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Title	Mixed Germ Cell Tumor with Sarcomatous Component
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Aim	The presence of secondary somatic component in testicular tumors is important to identify as sometimes it represents a challenge in the treatment.
Materials & Methods	A 25-year-old Jordanian male presented with a painless, non-tender right-sided scrotal swelling since two months.
Result	Mixed germ cell tumor (MGCT) composed of seminoma and teratoma was identified with a focus of primitive neuroectodermal component less than one low power field and the rest of the mass contains secondary somatic-type malignant components composed of rhabdomyosarcoma (RMS) and liposarcoma (well differentiated –type) .
Conclusion	The development of secondary somatic malignant component in testicular germ cell tumor is a well-known uncommon phenomenon which accounts 3% to 6.6% of germ cell tumor with teratomatous component. Sarcomas are the most common somatic malignancies observed in testicular tumors. Rhabdomyosarcoma is by far the most common variety among sarcomas. The dilemma in treating those patients is whether to treat these patients as RMS cases or as just mixed germ cell tumors. Addition of sarcoma-specific treatment modalities should be explored to increase the chance of survival in those patients. Although the prognosis depends on the clinical stage, the emergence of sarcomatous component portends a more aggressive behavior when compared with counterpart without somatic-type malignant transformation.