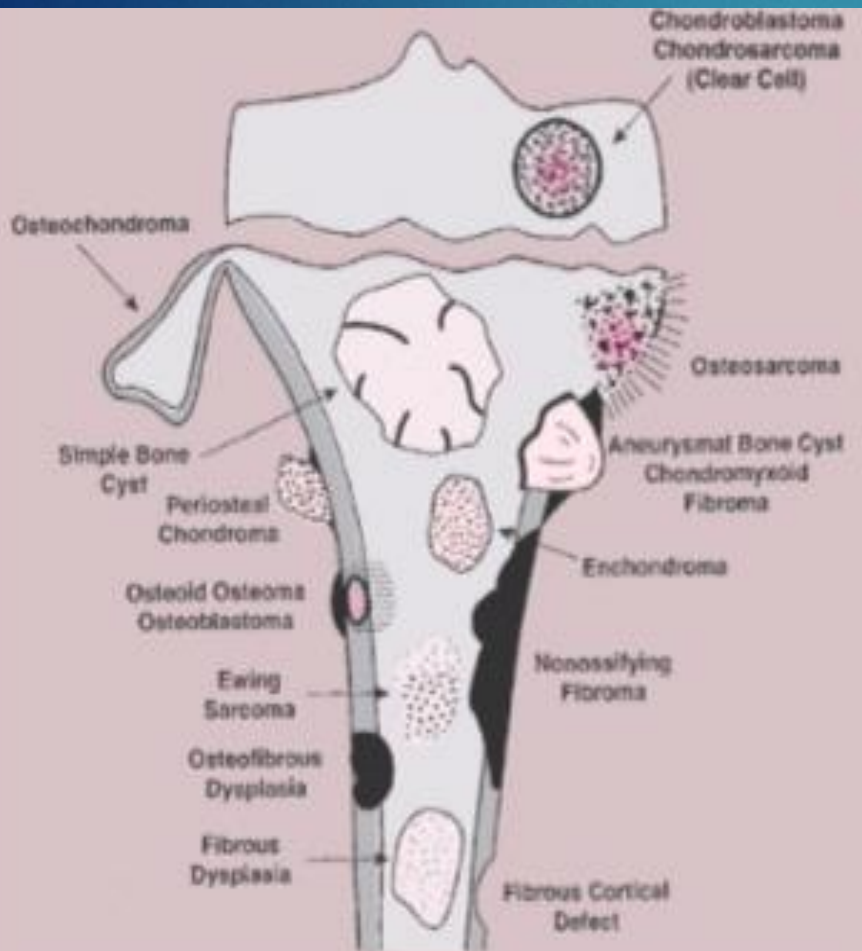
wide zone
of transition



Site of the lesion.

Distribution of various lesions in a long tubular bone in a growing skeleton

Distribution of various lesions in a long tubular bone after skeletal maturity

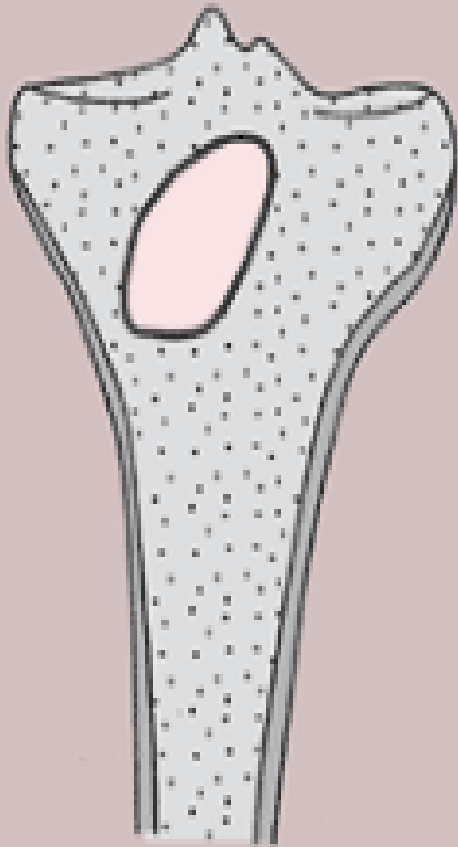


**Borders of the lesion
determine its growth rate.**

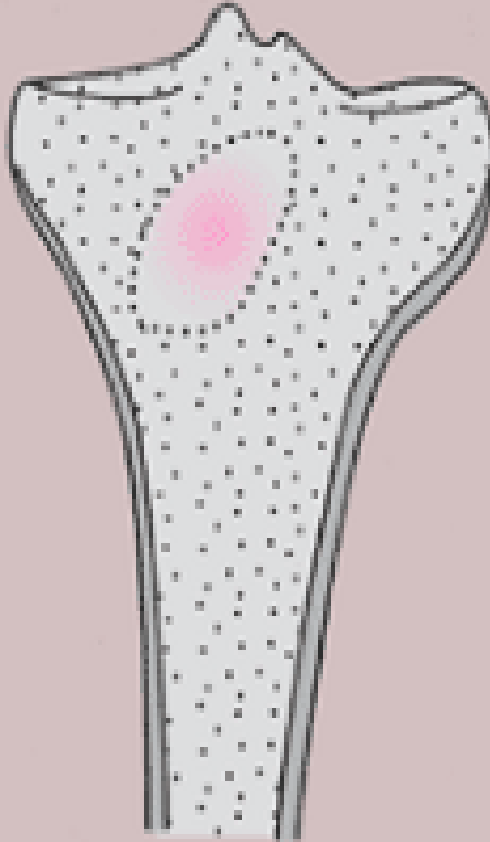
sharp sclerotic

sharp lytic

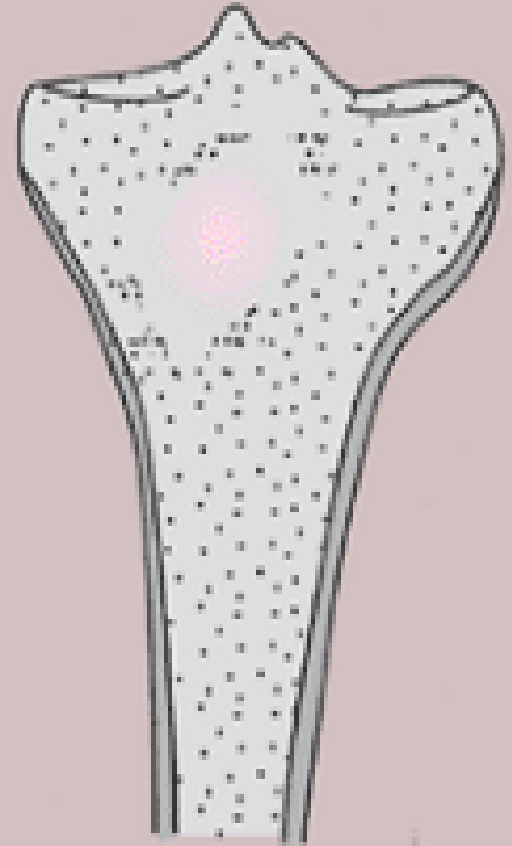
ill-defined.



1 A



1 B



1 C

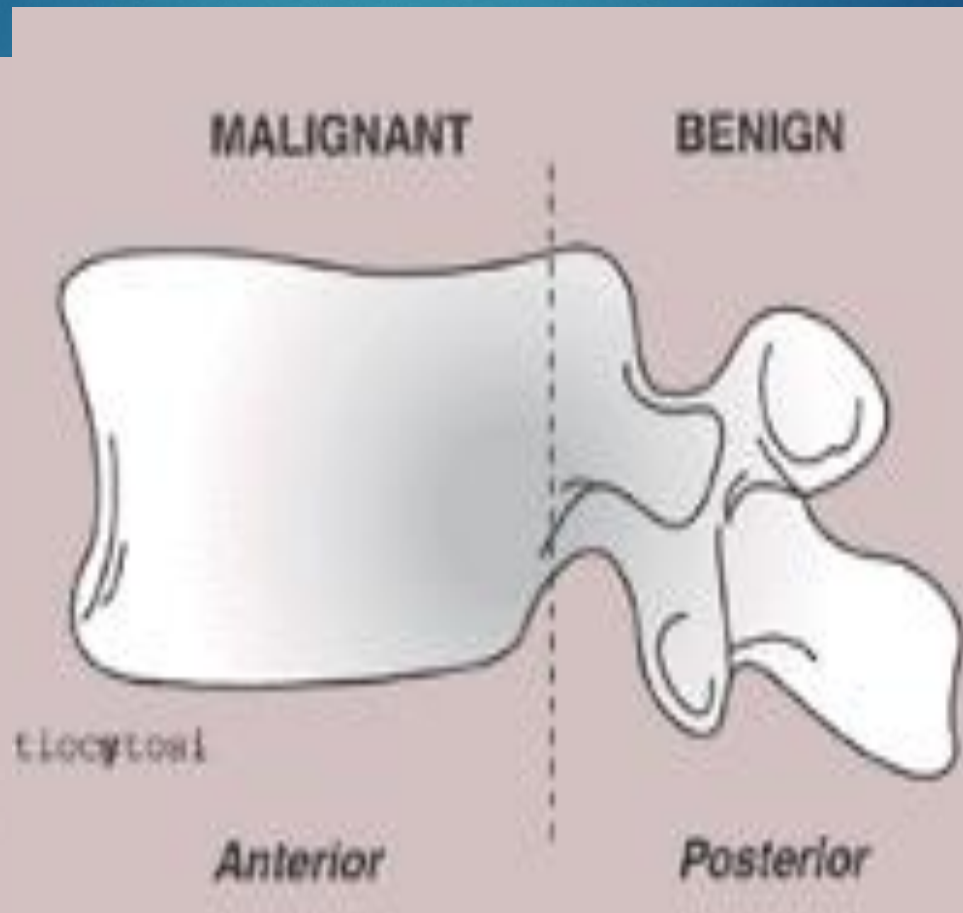
Distribution of various lesions in a vertebra.

Malignant lesions are seen predominantly in its anterior part (body)

Benign lesions predominate in its posterior elements

Lymphoma
Hodgkin
Myeloma
Ewing
Osteosarcoma
Chondrosarcoma
Metastasis

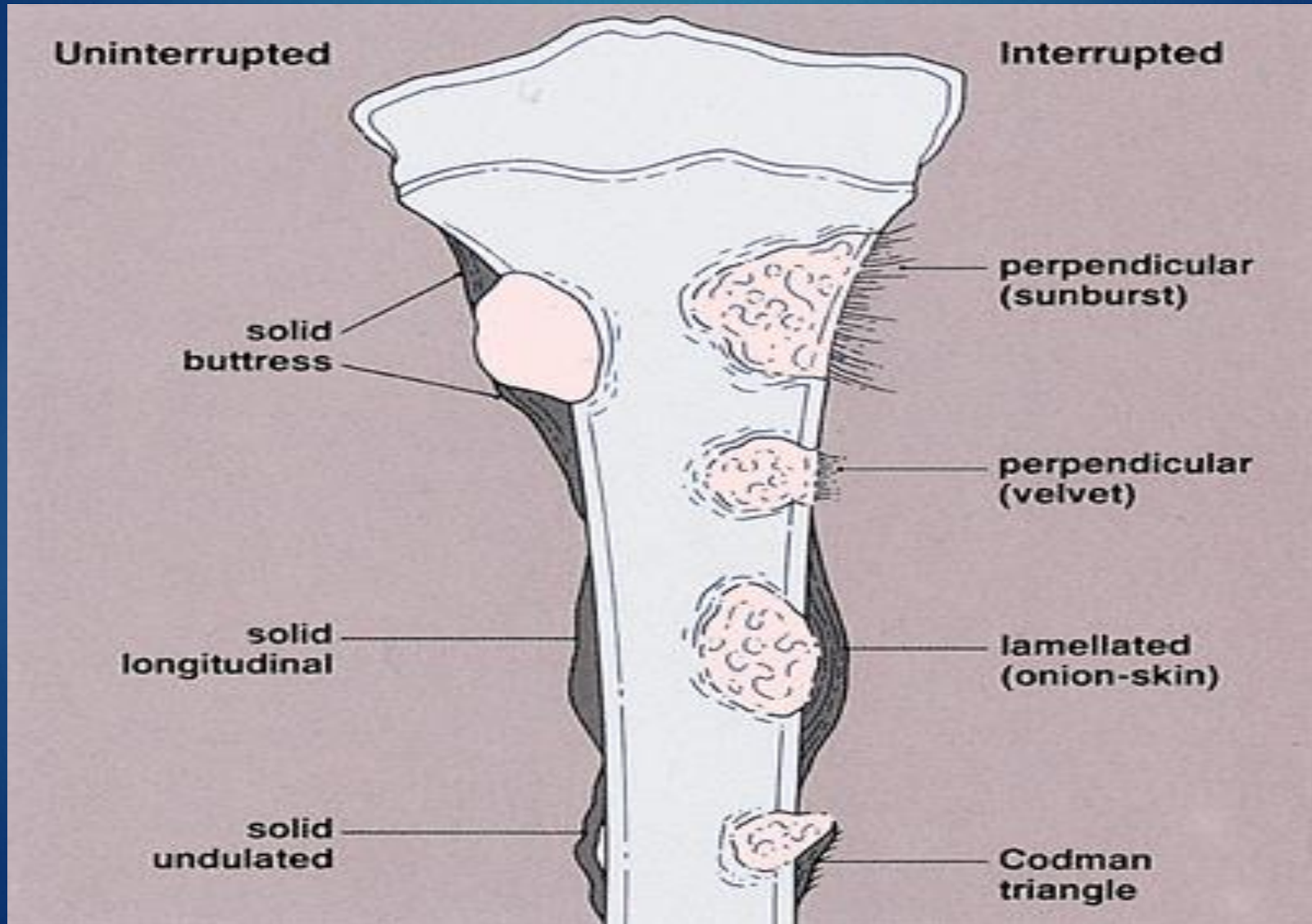
Exceptions:
Hemangioma
Langerhans Cell
Fibrous Dysplasia



Osteoblastoma
Osteoid Osteoma
Aneurysmal Bone Cyst
Osteochondroma
Chondromyxoid Fibroma

Types of periosteal reaction.

An uninterrupted periosteal reaction usually indicates a benign process, whereas an interrupted reaction indicates a malignant or aggressive nonmalignant process



Interrupted type of periosteal reaction

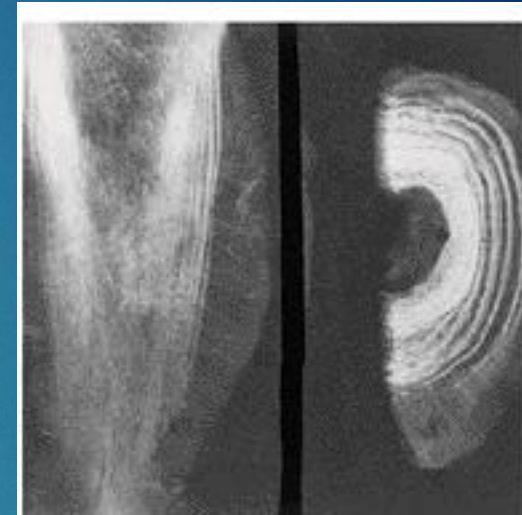
**sunburst
pattern -
osteosarcoma**



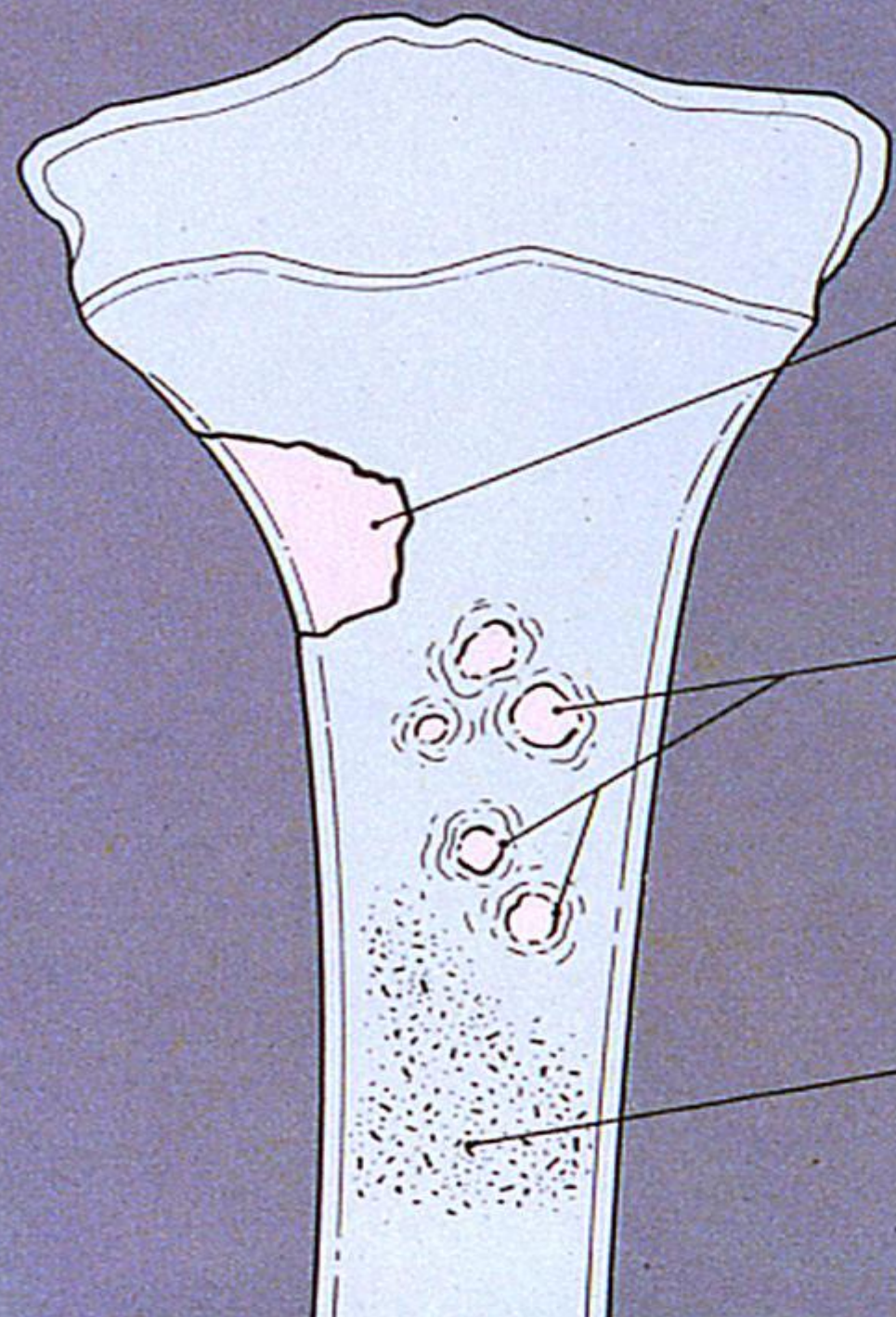
**lamellated or
onion-skin
type in ewing
sarcoma**



**Ewing sarcoma -
lamellated type**



**Codman
triangle
(arrow)**



Benign Process

geographic—uniformly
destroyed area
with sharply
defined border

Likely Malignant Process

moth-eaten—areas
of destruction
with ragged
borders

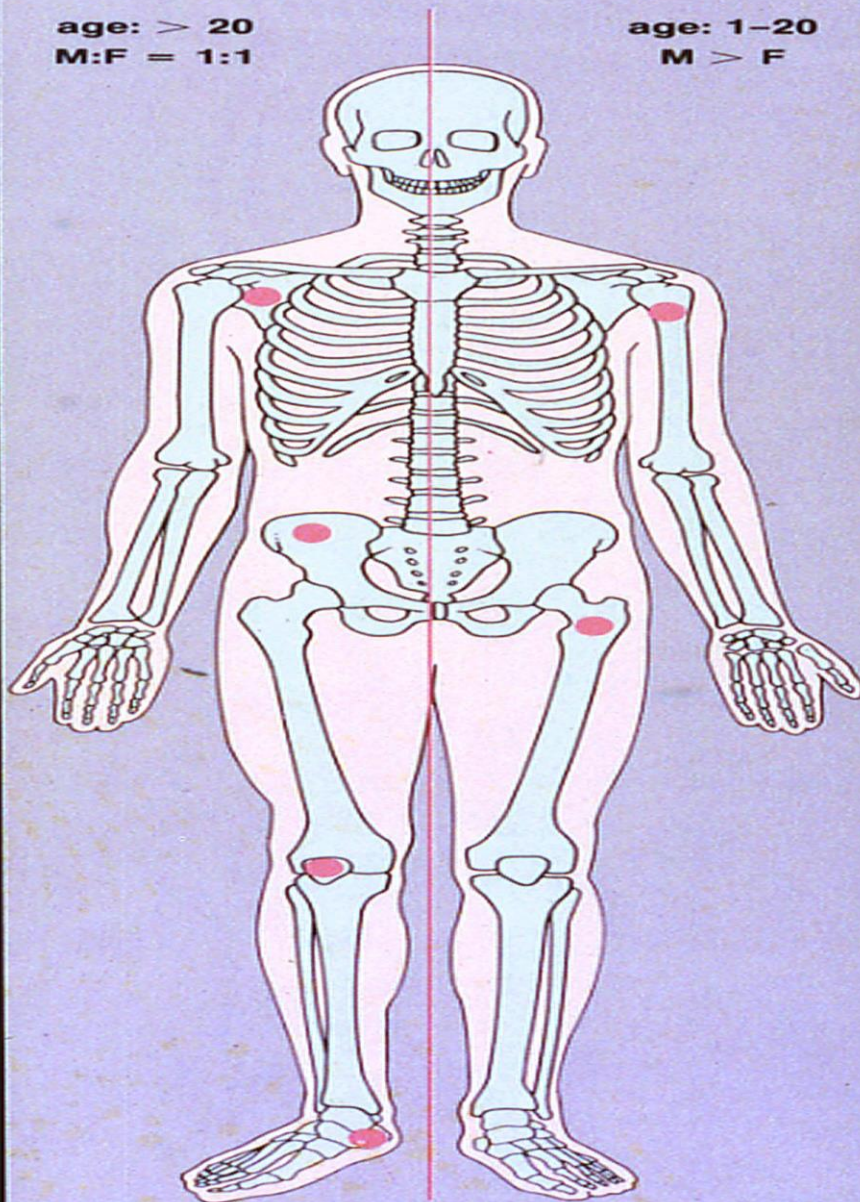
Aggressive/Malignant Process

permeative—
ill-defined
area spreading
through marrow
space

Simple Bone Cyst

age: > 20
M:F = 1:1

age: 1-20
M > F

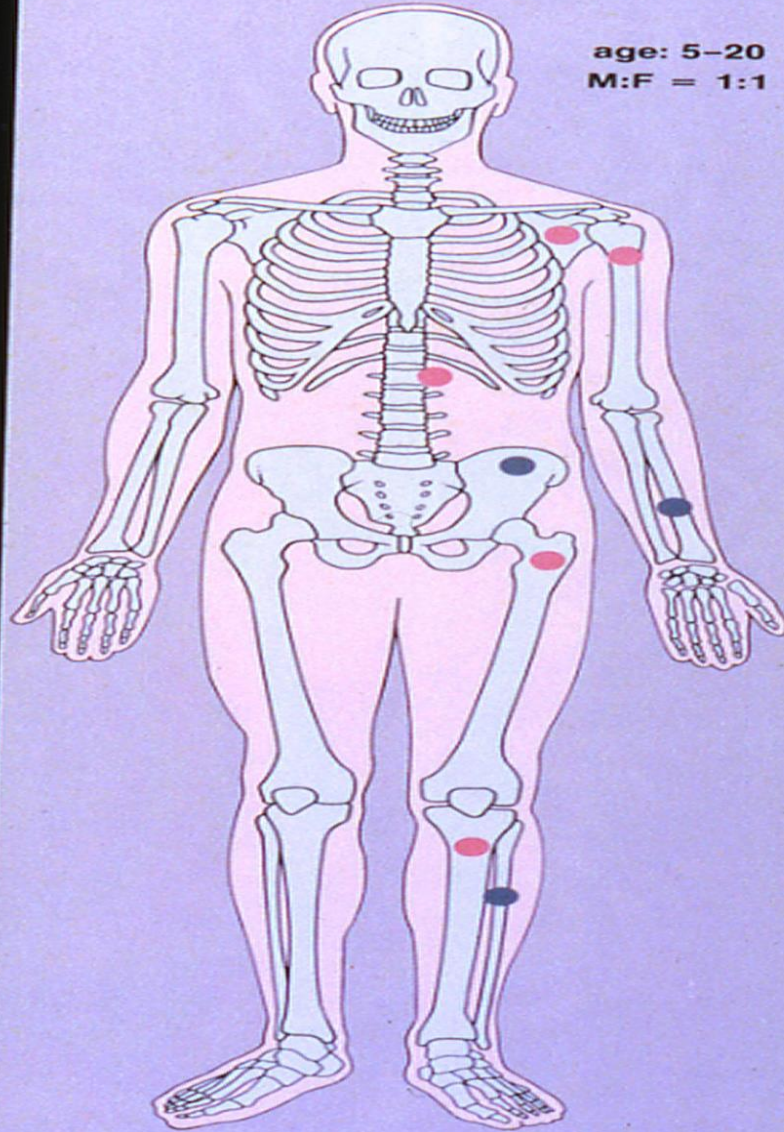






Aneurysmal Bone Cyst

age: 5-20

M:F = 1:1



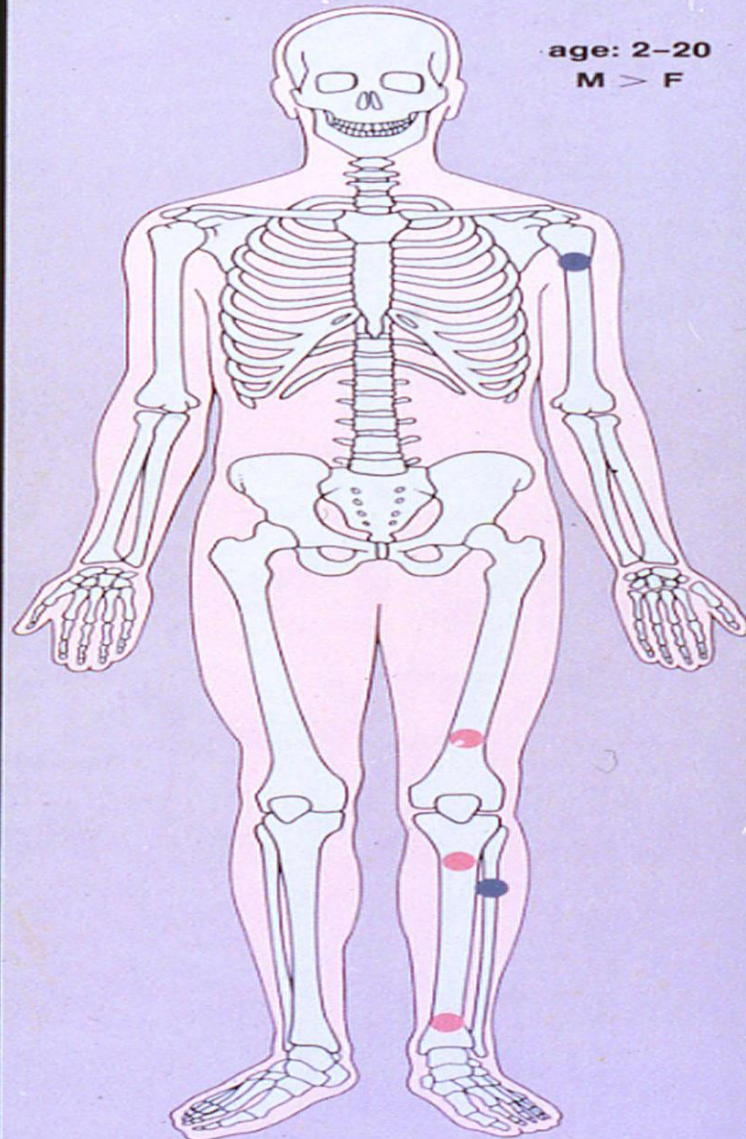
 common sites

 less common sites



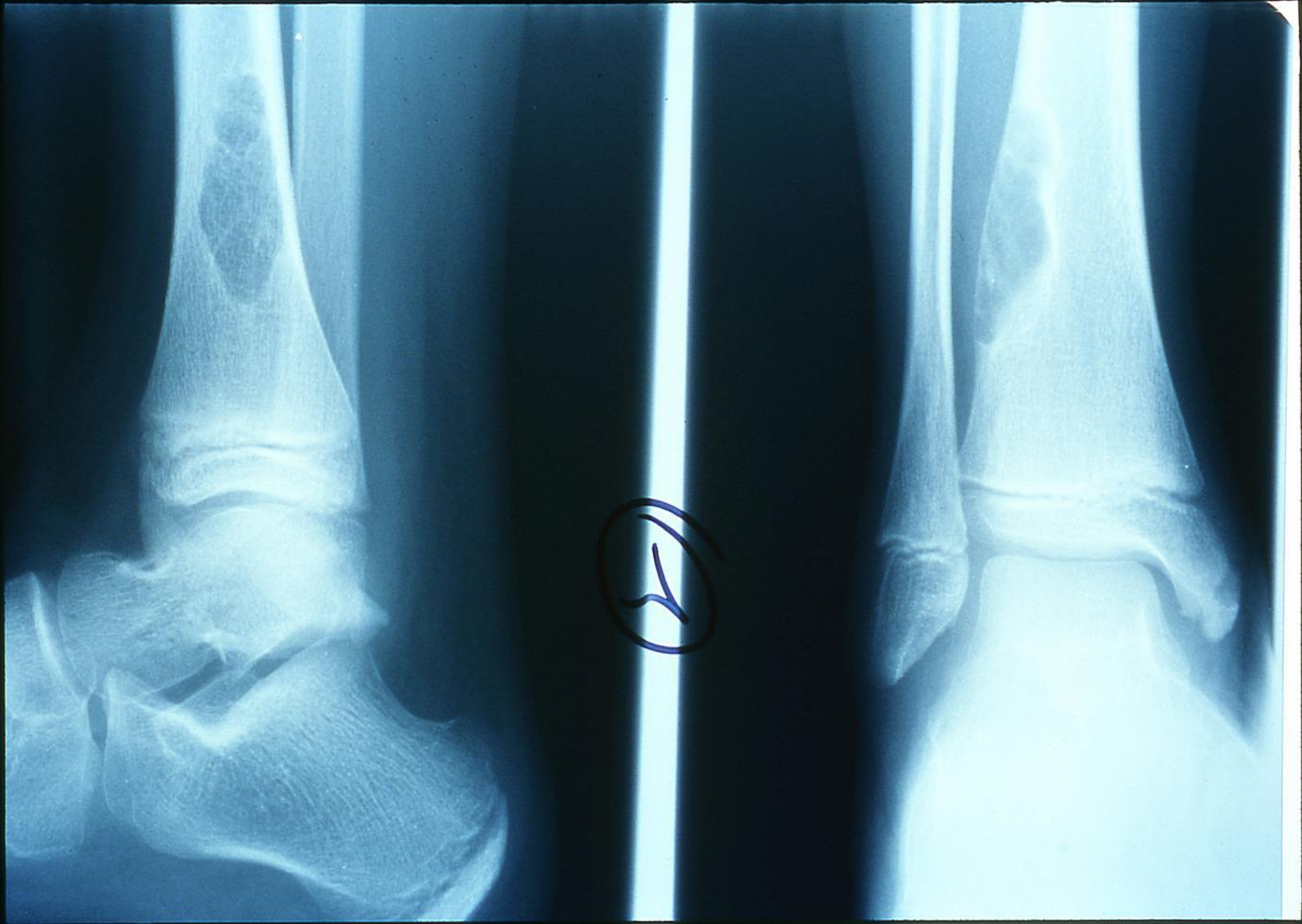
Fibrous Cortical Defect and Nonossifying Fibroma

age: 2-20
M > F



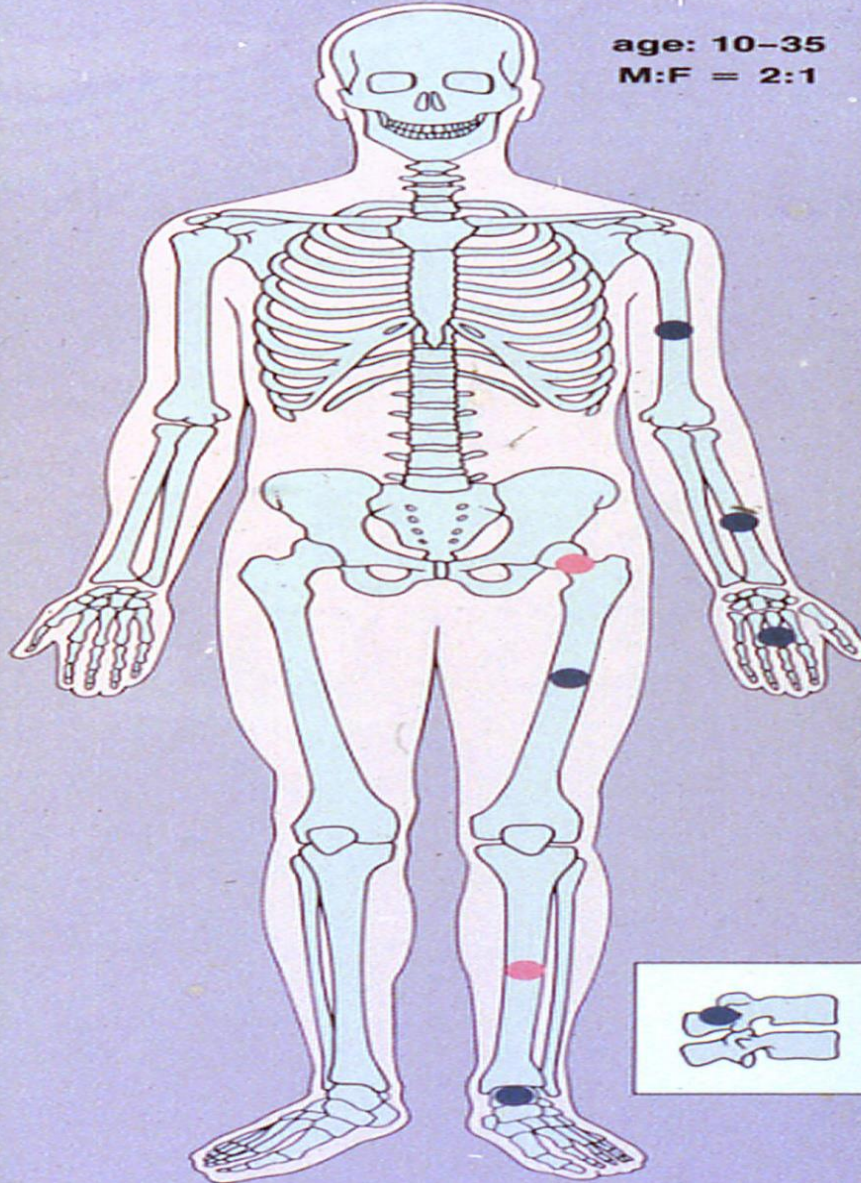
■ common sites
■ less common sites





Osteoid Osteoma

age: 10-35
M:F = 2:1

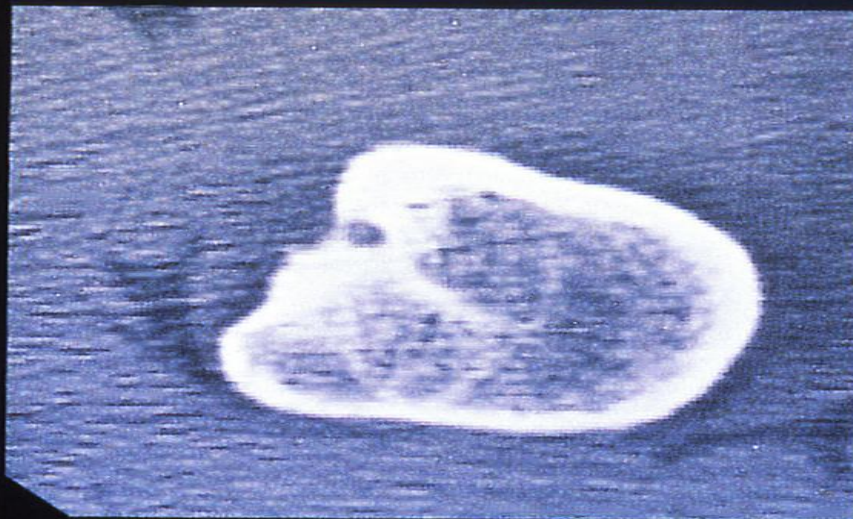


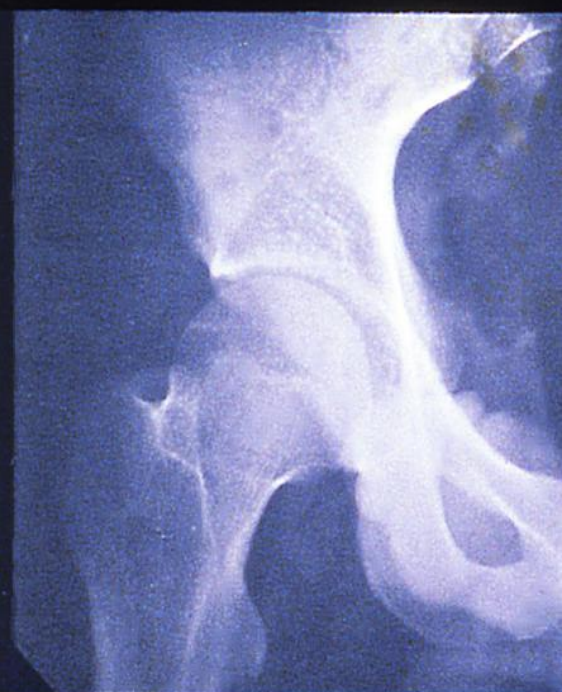
■ common sites
■ less common sites







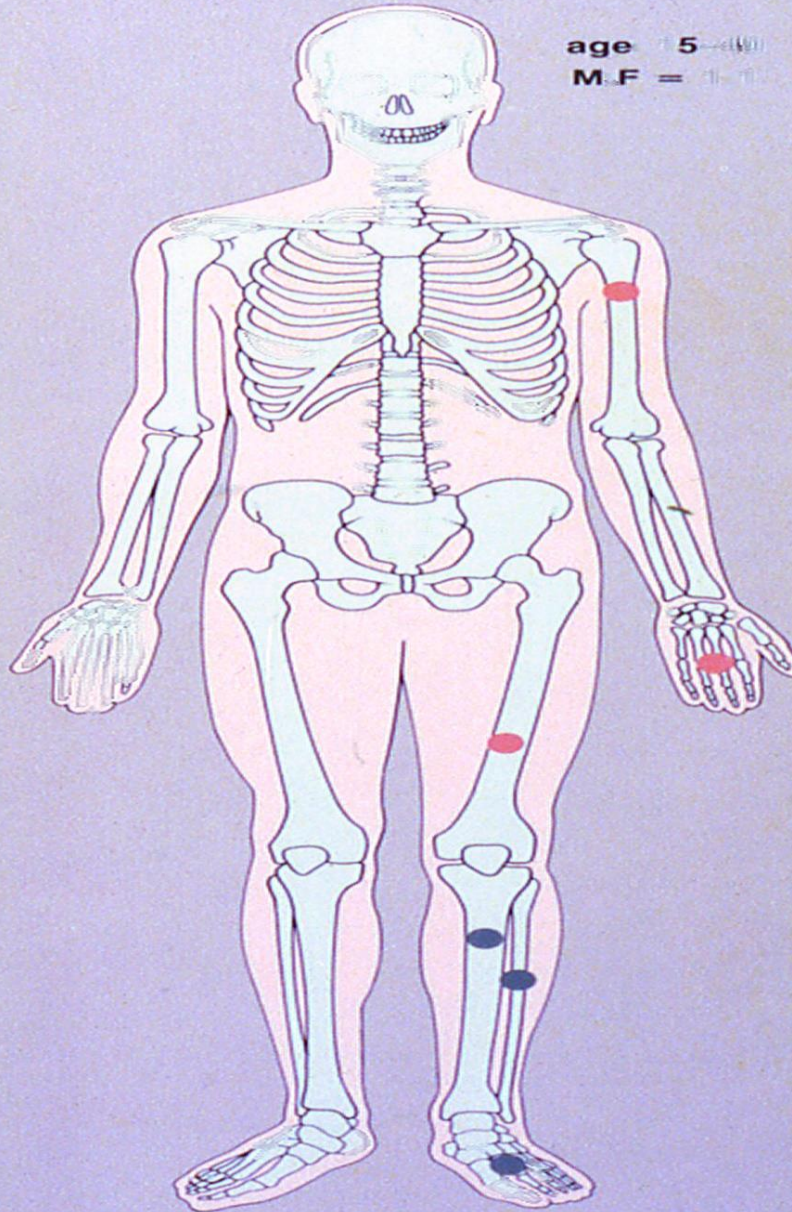





Ewing sarcoma

age 15-40

M.F = 1:1



 common sites

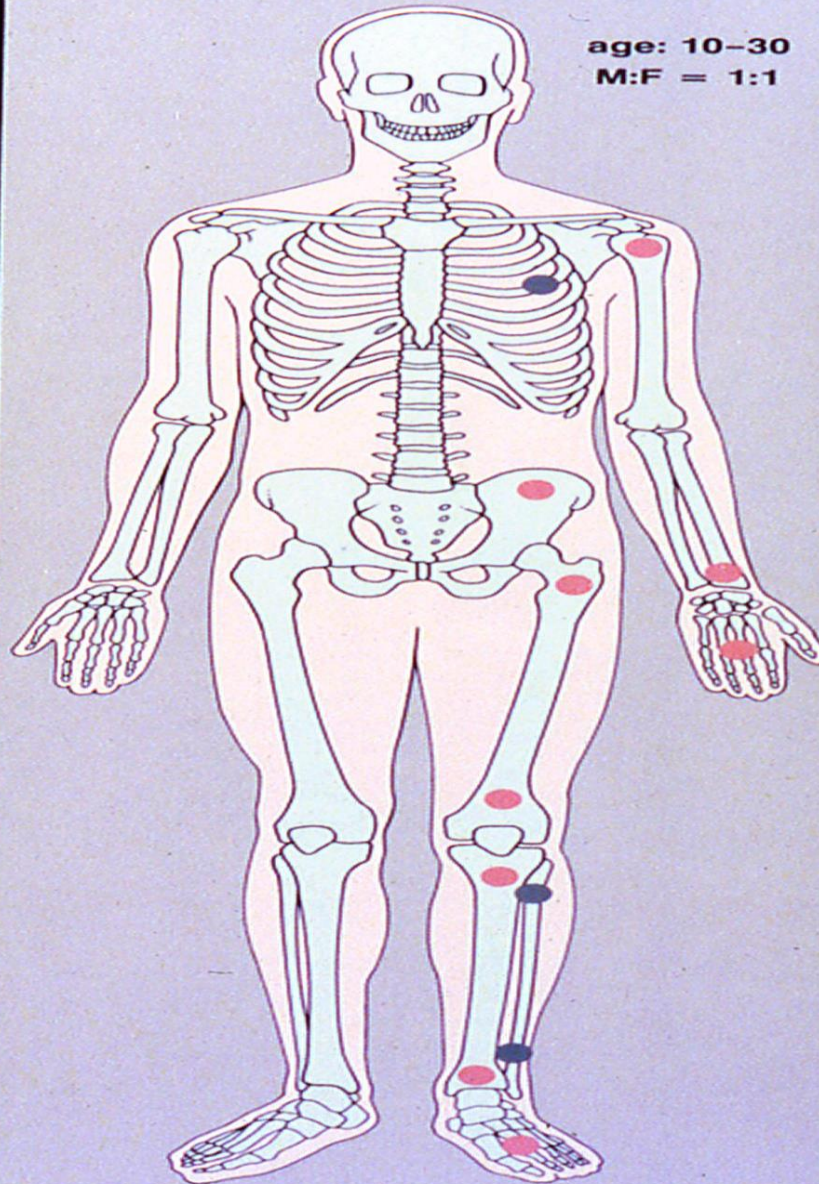
 less common sites





Enchondromatosis (Ollier's Disease)

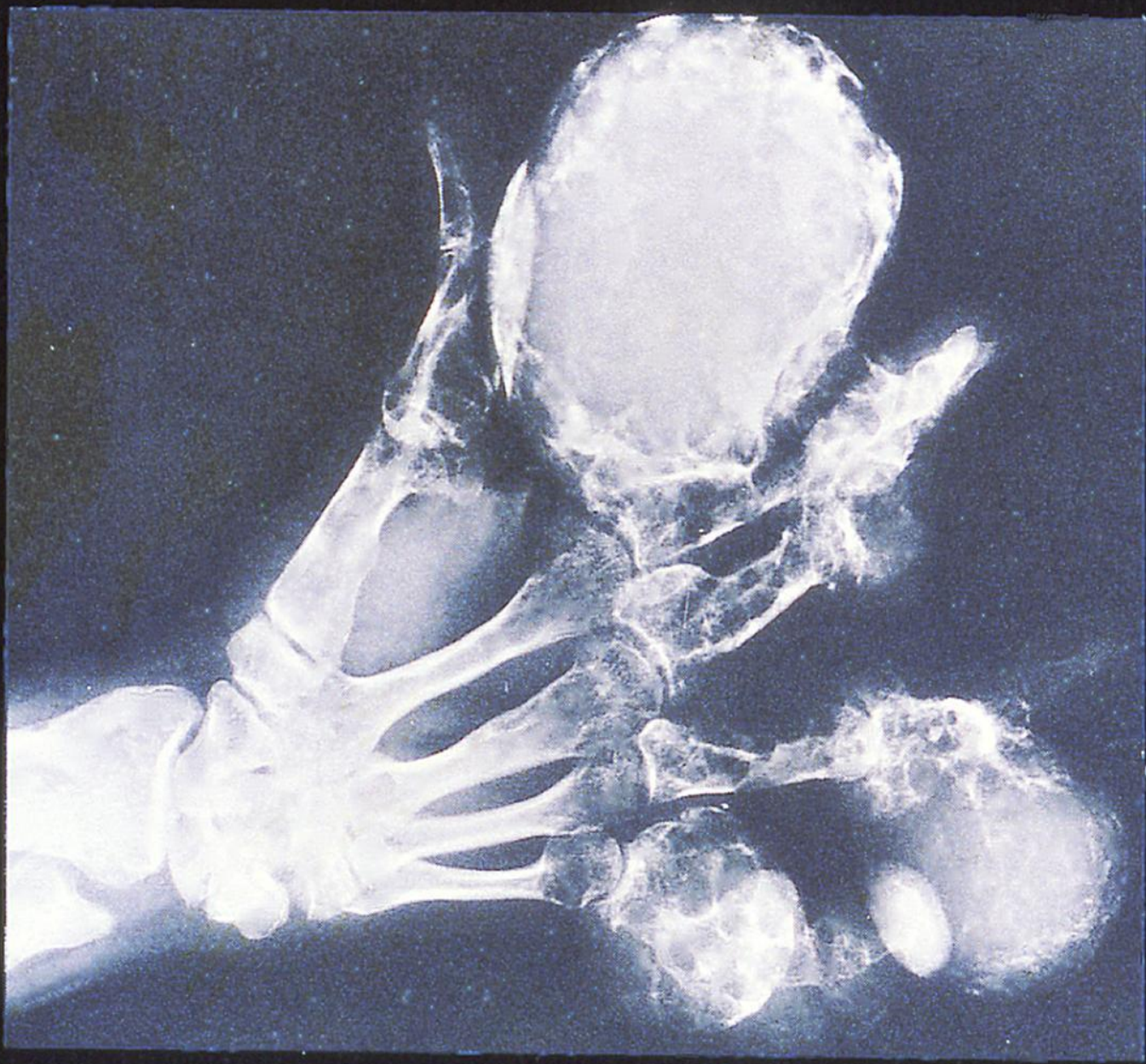
age: 10-30
M:F = 1:1



 common sites

 less common sites

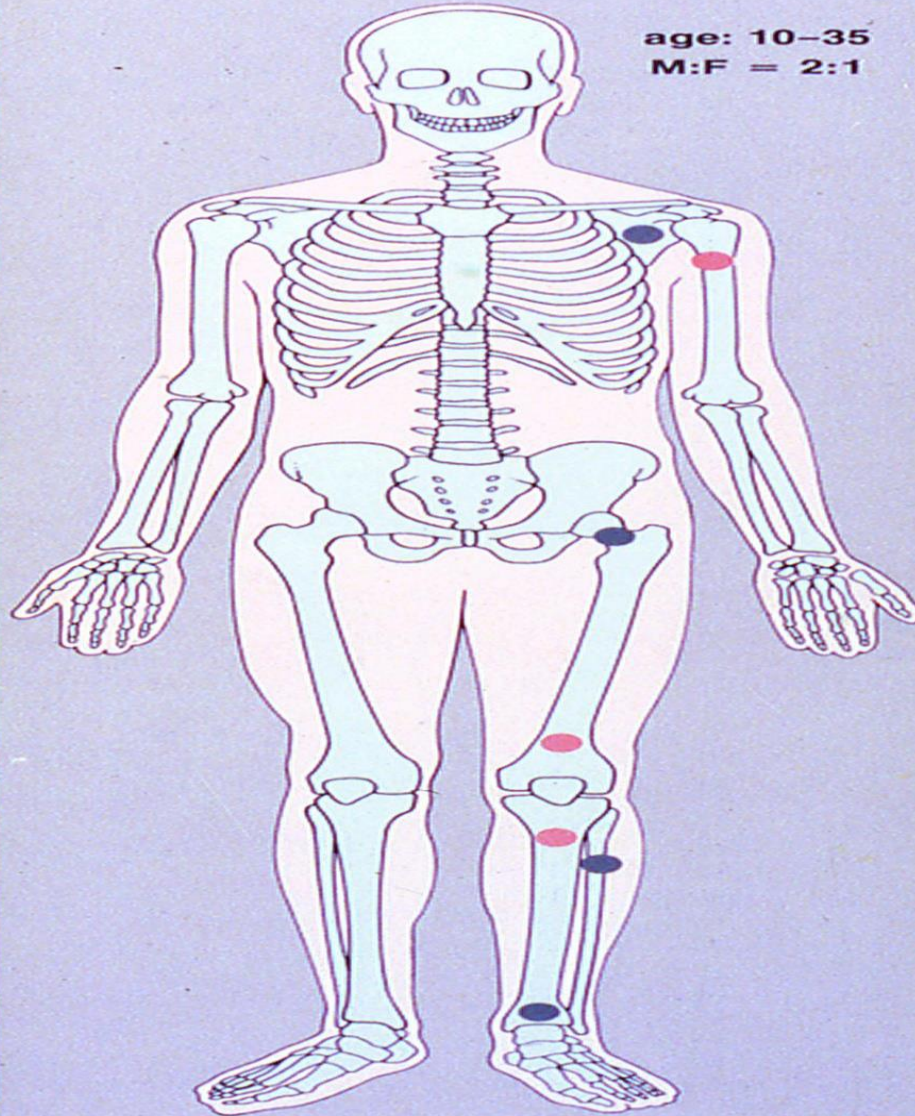





Osteochondroma

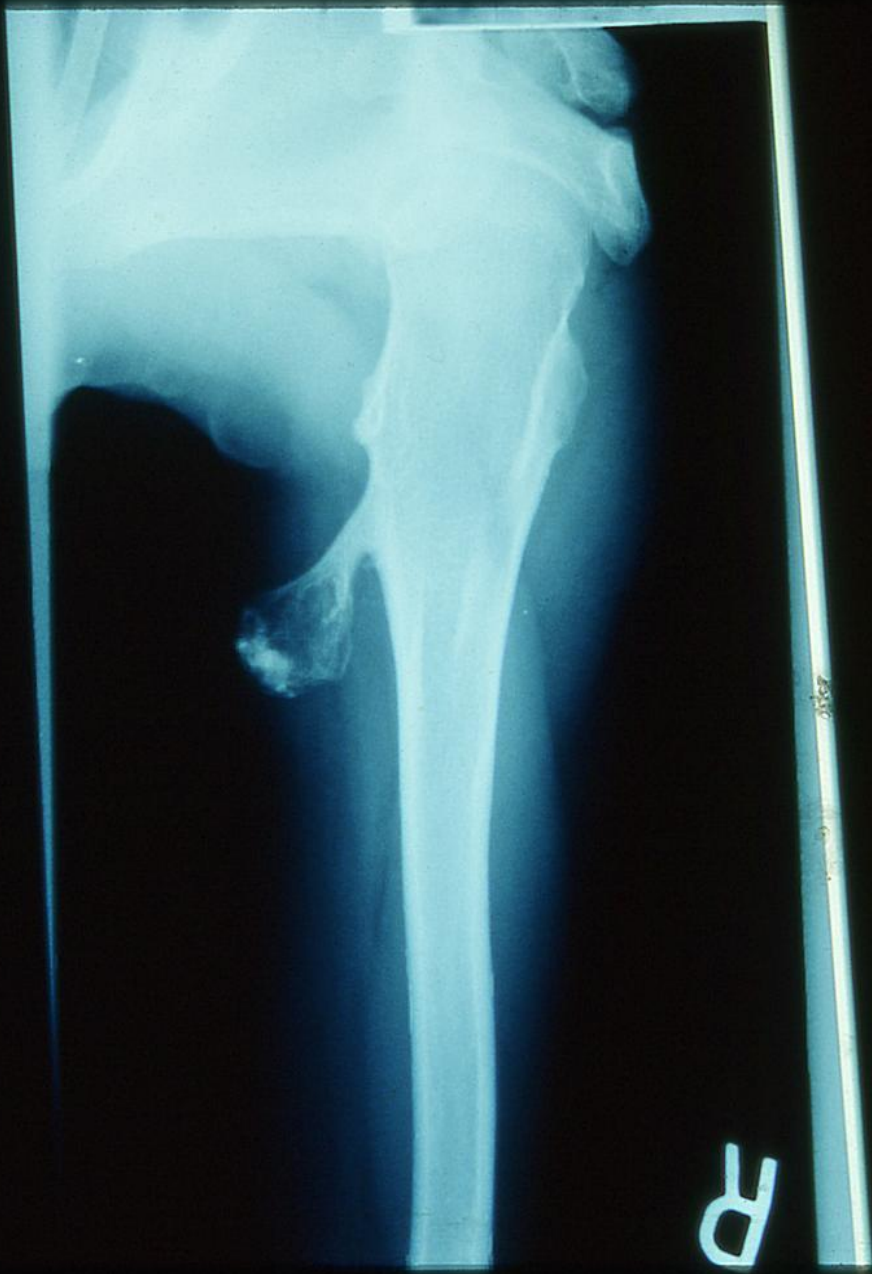
age: 10-35

M:F = 2:1



 common sites

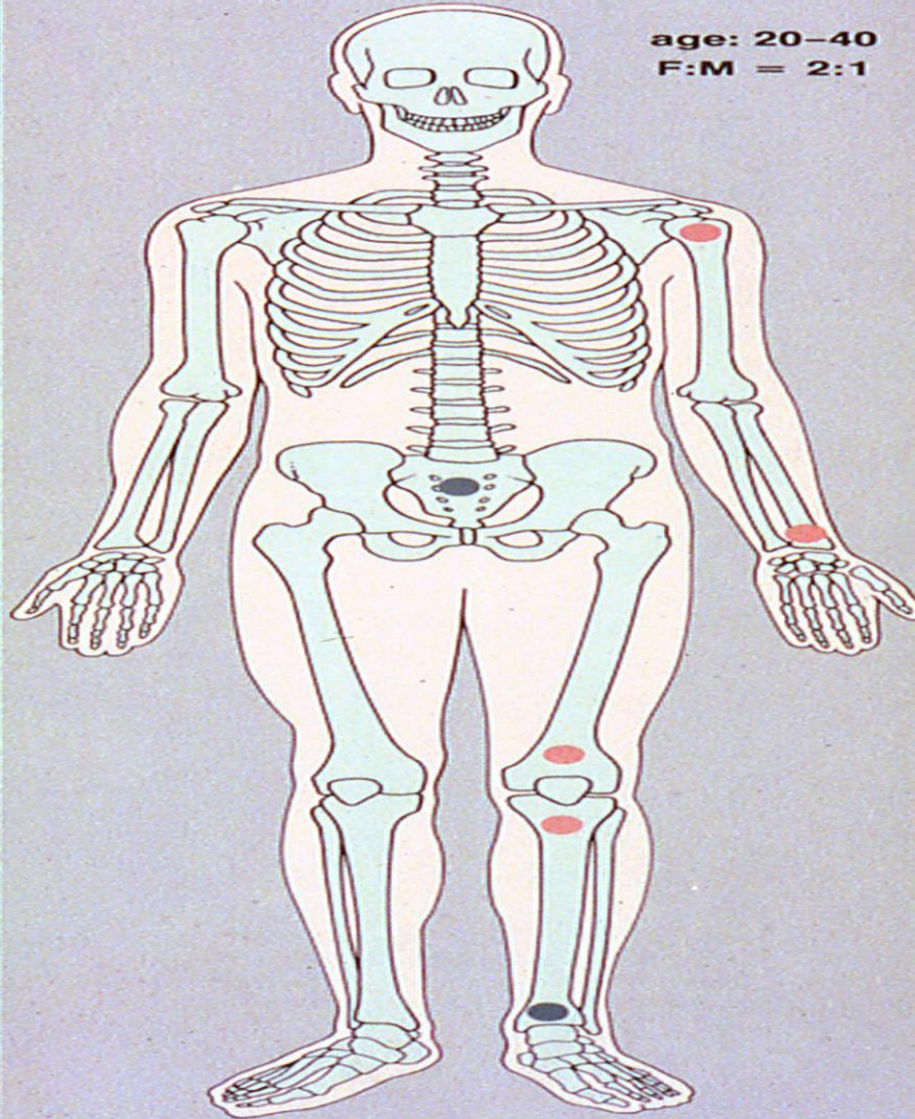
 less common sites




Giant Cell Tumor

age: 20-40

F:M = 2:1



 common sites

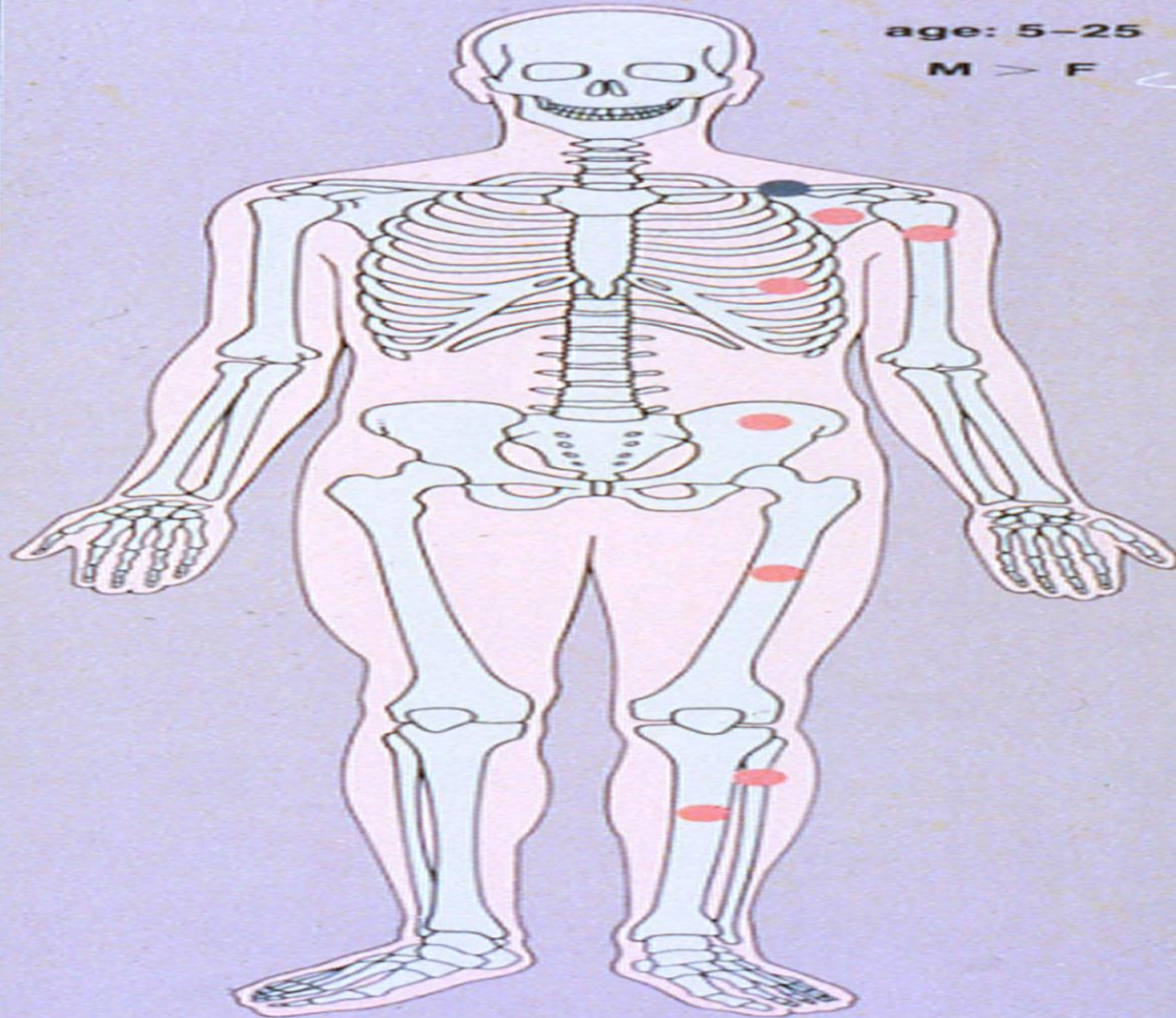
 less common sites




Ewing's Sarcoma

age: 5-25

M > F



 common sites

 less common sites





OSTEOSARCOMA

Primary

Conventional

**Low-Grade
Central**

Telangiectatic

**Multicentric
(Multifocal)**

Juxtacortical

Secondary

malignant
transformation
of benign
conditions

**Paget's
Sarcoma**

**Postradiation
Sarcoma**

Metastatic

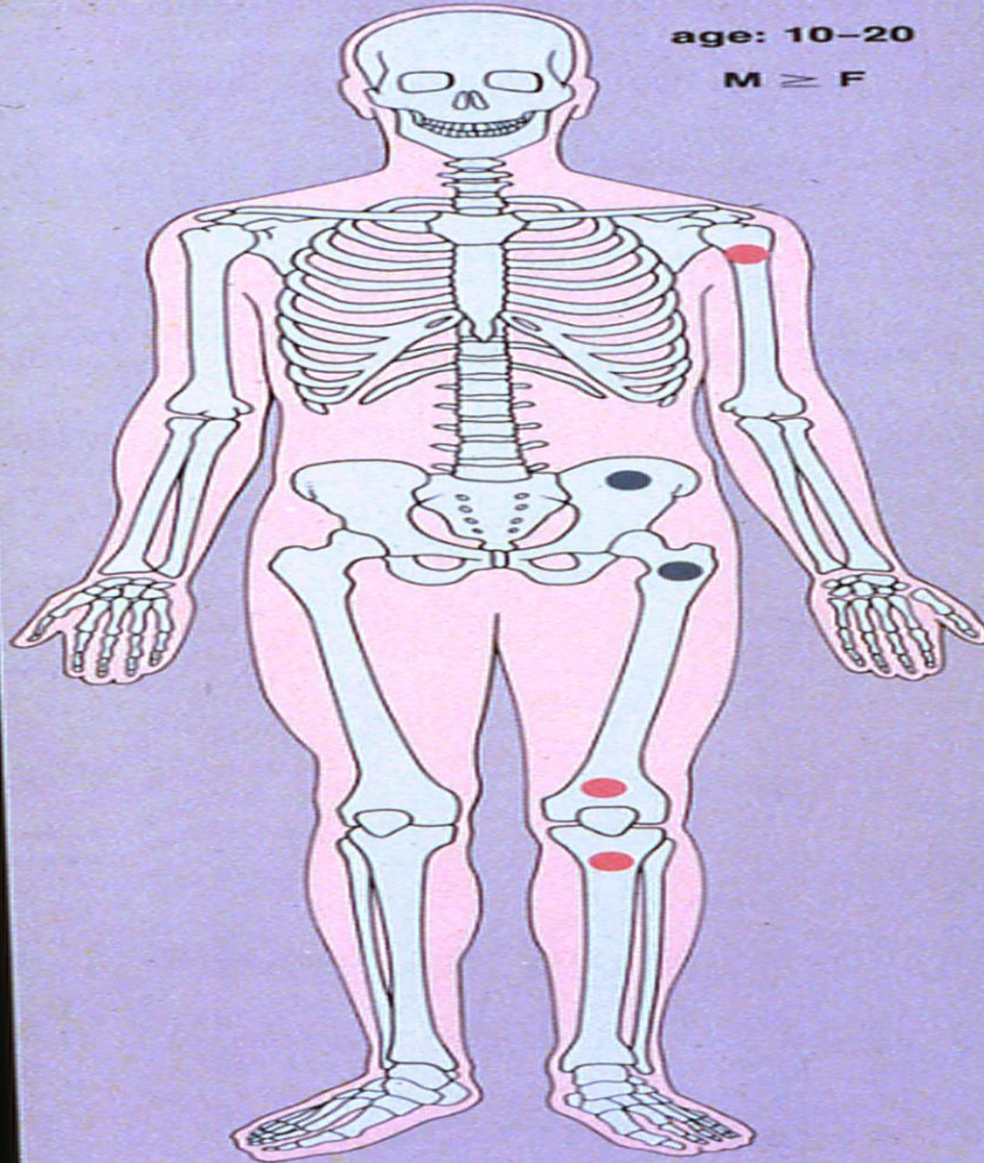
Lungs

Bones

Conventional Osteosarcoma

age: 10-20

M ≈ F



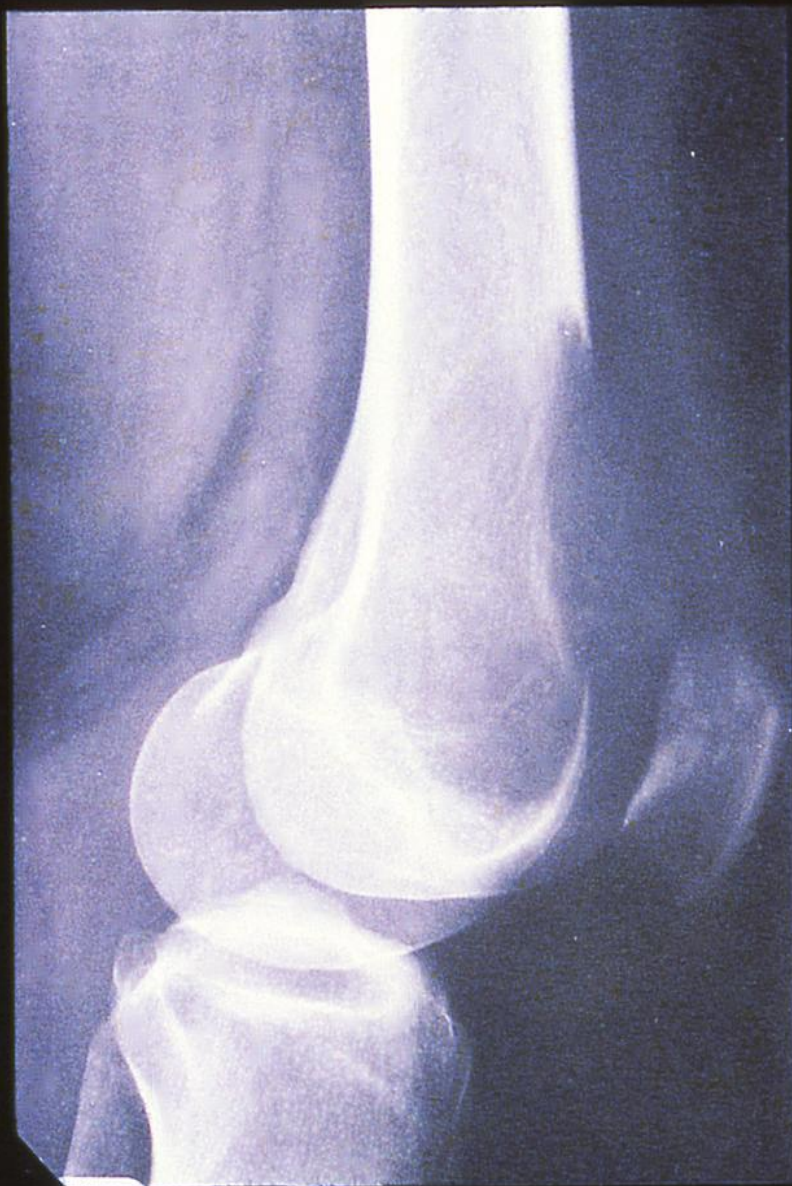
 common sites

 less common sites



100000 1-5-90
DR. J. H. HARRIS, JR.
RADIOLOGICAL DEPARTMENT
UNIVERSITY OF ALABAMA
MEDICAL CENTER
BIRMINGHAM, AL 35294





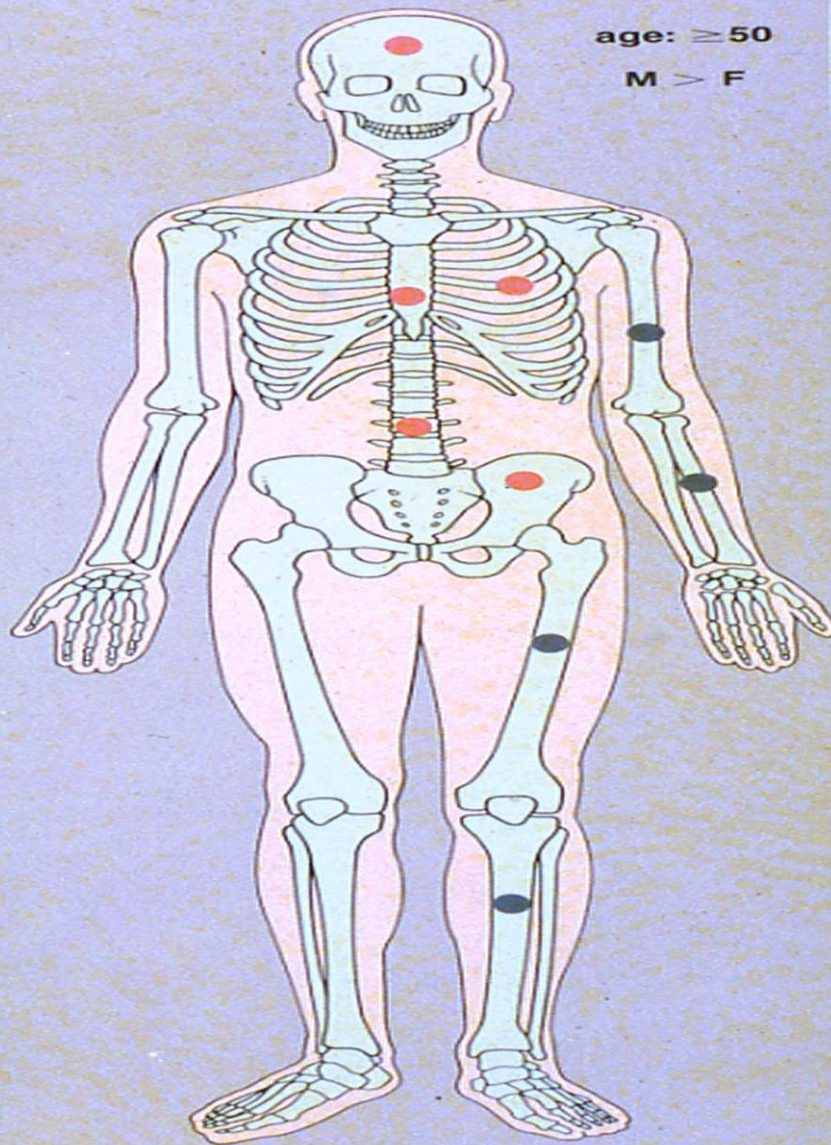




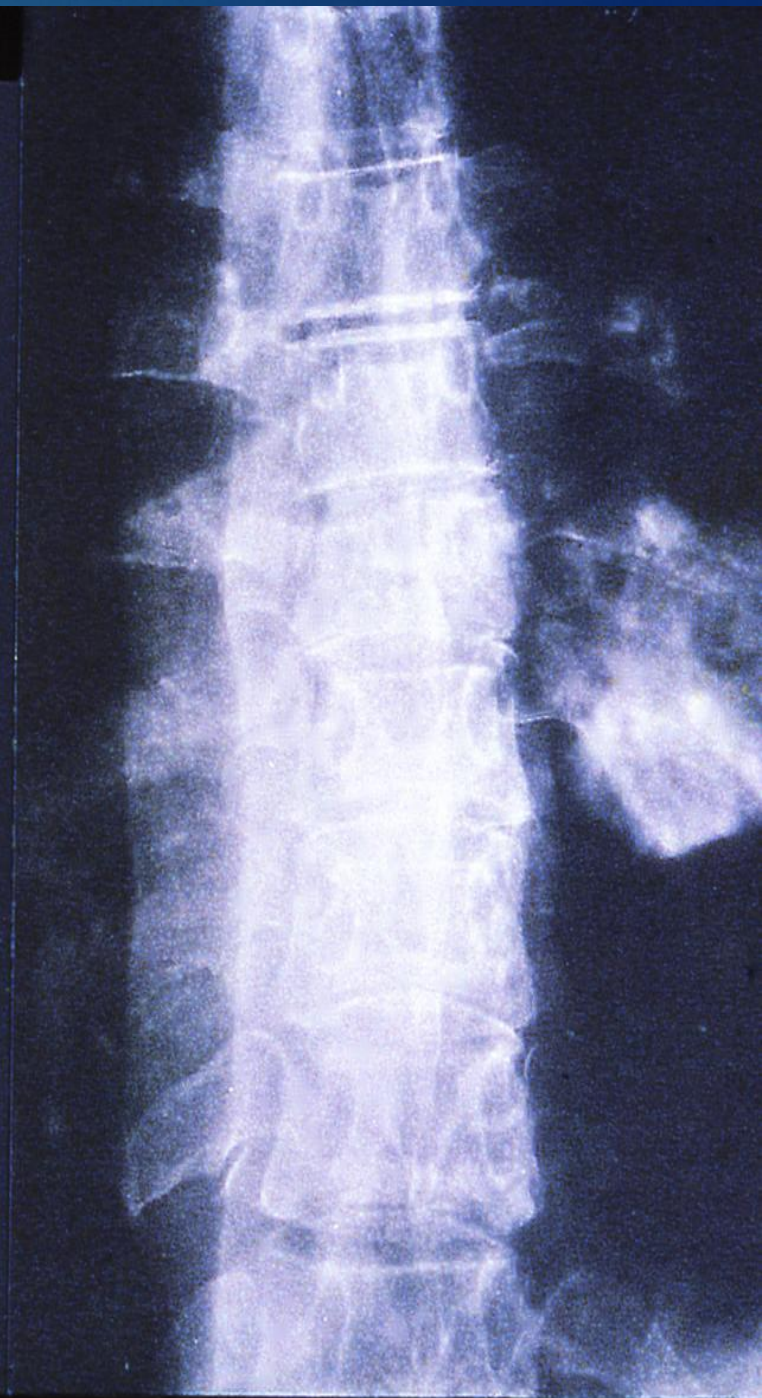
Myeloma

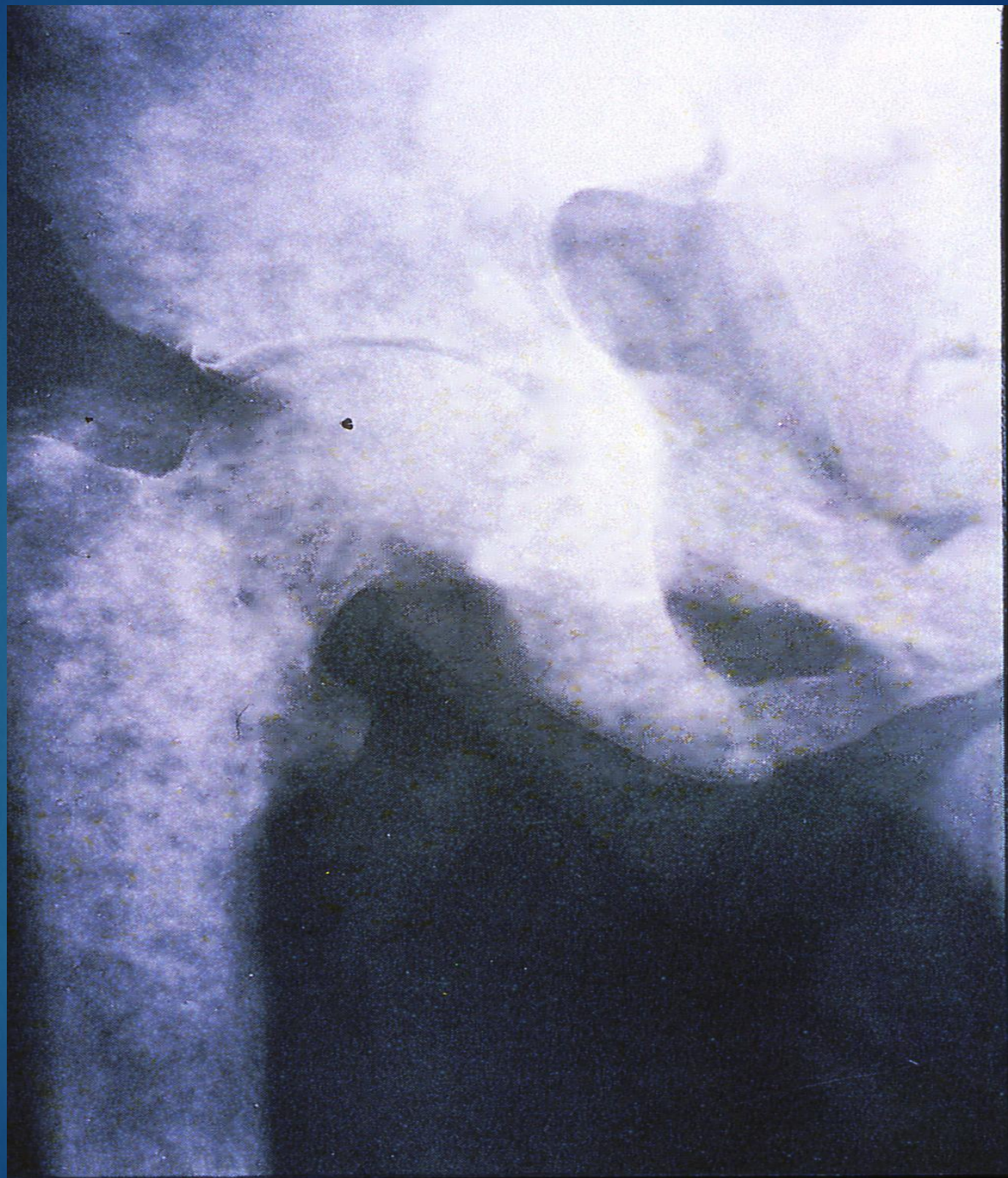
age: ≥ 50

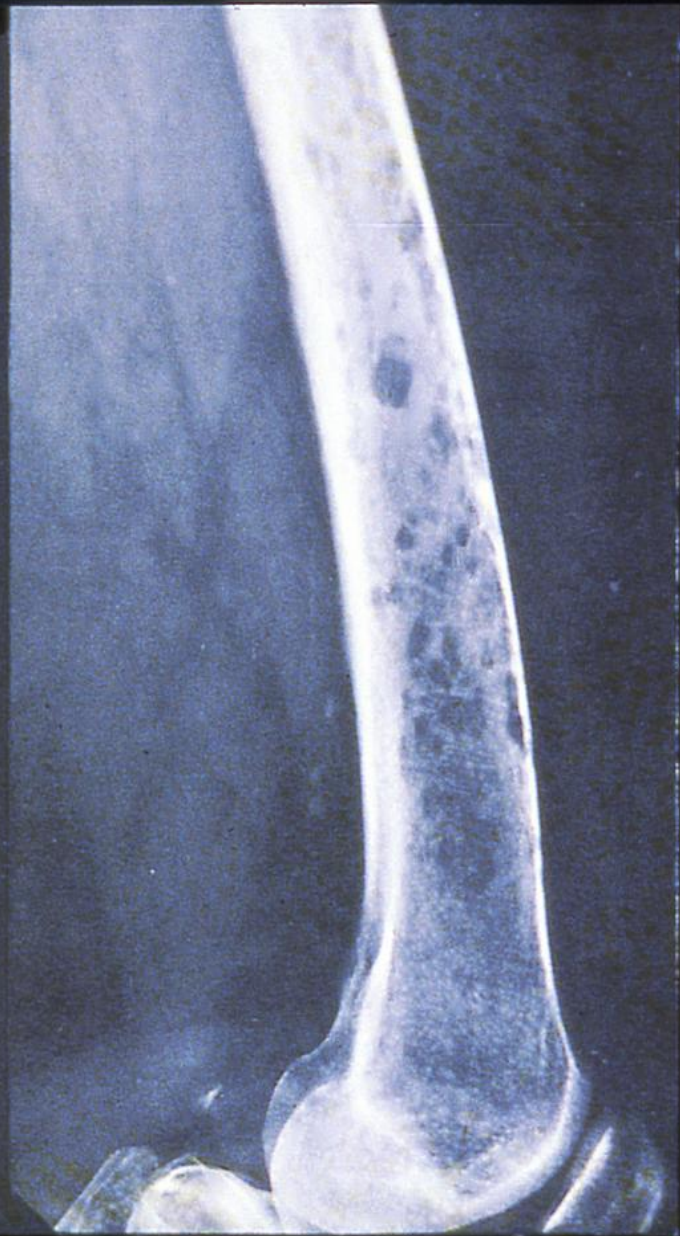
M > F

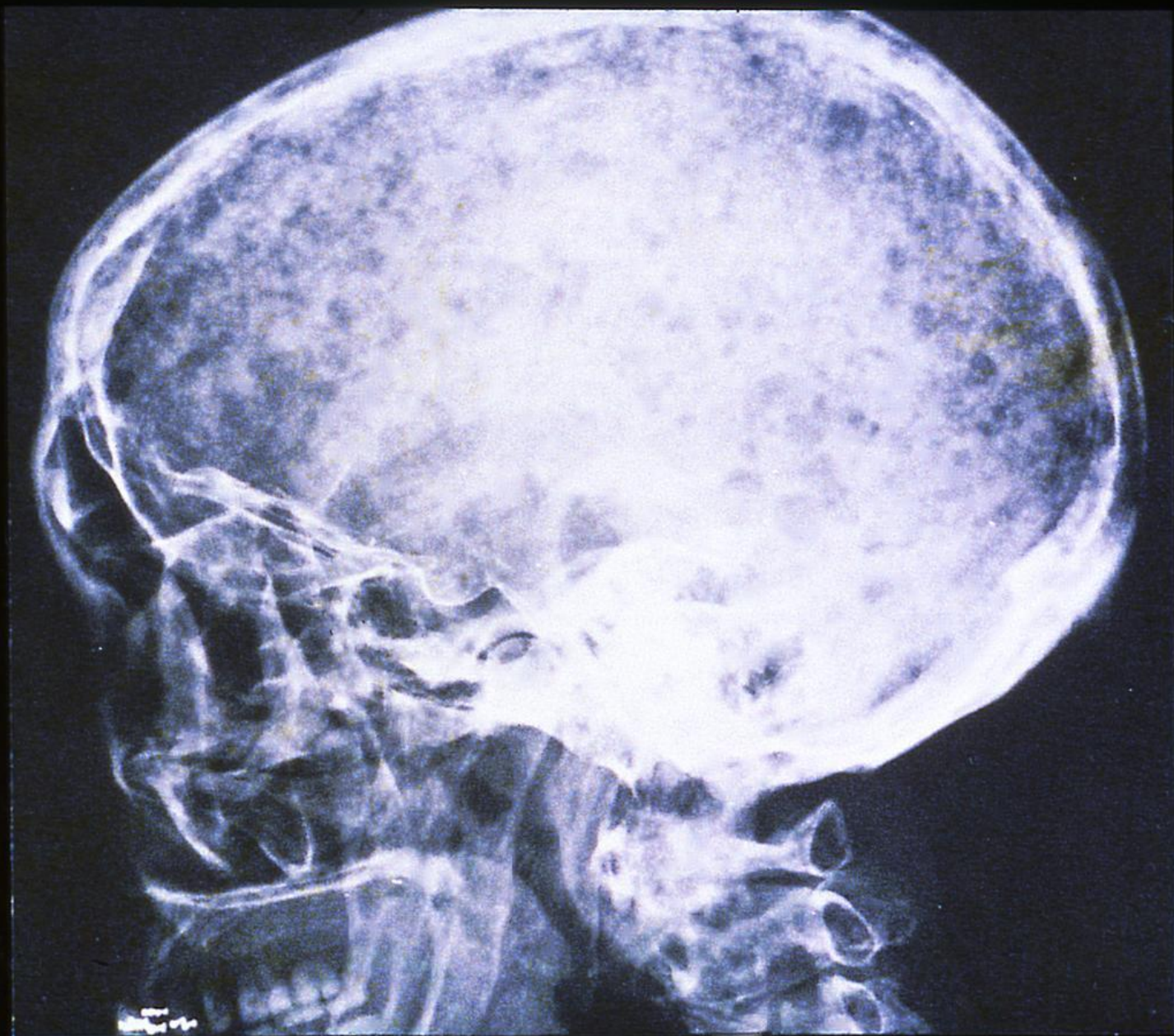


 common sites
 less common sites



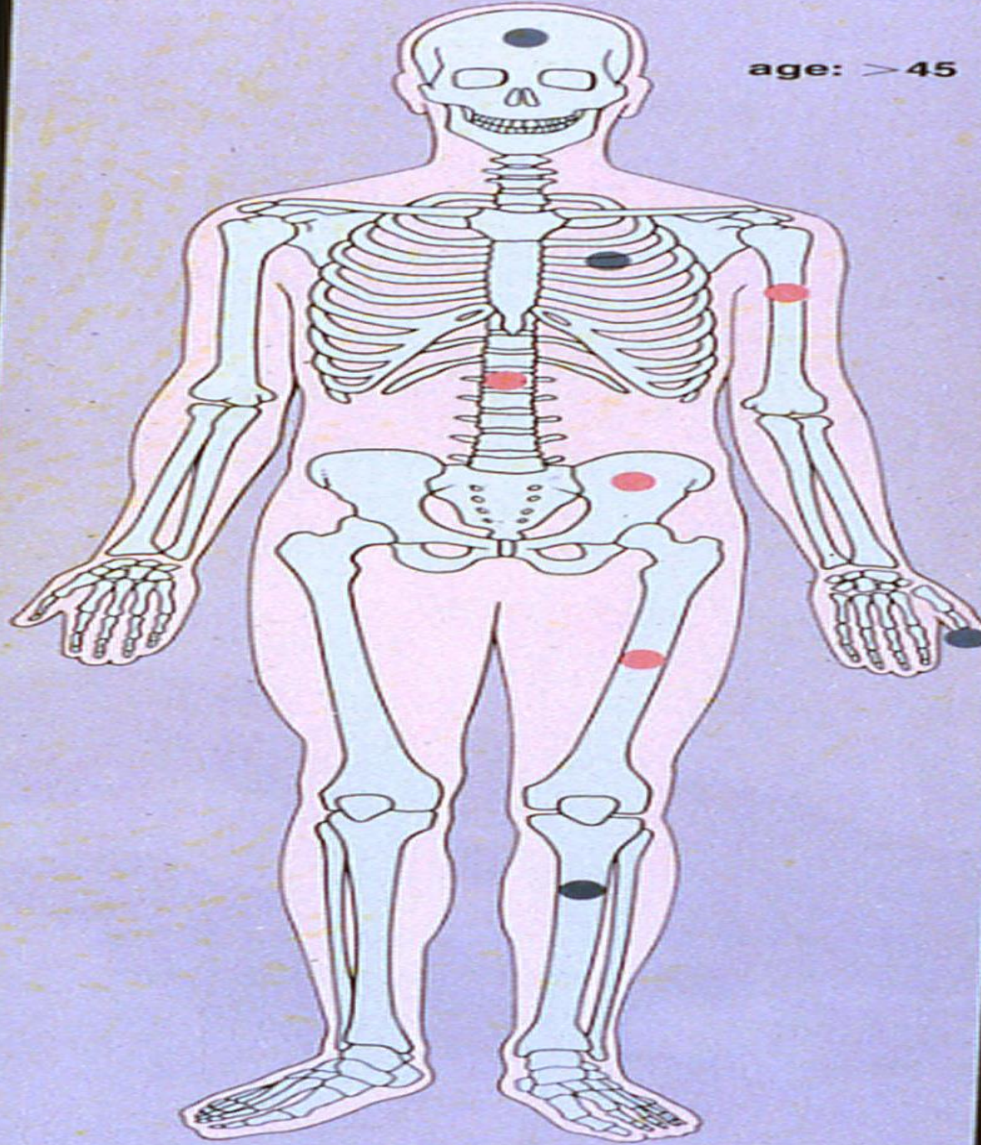








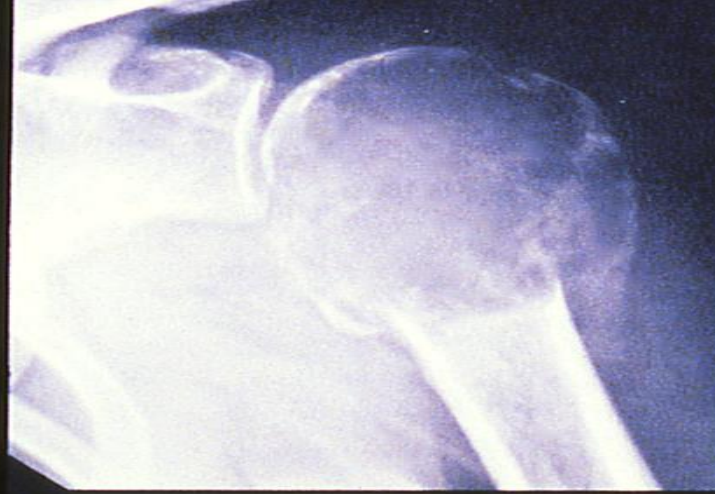
Metastatic Lesions

age: >45



 common sites

 less common sites



1 1 1 .81

