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Title	Metastatic Atypical Choroid Plexus Papilloma
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Aim	There are only a small number of previously reported cases of metastatic choroid plexus papilloma (CPP) or atypical CPP, and the interpretation of the literature is complicated by a lack of consistency in the classification of these tumors. CPPs are known to metastasize in two pathways, either from dissemination through CSF draining system or through iatrogenic dissemination from sub-totally resected tumor of the 4 th ventricle. There is insufficient literature to comment on the incidence of metastases arising from atypical CPP although the case discussed in this report illustrates the phenomenon.
Materials, Methods and Results	<p>A 55 year old lady presented with history of ataxia and diplopia of two months duration. Brain MRI showed enhancing supra-sellar, temporal and spinal lesions two years after resection of atypical fourth ventricular CPP. The patient underwent supra-sellar lesion biopsy.</p> <p>Histologically, a papillary tumor showing papillae having dense fibrovascular cores and lined by atypical cells with prominent mitosis and necrosis. The differential diagnosis included recurrent choroid plexus papilloma and metastatic carcinoma.</p> <p>The immunohistochemical stains show that the tumor cells were positive for CK and CK7 and negative for Thyroglobulin, CD10 and TTF1. The above findings support the diagnosis of metastatic atypical choroid plexus papilloma.</p>