

Pt. Name:	عبيد عبيد يحيى مبارك		Lab Number:	2940-2026	
Pt. Age:	45 years.	Gender:	Male	Received date:	2026-05-03
Referred By:	د/عمار قداري		Reported date:	2026-05-08	

PATHOLOGY REPORT

Clinical Information.	Large lobulated, complex sellar and suprasellar mass showing both solid and proteinaceous cystic components; the lesion causes significant expansion and destruction of the sella turcica, invades the sphenoid and ethmoid sinuses and clivus, and exerts severe mass effect including encasement of the internal carotid arteries, compression of the optic apparatus and brainstem, and a midline shift with early subfalcine herniation, a clinical picture highly suggestive of a craniopharyngioma or an aggressive pituitary neoplasm.
Nature of specimen.	Brain biopsy.

GROSS:

Soft tissue fragments collectively measured 4.5x3.8x1.5 cm, totally embedded.

MICROSCOPIC:

Highly vascular pituitary neuroendocrine tumor composed of dense trabeculae and solid sheets of proliferating pleomorphic cells. The tumor exhibits high cellularity with cells arranged in perivascular pseudorosettes. Tumor cells display eosinophilic to amphophilic cytoplasm with prominent nucleoli. Foci of interstitial hemorrhage are present.

?To determine the grade and risk of recurrence for such a large, radiologically invasive mass, the following immunohistochemical markers are recommended : Ki-67 and P53.

DIAGNOSIS:

Sellar and suprasellar mass, biopsy:

- Pituitary Tumor, clinically aggressive
- Recommended for marker study to assess exact malignant potential.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
08-05-2026

Nerveen Tahoun