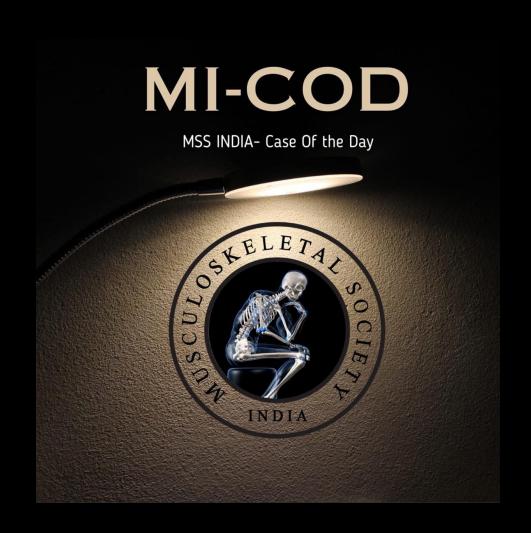
MICOD – 13/09/2023 Case contributor – Dr. Sonal Saran



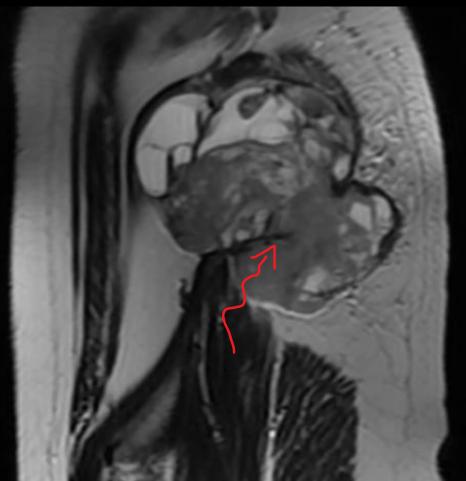
History

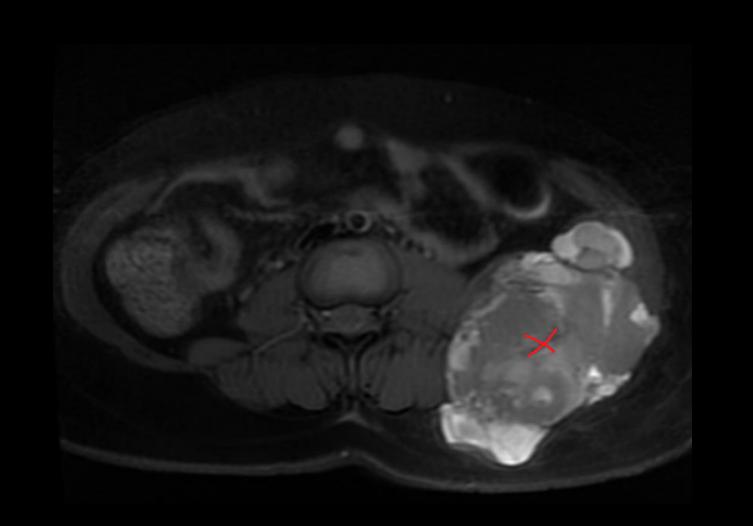
- 40 year old female.
- H/o swelling over left lower back
- Associated with mild pain relieved on painkillers.
- Gradually increased in size to around 10x10 cm over 4 months.
- No history of swelling elsewhere in the body
- No history of overlying skin changes or discharge from the swelling

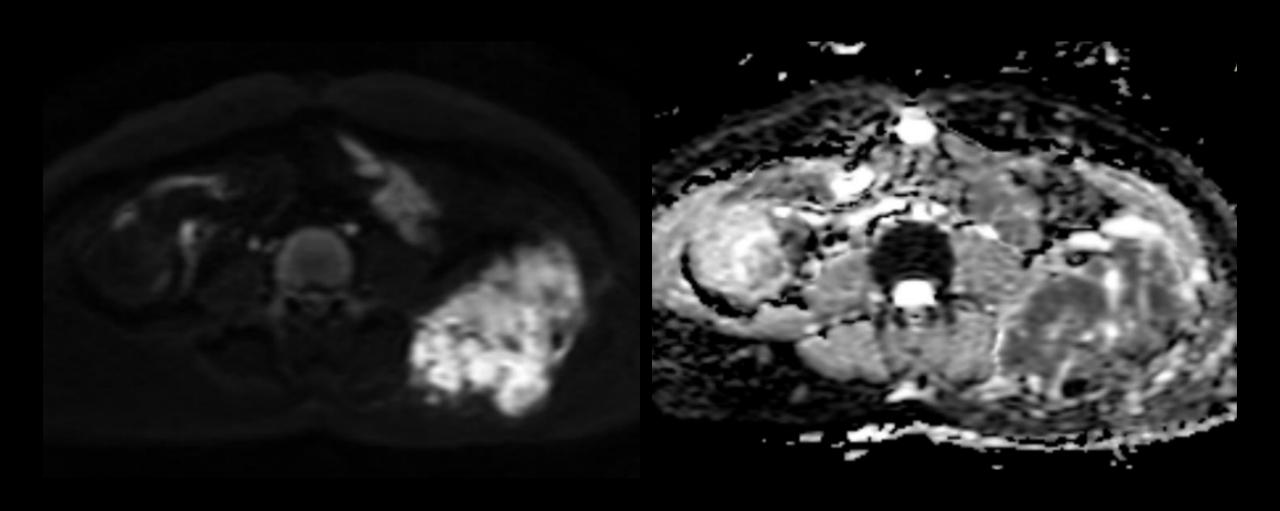
Local examination

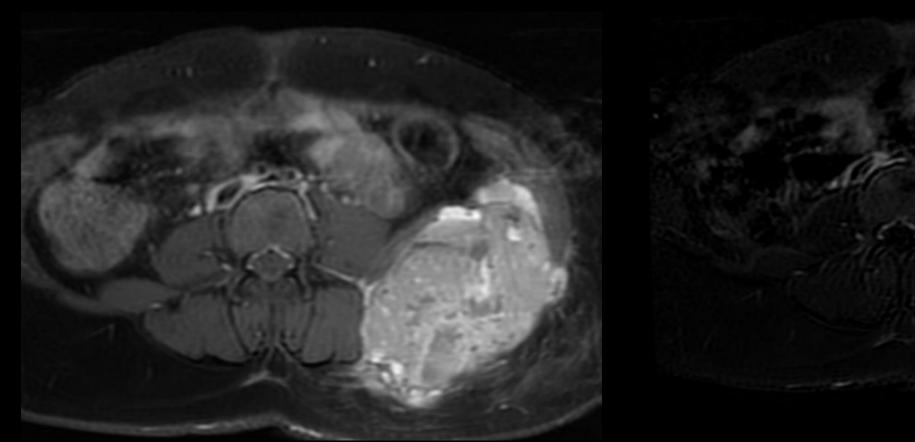
- A single parietal wall swelling of size 10x10cm palpable in the left lower back.
- Non-tender, smooth surface and ill defined margins, firm consistency.
- No localized rise of temperature, no overlying skin changes, non-mobile swelling.

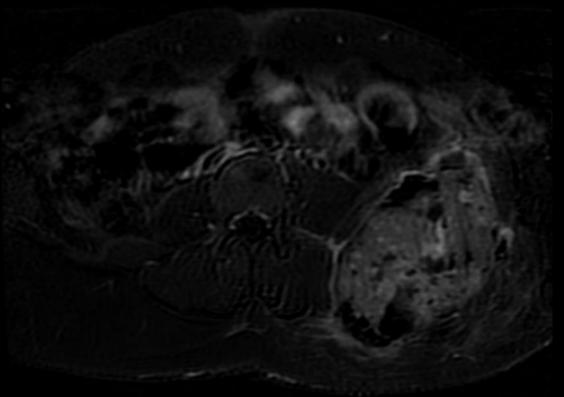












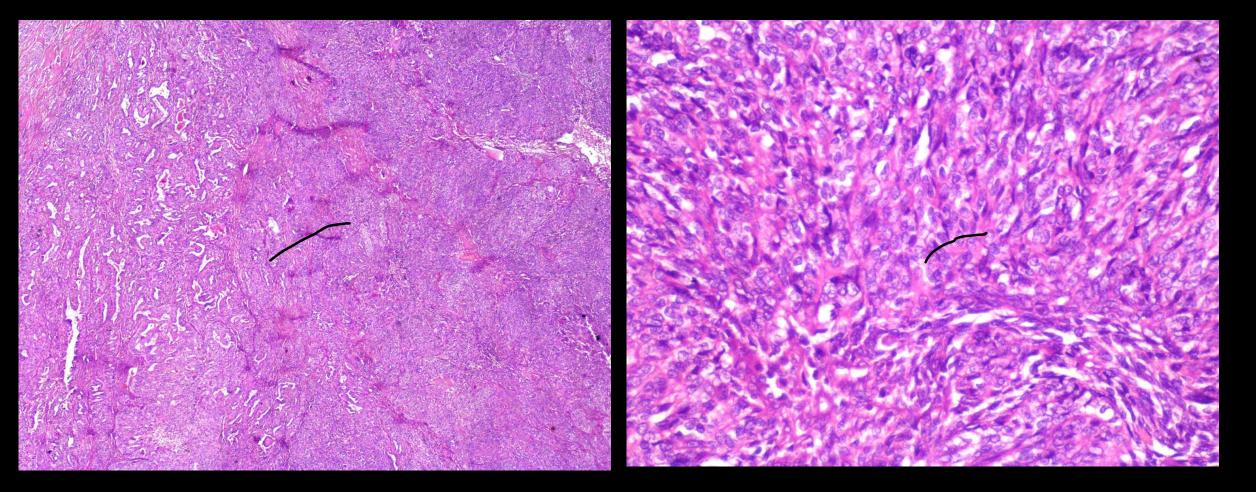
Surgical management

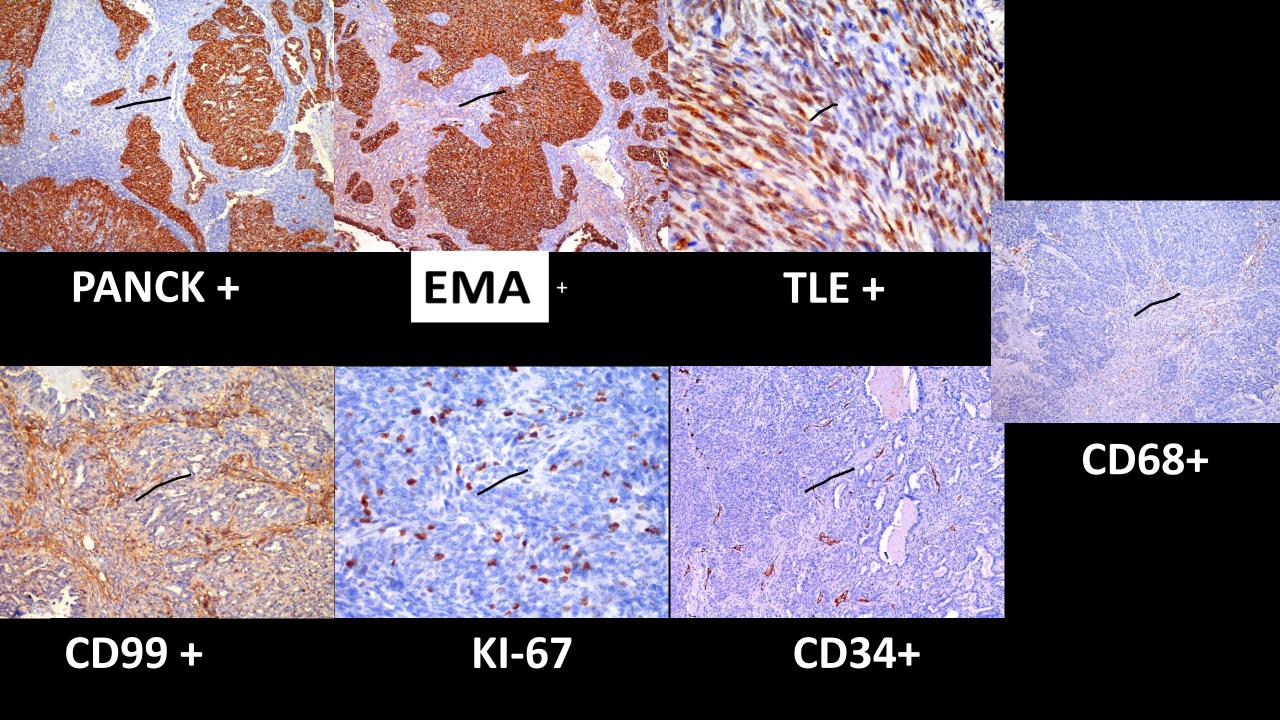
- Procedure: Wide Local Excision with meshplasty under
- 10x10x10cm soft tissue tumour arising from the muscle layers
- Superiorly: left 12th rib medially: para spinal muscles inferiorly: iliac crest and laterally external oblique muscle
- Muscular Defect overlapped with the help of composite mesh.



Gross







Diagnosis

Biphasic synovial sarcoma of abdominal wall

Discussion

- Synovial Sarcoma: rare malignancy (1.42 per million)
- Soft tissue sarcoma of uncertain differentiation
- Younger age of onset (mean age:39yrs)
- Affects males and females equally.
- Most commonly present near the articular structures: highest near the knee joint.
- Usually slow growing with a mean duration of symptoms before diagnosis is 2 years.
- Pain or contractures near the joint
- Commonly misinterpreted as benign processes such as myositis, synovitis, bursitis.

Synovial Sarcoma of the Abdominal Wall

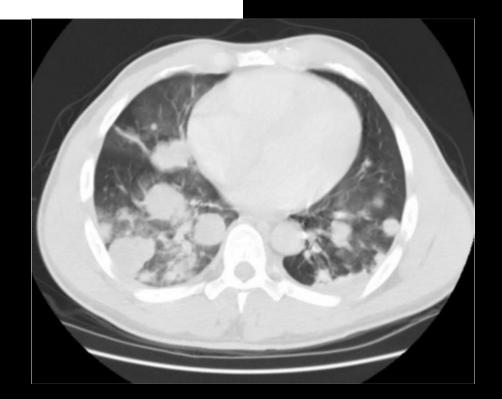
Jeanine McNeill, M.D.¹ and Y. Vien Nguyen, B.S.²

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Abstract Go to: ▶

We present the case of a 43-year-old man who presented with metastatic abdominal wall synovial sarcoma. CT of the abdomen showed a 6 cm anterior abdominal wall mass with a nodular, non-homogeneous pattern of enhancement. A chest radiograph showed metastases to the lungs.





Synovial Sarcoma of Anterior Abdominal Wall

Abstract

Primary synovial sarcoma arising in the anterior abdominal wall is rare and is a rare extra-articular tumor site. It should be considered in the differential diagnosis of anterior abdominal wall masses. It is a rare malignant mesenchymal tumor. It commonly occurs in adults in the extremities in close association with joint capsule, tendon sheaths, bursae and fascial structures. Synovial sarcoma is derived from multipotent stem cells, which can differentiate into mesenchyma and epithelial structures. Three subtypes are described histologically -biphasic, monophasic, and poorly differentiated synovial sarcoma. We report a case of a 40-year-old male patient presented with swelling over the anterior abdominal wall on the right side in the lower abdomen for 1 month which was rapidly increasing in size. An ultrasound followed by computed tomography and magnetic resonance imaging of the abdomen were performed for knowing the extent of the tumor. Immunohistochemistry was suggestive of monophasic synovial sarcoma.

