# Genetics basis in carcinogenesis: Lec. 1

Chawalit Pairojkul, KKU, Aug. 2025

#### Neoplasm # I: Learning objectives



- Outlines for Neoplasm #1
- Terminology
- Laboratory demonstration
- General features of neoplasm

#### • Terminology review :

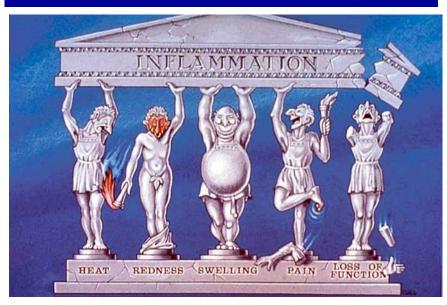
- Hypertrophy increase in cell size
- Hyperplasia increase in number of cells
- Metaplasia cell type conversion
- Neoplasia abnormal proliferation
- Dysplasia maturation abnormality
- Anaplasia dedifferentiation

Desmoplasia – connective tissue growth

#### Tumor vs Neoplasia

- Tumor (latin for *swelling*)
- originally meant all forms of swelling

**The Five Cardinal Signs of Inflammation** 



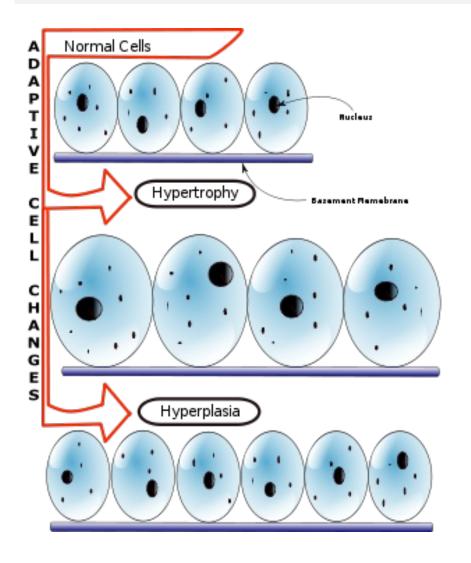
Calor – Rubor – Tumor - Dalor - Functio lose

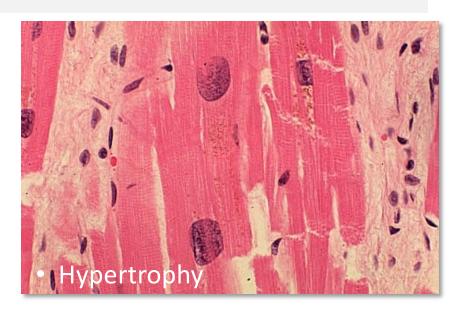


- Tumor: An abnormal growth of tissue.
- <u>Tumor</u> is now considered synonymous with <u>neoplasm</u> (Gr., new growth).



 Hypertrophy results from an increase in cell size, while <u>hyperplasia</u> is from an increase in cell <u>number</u>



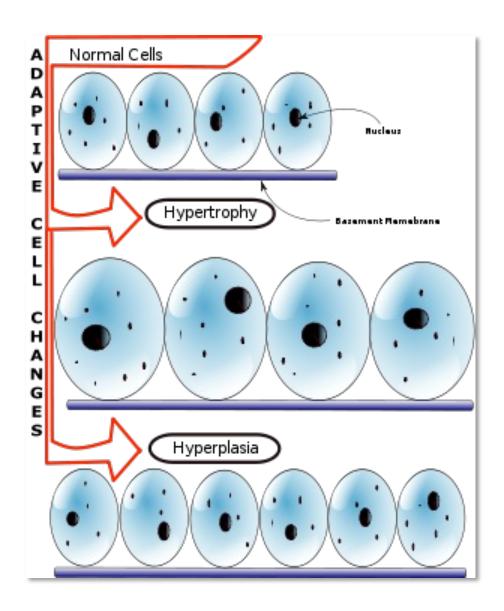


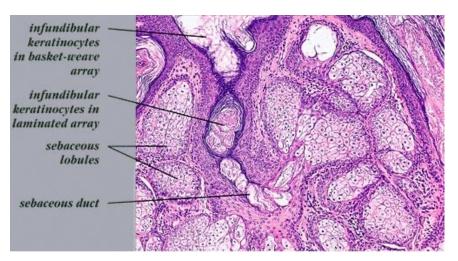




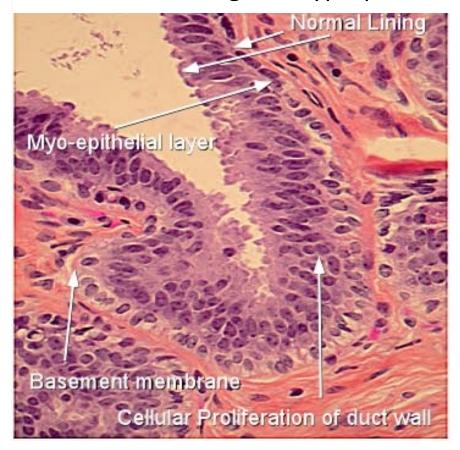
Juvenile hypertrophy

 Hyperplasia results from an increase in cell number.





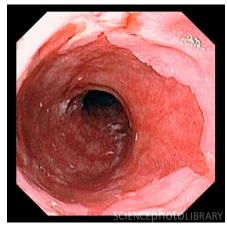
Acne: sebaceous gland hyperplasia

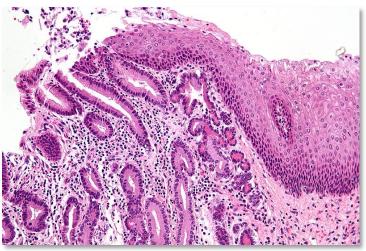


• **Metaplasia** (Greek: "change in form") is the reversible replacement of one <u>differentiated cell type</u> with another mature differentiated cell type.

Tissue	Normal	Metaplasia	Stimulus
Airways	Pseudostratified columnar epithelium	Squamous epithelium	Cigarette smoke
Urinary bladder	Transitional epithelium	Squamous epithelium	Bladder stone
Esophagus	Squamous epithelium	Columnar	Gastro- esophageal reflux (Barrett's Esophagus)
Cervix	Glandular epithelium	Squamous epithelium	Low pH of vagina

Gastro-esophageal reflux

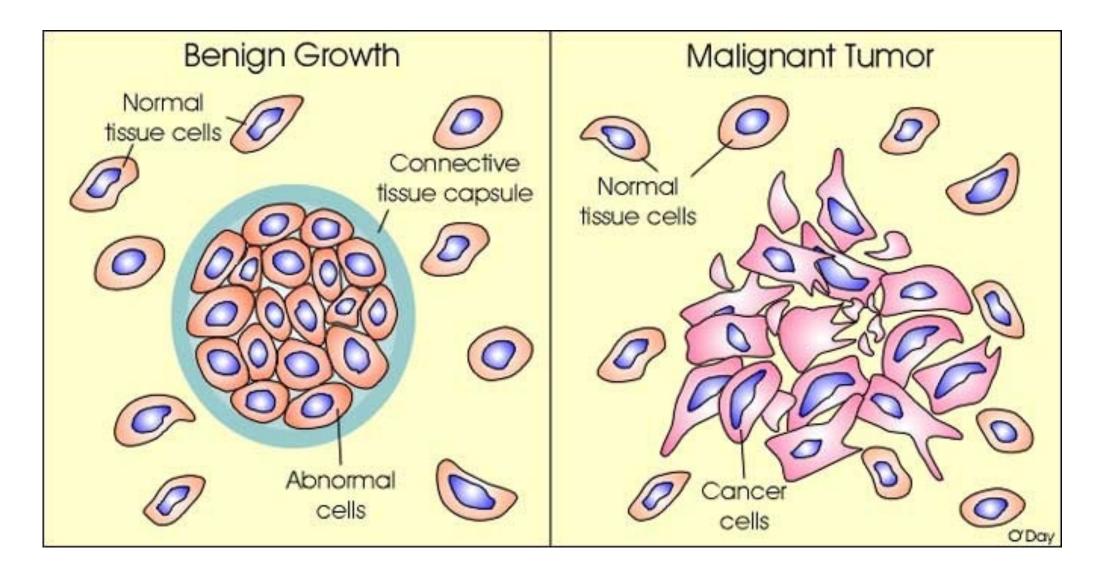




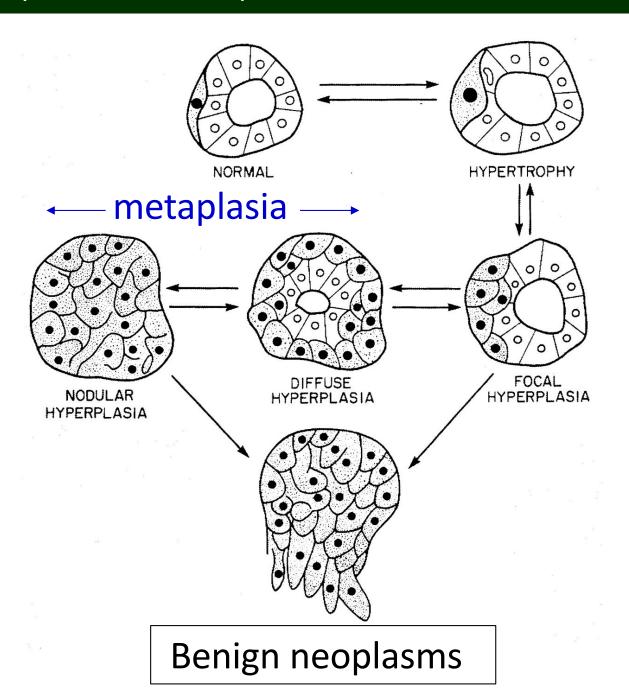
- Neoplasia (Gr., new growth) is the abnormal proliferation of cells.
  - The growth of the cells exceeds, and uncoordinated with that of the normal tissues.
  - The growth persists in the same excessive manner even after cessation of the stimuli.
- Neoplasms may be
- benign neoplasms
- pre-malignant or precancerous lesions
- malignant neoplasms

S. No.	Characteristics	Benign Neoplasm	Malignant Neoplasm
1	Cell Character	Well differentiated	Poor differentiate
2	Mode of Growth	Tumor growth by expansion	Tumor growth by infiltration
3	Rate of Growth	Slow Growth	Rapid Growth
4	Growth	Encapsulated	Not contain with in a capsule (Non-capsulated)
5	Metastasis (Transfer of a disease from one part of body to another through blood vessels or lymphatic channels)	Does not spread	Present

• Different growth patterns in <u>benign</u> and <u>malignant</u> tumors



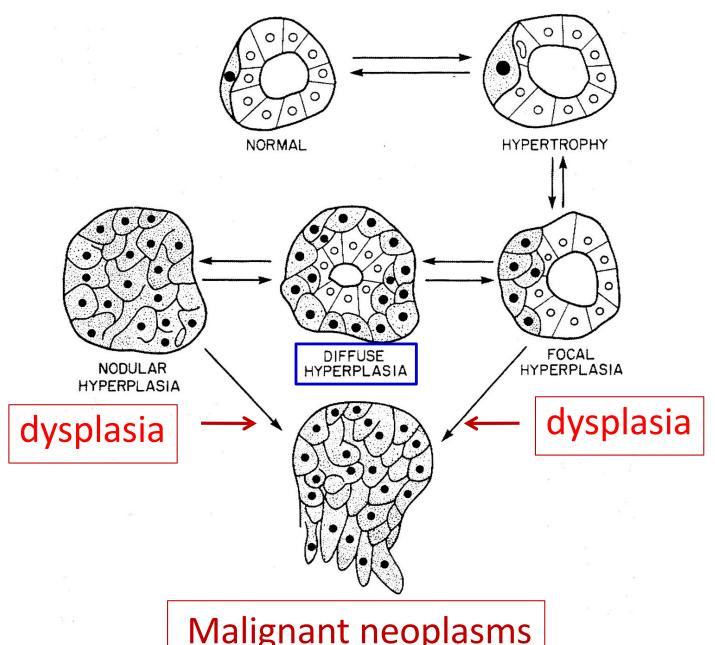
#### • Hyperplasia and metaplasia associated with tumorigenesis.



• **Dysplasia** (Gr. "abnormal growth"), is referred to abnormality of cellular development.

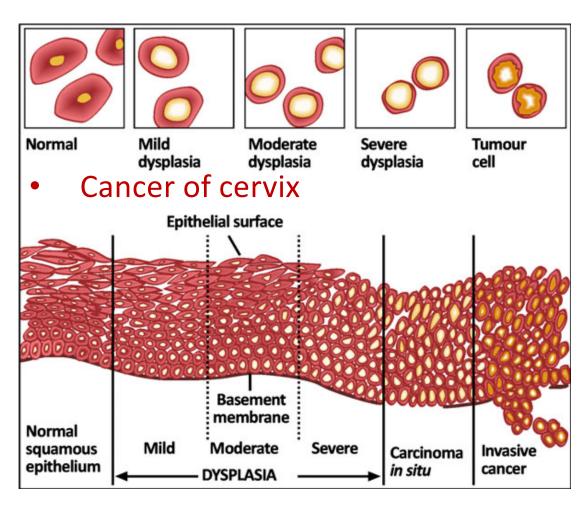
 Dysplasia, in which cell maturation and differentiation are delayed, can be contrasted with <u>metaplasia</u>, in which cells of one mature, differentiated type are replaced by cells of another mature, differentiated type.

 Dysplasia is often indicative of an early neoplastic process. Dysplasia is associated with tumorigenesis.



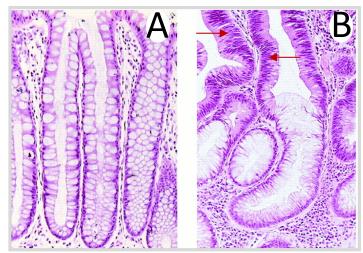
Malignant neoplasms

**Dysplasia** is a term refer to an abnormality of maturation. It is typically used when the cellular abnormality is restricted to the originating tissue.

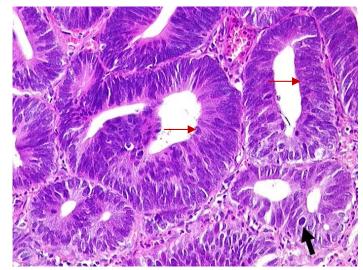


- Dysplasia is often indicative of an <u>early neoplastic process</u>.
- Dysplasia, in which cell maturation and differentiation are delayed.

Cancer of colon



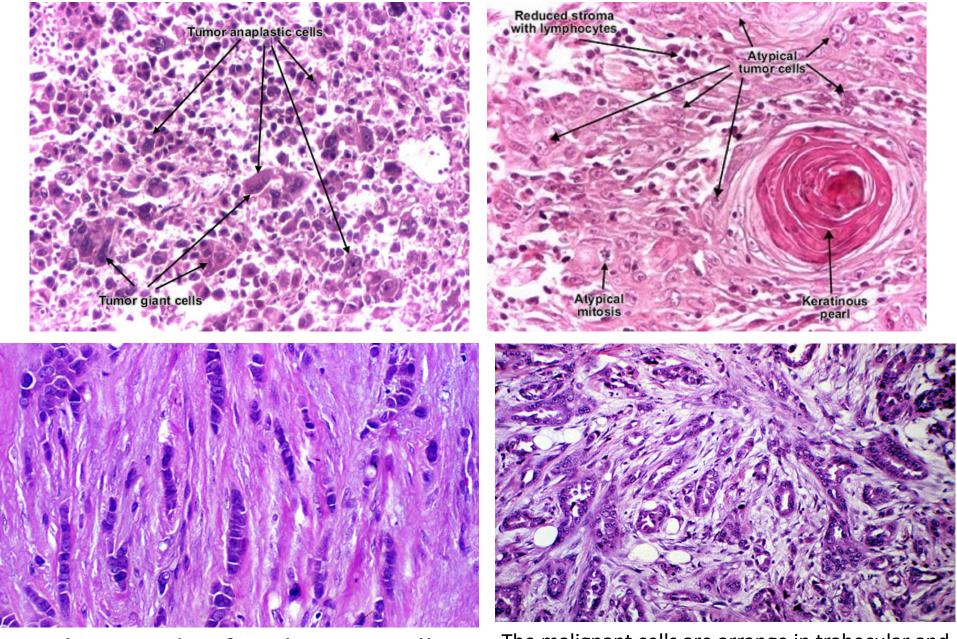
Dysplastic mucosa of colnic adenomas



Carcinoma in situ

- •Anaplasia is the most extreme disturbance in cell growth encountered in the spectrum of cellular proliferations.
- Anaplastic cells (cancer cells) display marked <u>pleomorphism</u>.
- Anaplastic nuclei are variable and bizarre in size and shape.
- The <u>nuclei</u> are characteristically extremely hyperchromatic.
- The <u>nuclear-cytoplasmic ratio</u> may approach 1:1.
- More important, <u>mitoses</u> are often.
- They may grow with total loss of communal structures, such as gland formation or stratified squamous architecture.

 Anaplasia is the most extreme disturbance in cell growth encountered in the spectrum of cellular proliferations.

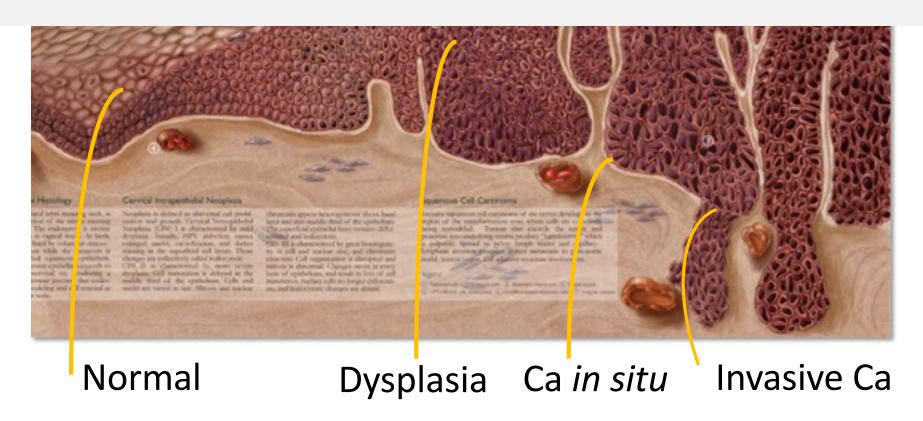


Single strands of malignant cells

The malignant cells are arrange in trabecular and solid patterns, with gland formation.

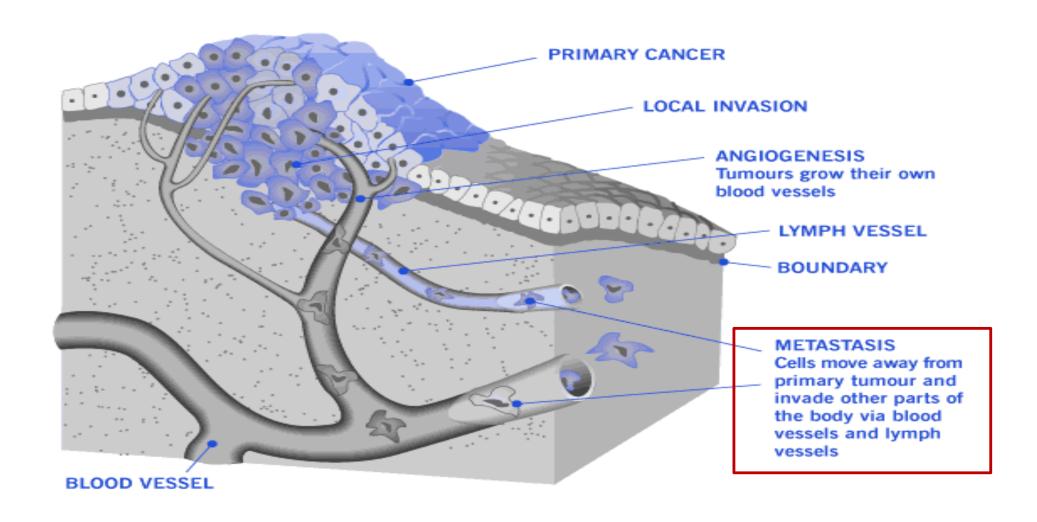
- Malignant neoplasms are called cancers. They included:
- Carcinoma in situ (cancer at the site). They do not invade and destroy basement membrane but, given enough time, will transform into invasive cancer.
- Invasive cancers;

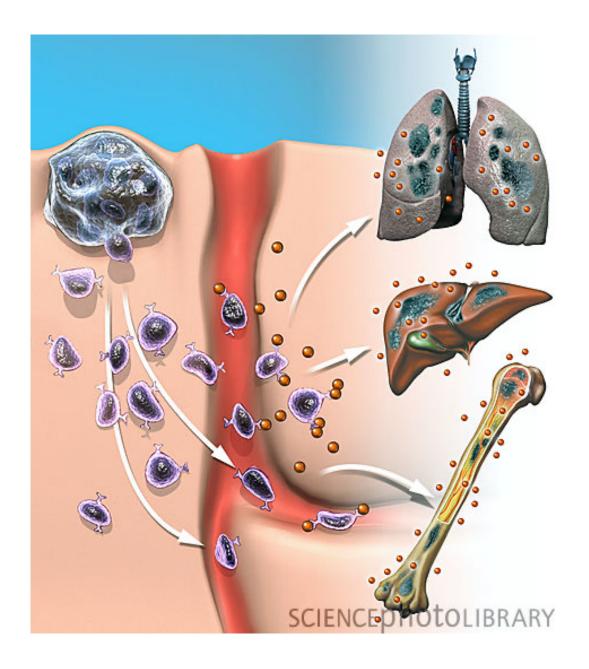
they invade and destroy the surrounding tissue, may form *metastases* and eventually kill the host.



#### Metastasis

Cancer cells can <u>invade and destroy healthy tissues</u>, and they <u>can spread</u> ( <u>metastasis</u> ) through the bloodstream and the lymphatic system to other parts of the body.





Primary and secondary cancers. Artwork showing the spread of cancer from a primary site in the skin (upper left), through the blood stream (centre), to form secondary cancers elsewhere in the body (right). The secondary locations shown here are the lungs, liver and a skeletal long bone. The body will produce white blood cells (orange spheres) to attack the cancer cells (purple), but once the cancer has spread (a process called metastasis), the prognosis is poor. Secondary and primary cancers can be treated by surgery and/or radiotherapy and chemotherapy, depending on the location of the tumours.

# Laboratory demonstration

Tumors arising from any germ layer or more than ones.

#### Benign Tumors

Adenoma

**Papilloma** 

Fibroma

Chondroma

Rhabdomyoma

Leiomyoma

Haemangioma

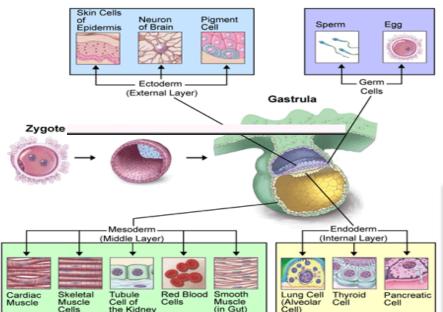
-

Lipoma

Osteoma

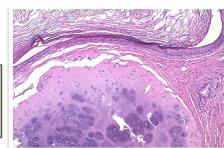
#### Exception

- Hepatoma
- Lymphoma
- Melanoma
- ...blastoma , retinoblastoma, neuroblastoma



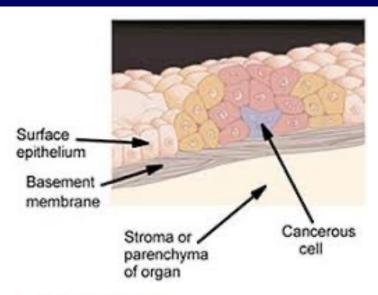
Tumor from 3 germ layers

**Teratoma** 

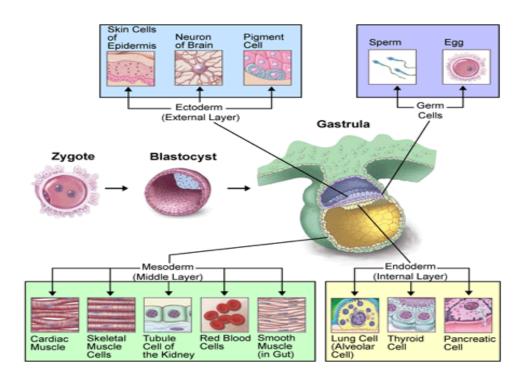


## Laboratory demonstration

• Tumors arising from any germ layer or more than ones.



- Malignant tumors:
  - mesenchymal tissue are usually called sarcoma
  - Epithelial cell origin are usually called carcinoma
  - Name of origin cell + morphologic character + carcinoma/ sarcoma
  - E.g.:
    - Malignant tumor of the stomach is a gastric adenocarcinoma or adenocarcinoma of the stomach.



Benign Tumors	
Adenoma	

Papilloma

Fibroma

Chondroma

Rhabdomyoma

Leiomyoma

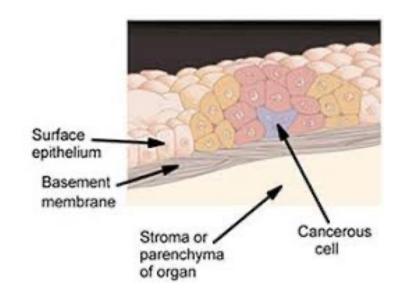
Haemangioma

\_

Lipoma

Osteoma

Hepatoma



#### · Malignant tumors:

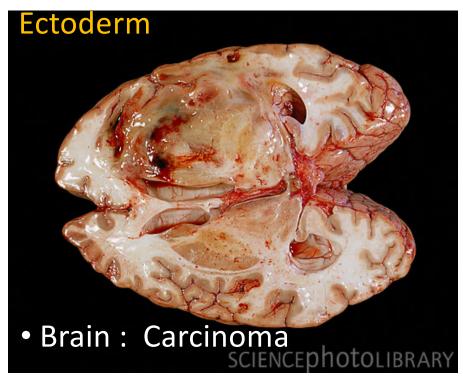
- mesenchymal tissue are usually called sarcoma
- Epithelial cell origin are usually called carcinoma
- Name of origin cell + morphologic character + carcinoma/ sarcoma
- E.g.:
  - Malignant tumor of the stomach is a gastric adenocarcinoma or adenocarcinoma of the stomach.

...9/10 cancer cases are carcinoma, that why we call cancer as "CA"...from the term carcinoma...

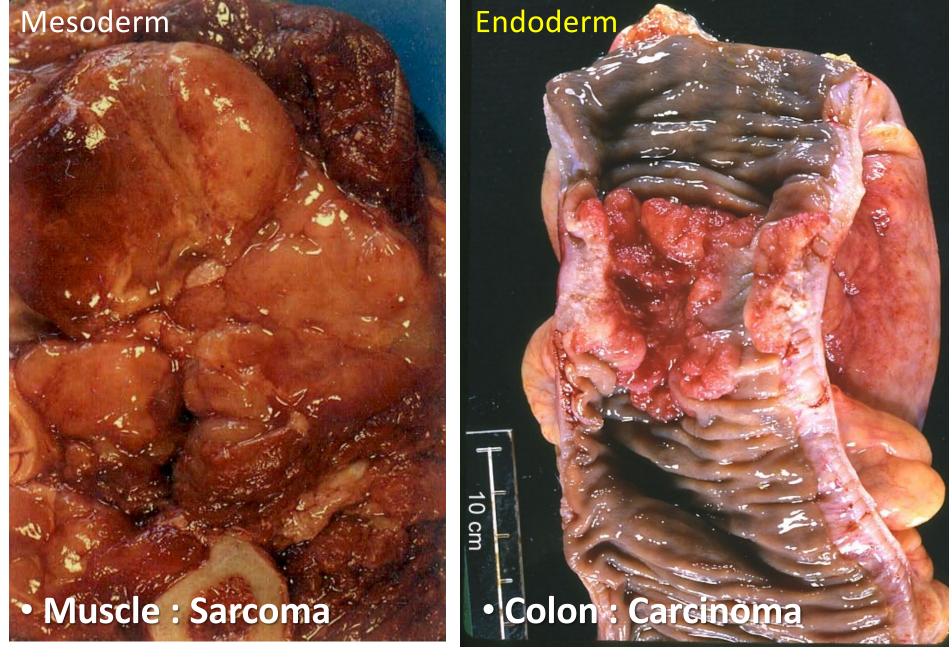
Malignant tumor of surface epithelium is called 'carcinoma'.





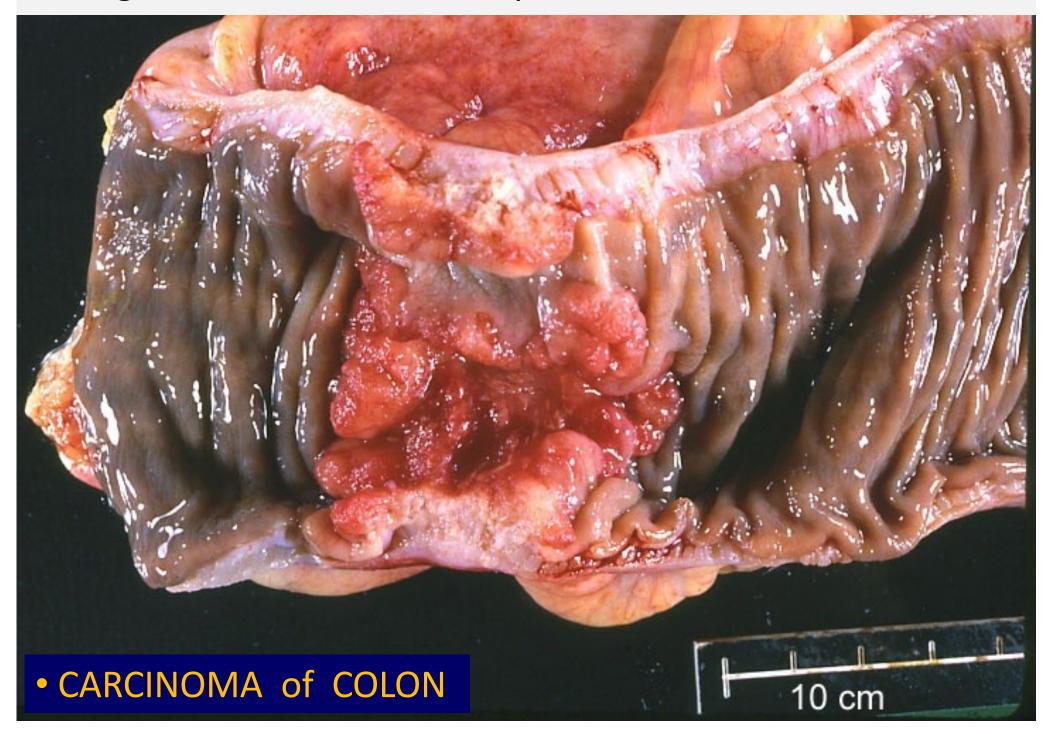




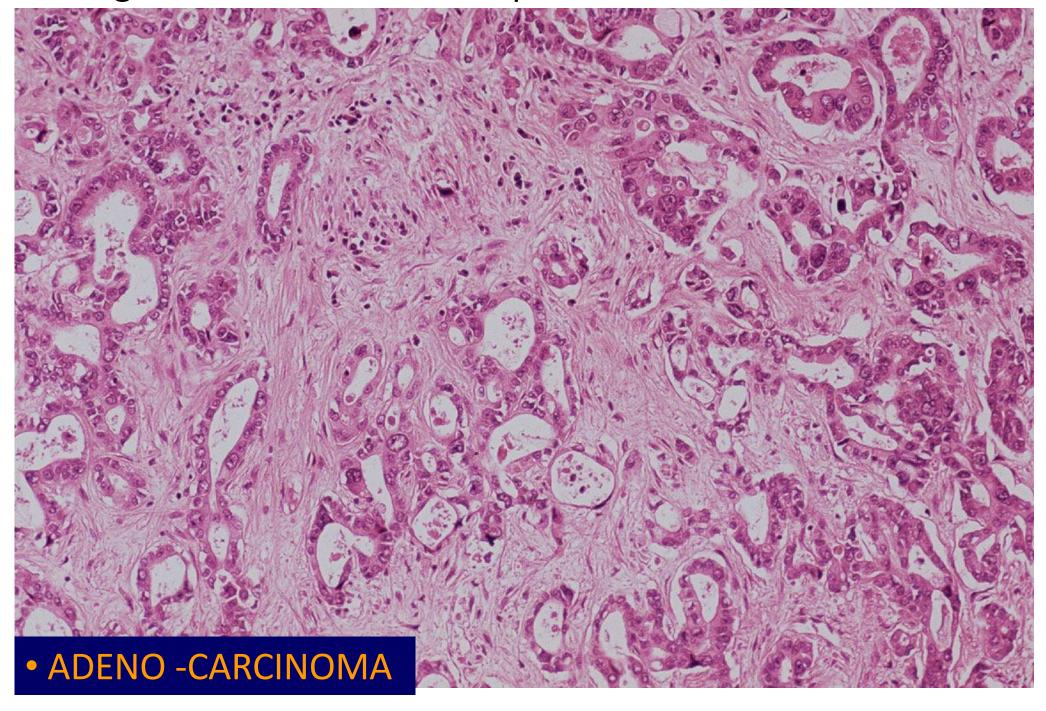


Malignant tumor of surface epithelium is called 'carcinoma'.

#### Malignant tumor of surface epithelium is called 'carcinoma'.

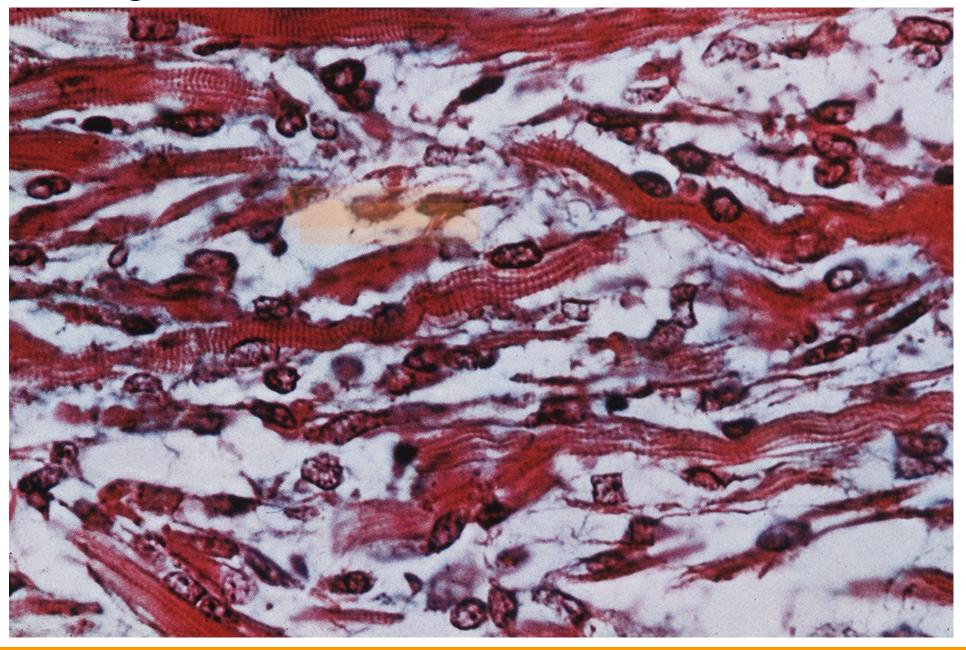


Malignant tumor of surface epithelium is called 'carcinoma'.

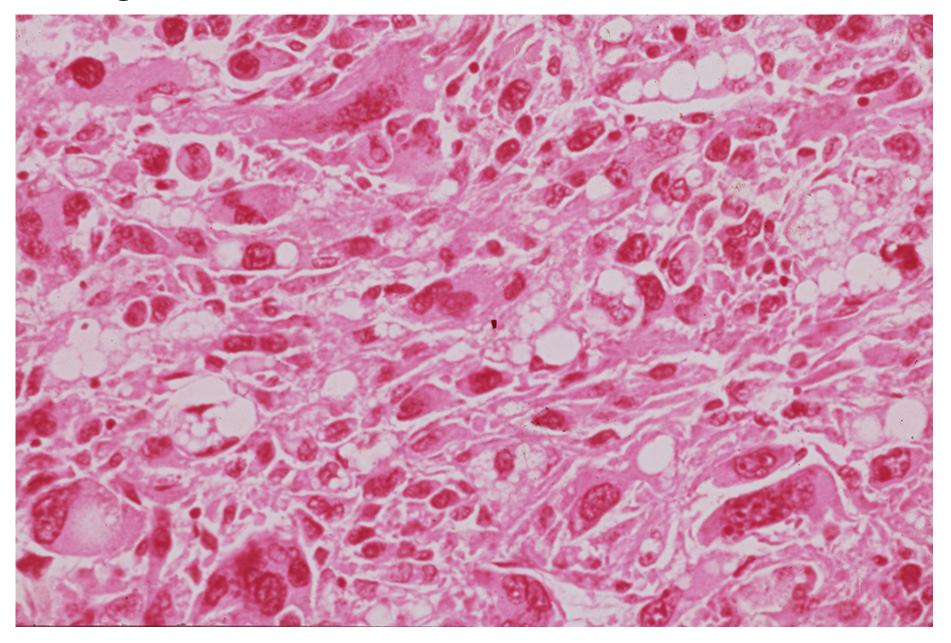




• SARCOMA of MUSCLE / Rhabdomyo-sarcoma



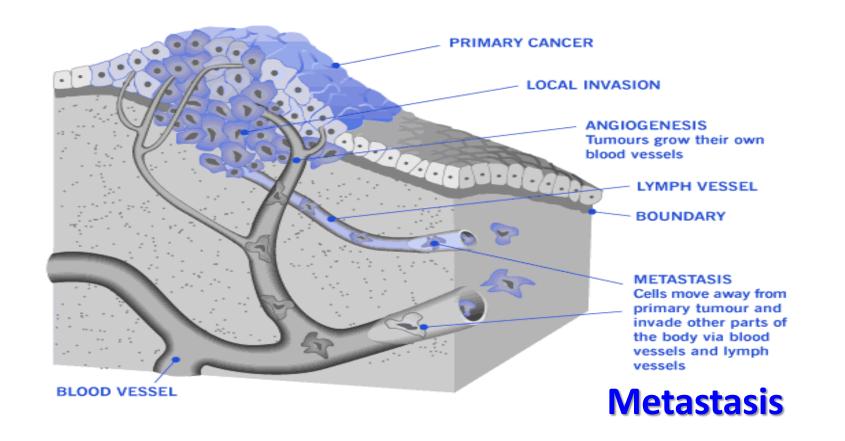
•SARCOMA of MUSCLE / Rhabdo-myo-sarcoma



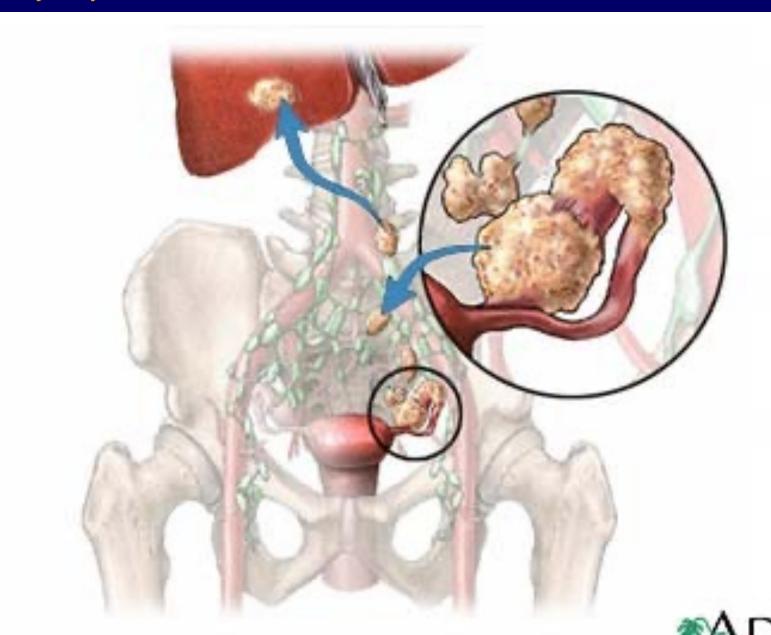
•SARCOMA of FAT tissue / Lipo-sarcoma

**Cancer:** A general name for more than 200 diseases in which abnormal cells grow out of control.

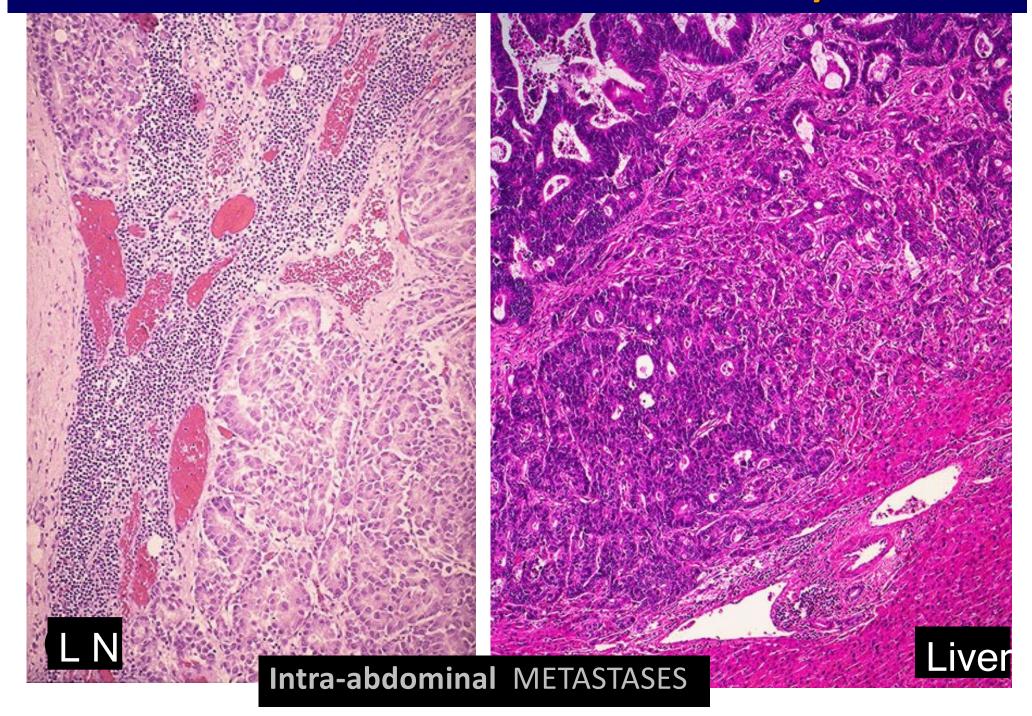
Cancer cells can <u>invade and destroy healthy tissues</u>, and they <u>can spread</u> ( *metastasis* ) through the bloodstream and the lymphatic system to other parts of the body.



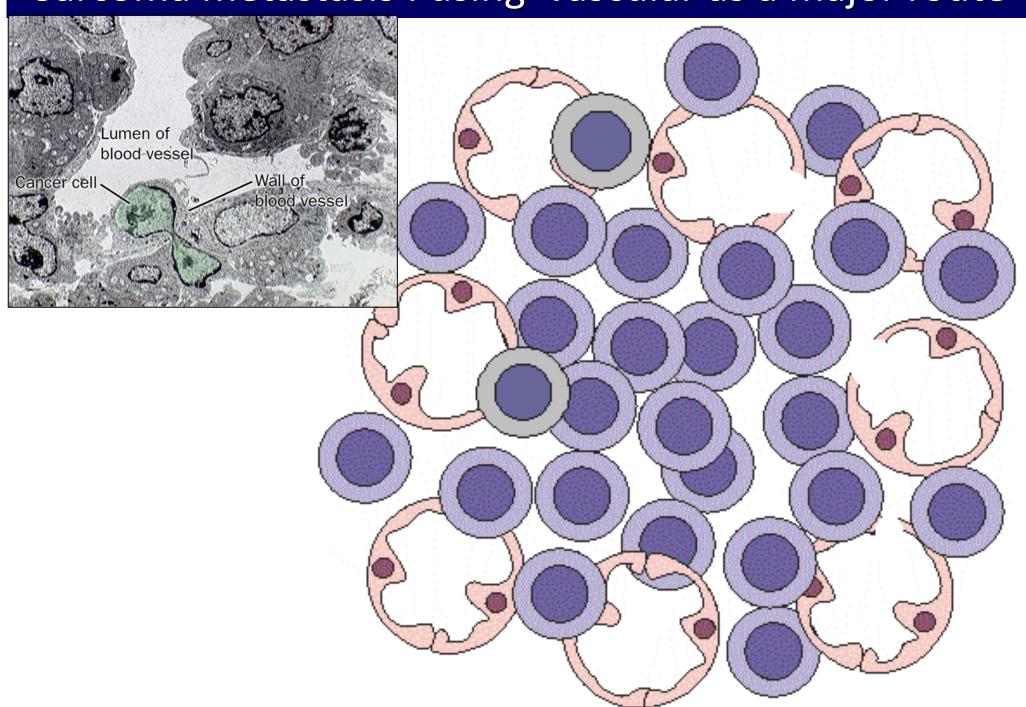
• Most carcinoma METASTASIS *via* lymphatic and later on vascular routes.

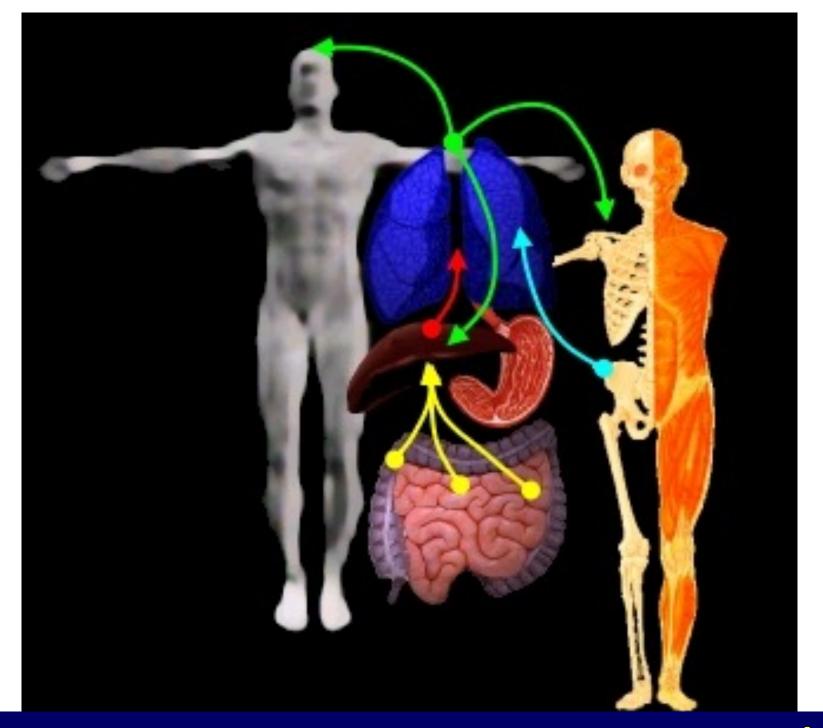


#### METASTASIS intra-abdominal tumor: LN / Liver



### •Sarcoma metastasis : using vascular as a major route





The most common METASTASIS sites: Lungs / Liver

### The most common METASTASIS sites: Lungs / Liver

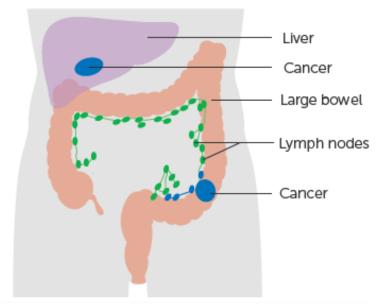


# **TNM Staging:** System of cancer: A system to describe the amount and spread of **cancer** in a patient's body.

T describes the size of the **tumor** and any spread of **cancer** into nearby tissue;

N describes spread of cancer to nearby lymph nodes; and

M describes metastasis (spread of **cancer** to other parts of the body).

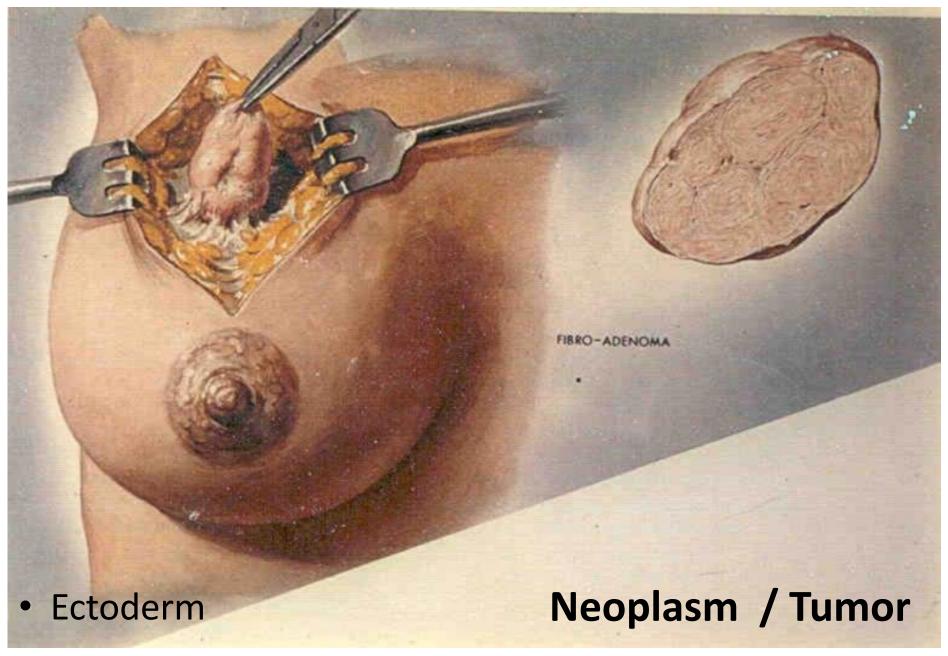


TND		- Pathological	
TNM	Numer- ical	description	5-year survival
T1NoMo	I	Ca limited to the mucosa and sub- mucosa	>90%
T2NoMo	I	Ca extending to the muscularis	85%
Т3NоМо	II	Ca extending to serosa and be- yond serosa	70-80%
TxN1Mo	III	Ca affects to regional lymph nodes	35-65%
TxNxM1	IV	Distant metasta- ses (liver, lungs)	5%
	T2NoMo T3NoMo TxN1Mo	T2NoMo I  T3NoMo II  TxN1Mo III	T2NoMo I mucosa and submucosa  T2NoMo I Ca extending to the muscularis Ca extending to serosa and beyond serosa Ca affects to regional lymph nodes  TxNxM1 IV Distant metasta-

staging and prognosis of colorectal cancer

- Benign tumors, named ending up with OMA,
   with exception these tumors are marlignant :
- Hepatoma primary tumor of liver parenchyma
- Lymphoma primary tumor of lymph node
- Melanoma tumor of melanocyte
- Seminoma tumor arising from seminiferous tubule
- However in tumors, with their names ending up with <u>BLASTOMA</u>, they are <u>embryonal cell tumors</u>, and all are malignant tumors, e.g.
- Neuro-blastoma,
- Retino-blastoma and
- Medalo-blastoma.

#### PROBLEMS WITH BENIGN TUMORS

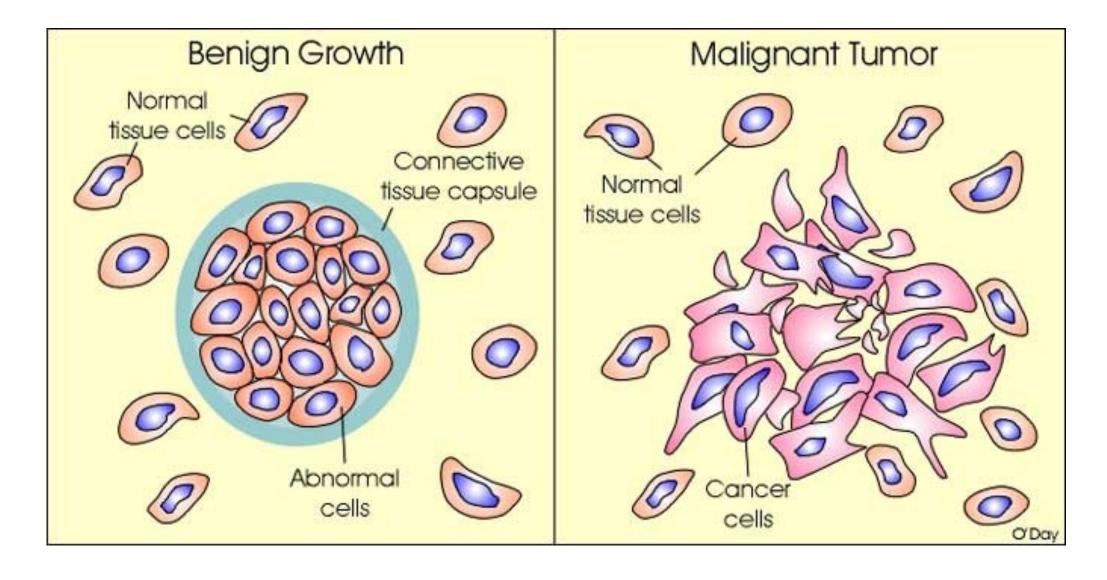


Common presentation of tumor: a painless mass

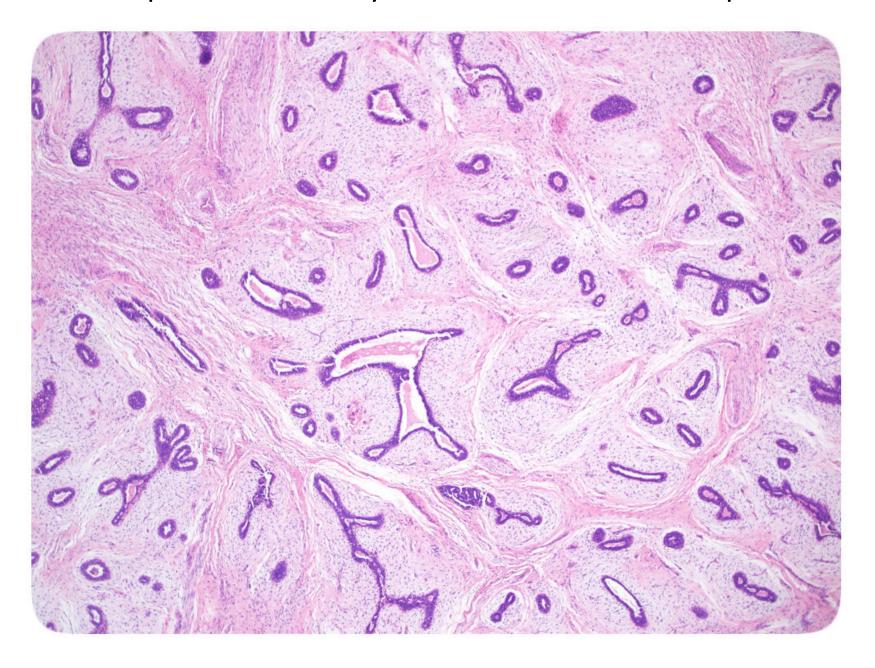
# Distinct tumor border with pseudo —capsule in a benign breast tumor : *Fibroaden-oma*



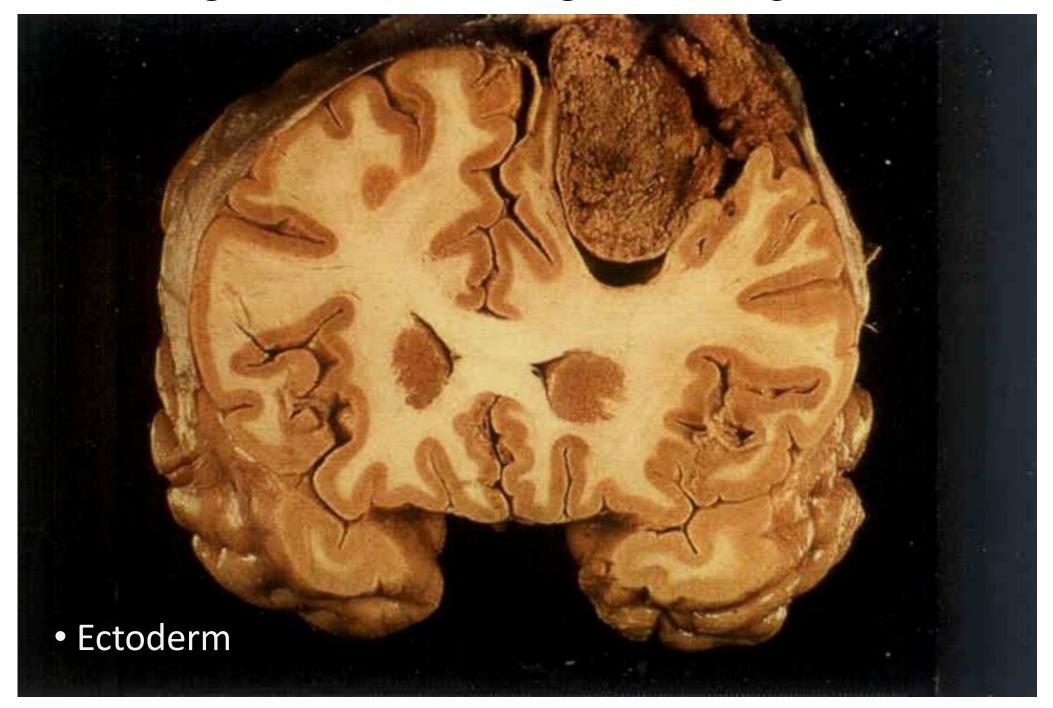
#### Different growth patterns in benign and malignant tumors



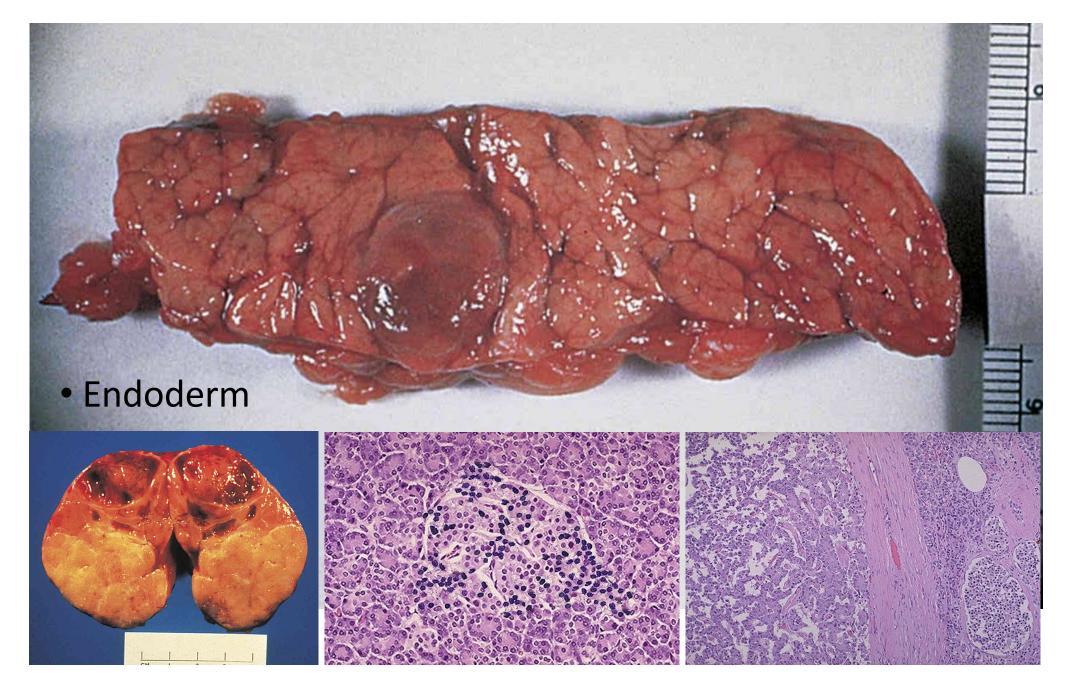
•Tumor composes of mamary ducts and fibrous tissue proliferation.



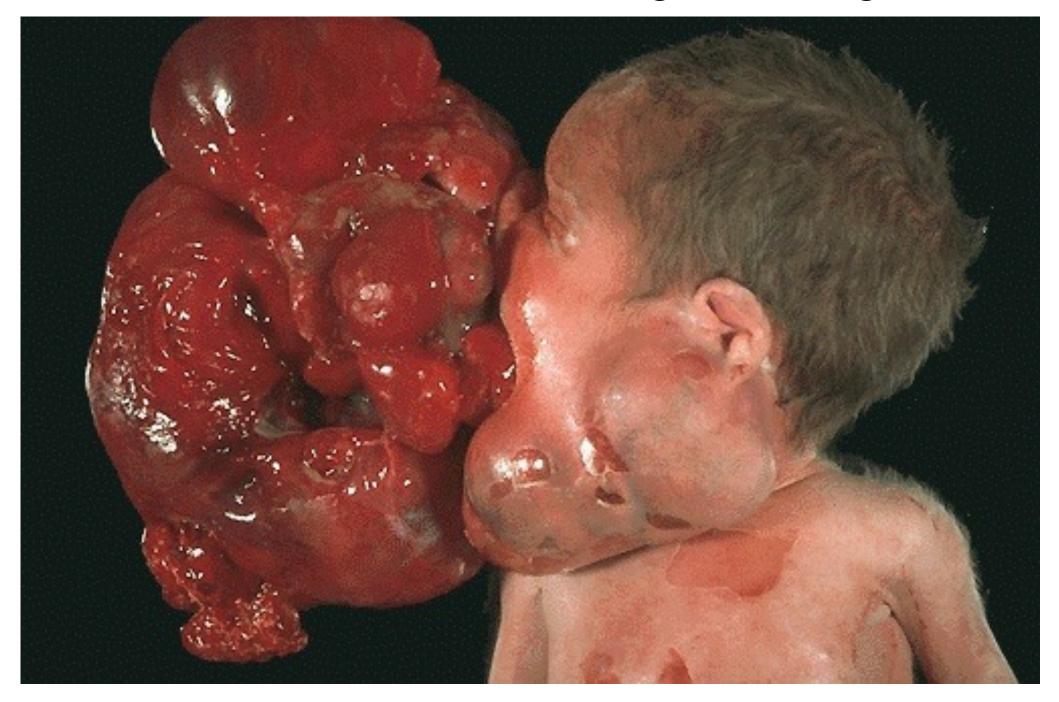
• Benign tumor of meninges : Meningi-oma



#### Pancreatic endocrine tumor: Insulin-oma



• Is it tumor or what!? Is it benign or malignant?



#### **Teratoma:** tumor originates from more than one germ- layers

• 80-90 %, benign teratoma

•20-10 %, malignant teratoma

