AMERICAN ASSOCIATION OF

NEUROPATHOLOGISTS



Diagnostic Slide Seminar 2022

Case # 6



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Clinical history

A 38-year-old woman originally presented at age of 23, with a 3-week history of diffuse headache between her eyes.

The MRI showed a well-defined lobulated mass within the right temporal lobe, with stippled enhancement and multiple small foci of calcification.

The patient underwent a partial resection of the lesion



Histologic findings (Diagnosis at that time: Oligodendroglioma)



Follow-up

She had a stable clinical course + neuroimaging, without any chemo-radiation therapy

After 15 years, she started having a progressive headache.

The MRI showed an increase of the residual lesion (4.6 cm) with peripheral enhancement and coarse foci of calcification.

The patient underwent a second resection



Histologic findings



Diagnosis?

Summary

SIMILAR HISTOLOGICAL FEATURES IN BOTH RESECTIONS

- Variable cellularity
- Tumor cells with small to medium-size round nuclei and clear perinuclear haloes
- Nuclear cluster with large pleomorphic nuclei
- Multinucleated cells
- Neuropil-like island
- Microcalcifications and larger confluent calcifications
- The recurrence shows a higher mitotic activity, a higher proliferation index and foci of necrosis

DIFFERENTIAL DIAGNOSIS:

- Adult-type diffuse gliomas *Astrocytoma, IDH-mutant Oligodendroglioma, IDH-mutant and 1p/19q-codeleted Glioblastoma, IDH-wildtype*
- Glioneuronal tumor

Diagnostic Workup

Immunohistochemical panel	
GFAP	Negative
Olig2	Positive (variable)
Synaptophysin	Positive (variable)
Neu-N	Negative
IDH1	Negative
ATRX	Retained
MMR proteins	Retained
p53	Wild type pattern
BRAF V600E	Negative



RNA sequencing analysis

No pathogenic SNVs/fusions identified

Methylation profile

 "Diffuse glioneuronal tumour with oligodendroglioma-like features and nuclear clusters" (DGONC)" and the Copy Number Profile generated by the methylation analysis showed the characteristic monosomy of chromosome 14

Copy number variation profile



DGONC

- Novel entity provisionally designated "diffuse glioneuronal CNS tumour with oligodendroglioma-like features and nuclear clusters" (DGONC)
- Predominantly occurs in pediatric patients (median: 9 years), located in the cerebral hemispheres, preferentially in the temporal lobes
- \circ Histological and immunohistochemical profile overlaps with other CNS tumor entities:
- Isomorphic, round nuclei with oligodendroglioma-like perinuclear haloes, diffuse infiltration, neuropil-like islands, nuclear clusters
- GFAP-negativity, Olig2 and synaptophysin-positivity



DGONC

 \circ Unknown oncogenic events or mechanisms leading to the occurrence of this tumor

- RNA negative sequencing in our case
- It is methylation-defined glioneuronal CNS tumor class; monosomy 14 (~100%) is a hallmark - variable gain of 1q (26%), 17q (58%), and loss of 19q (35%)
- The literature on prognosis of this entity is limited: favourable clinical course despite many of the original histological diagnoses were of high-grade lesions
- 5-year OS: 86%, median OS of 2.2 years (range 3 months 8 years) \rightarrow based on 12 cases
- Our case has the longest reported FU (15-year) and supports a long-term indolent behavior, even with no chemo or radiotherapy → outcome, currently under careful FU, with no therapy

Take home messages

- It is important to recognize DGONC main dd from adult-type diffuse glioma- because of its good clinical behavior, long survival without therapy
- Despite it being a methylation-based diagnosis, its characteristic morphology and immunophenotype should make one think of this diagnosis and suggests a specific diagnostic workup

Thank you



References

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