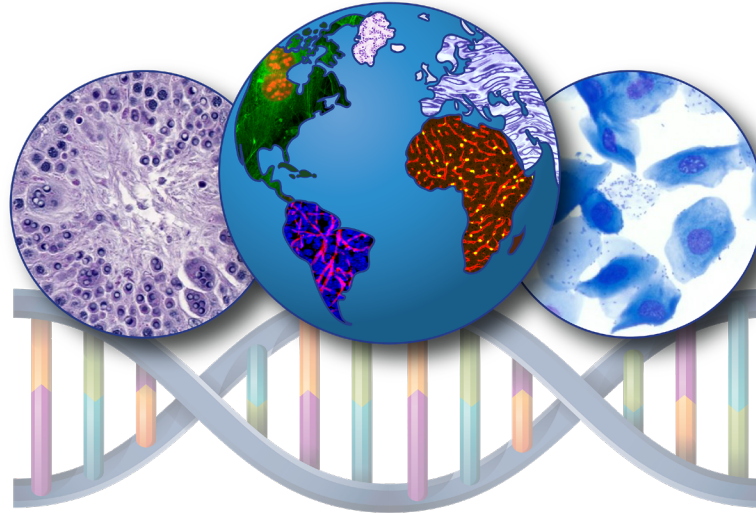




National Institute of  
Environmental Health Sciences  
*Division of Translational Toxicology*

# Proliferative Lesions of the Rodent Parathyroid Gland



Division of Translational Toxicology Global Toxicologic Pathology Training Program

National Institutes of Health • U.S. Department of Health and Human Services

- Hyperplastic Lesions
  - Hyperplasia
- Benign Tumors
  - Adenoma
- Malignant Tumors
  - Carcinoma

## Introduction

- In general, proliferative lesions of the parathyroid gland are uncommon.
  - However, parathyroid gland hyperplasia is more common among rats and mouse strains other than B6C3F1/N mice.
  - Diffuse, bilateral parathyroid gland hyperplasia is usually associated with chronic progressive nephropathy and is therefore common in aging rats (especially males).
- As with many other tissues, hyperplasia in the parathyroid gland can either be **diffuse** (affecting the entire gland) or **focal** (one or more discrete areas within a gland) and affect one or both glands (bilateral).
  - In both focal and diffuse hyperplasia, cells are also usually enlarged (hypertrophy) and cytoplasm is eosinophilic to vacuolated.

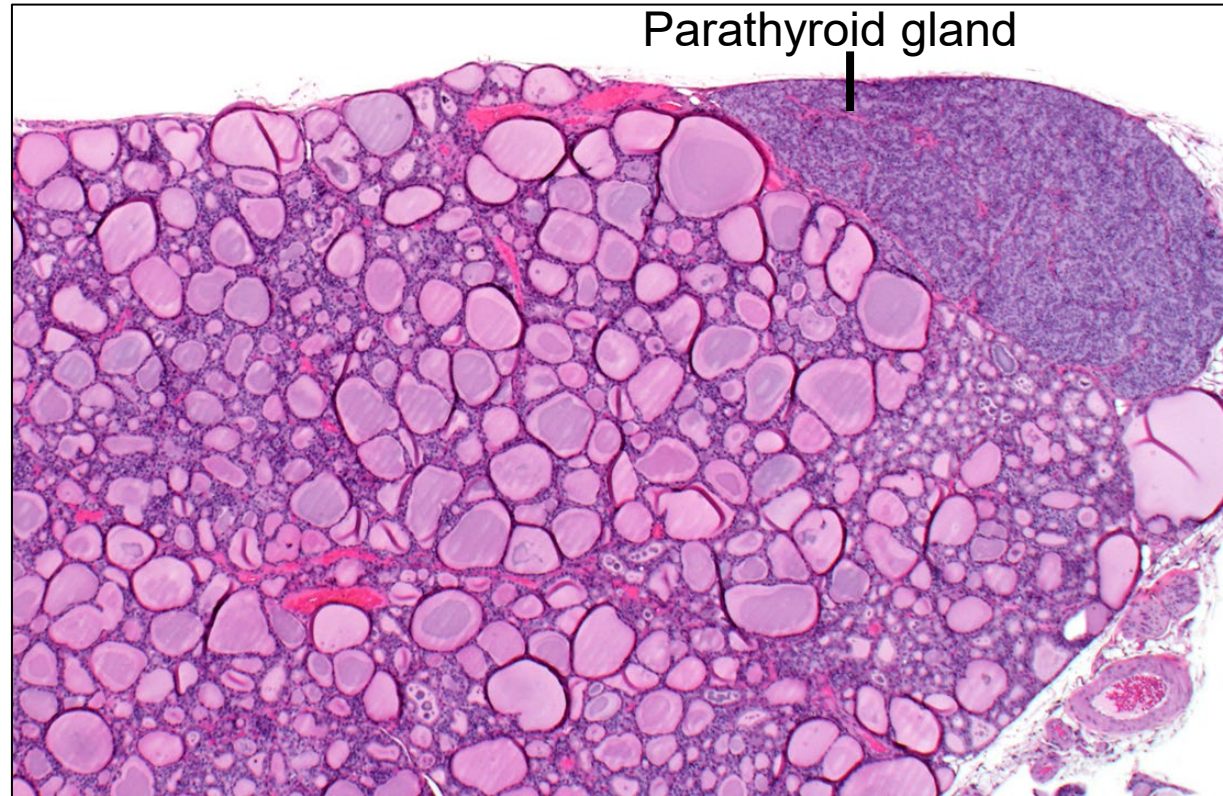
## Hyperplasia, Diffuse

- Diagnostic features:
  - Chief cells are increased in number and uniformly enlarged (hypertrophy).
  - Both parathyroid glands are similarly affected and diffusely enlarged.
  - May cause compression of adjacent thyroid parenchyma.
  - Chief cells are polygonal to elongated.
  - Nuclei are round or elongated and are often larger than normal.
- Associated with conditions that alter calcium metabolism.
  - Chronic renal disease.
  - Diet with inadequate calcium or incorrect calcium to phosphorus ratio.
  - Low serum calcium leads to secondary hyperparathyroidism.
  - Diffuse hyperplasia is reversible if underlying issue is corrected.
- Ultrastructurally, there are increased interdigitations between cells, enlarged mitochondria, increased ribosomes, prominent Golgi.
- Differentiate from adenoma, which is well demarcated with clear compression of surrounding chief cells and affects only one parathyroid gland.

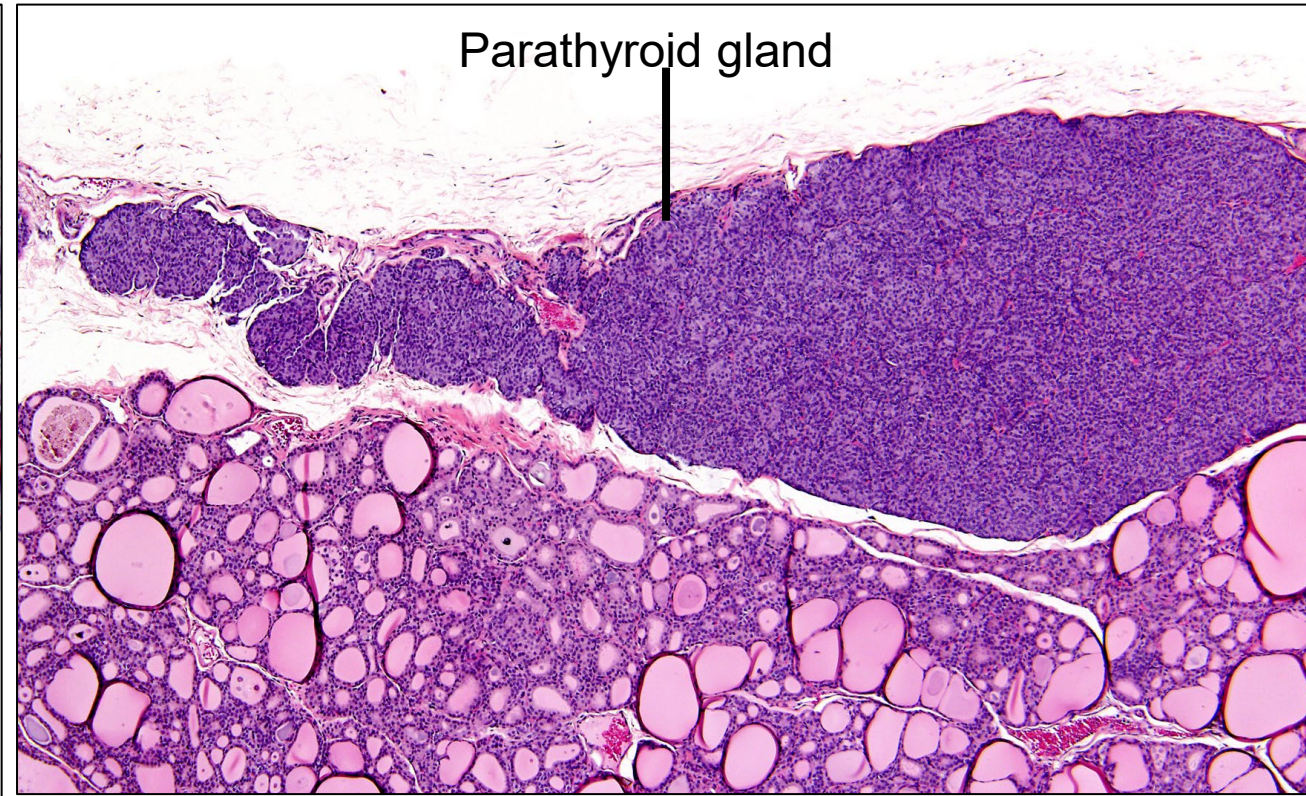


# Parathyroid Gland – Hyperplasia

## Hyperplasia, Diffuse



Normal parathyroid gland from a rat.

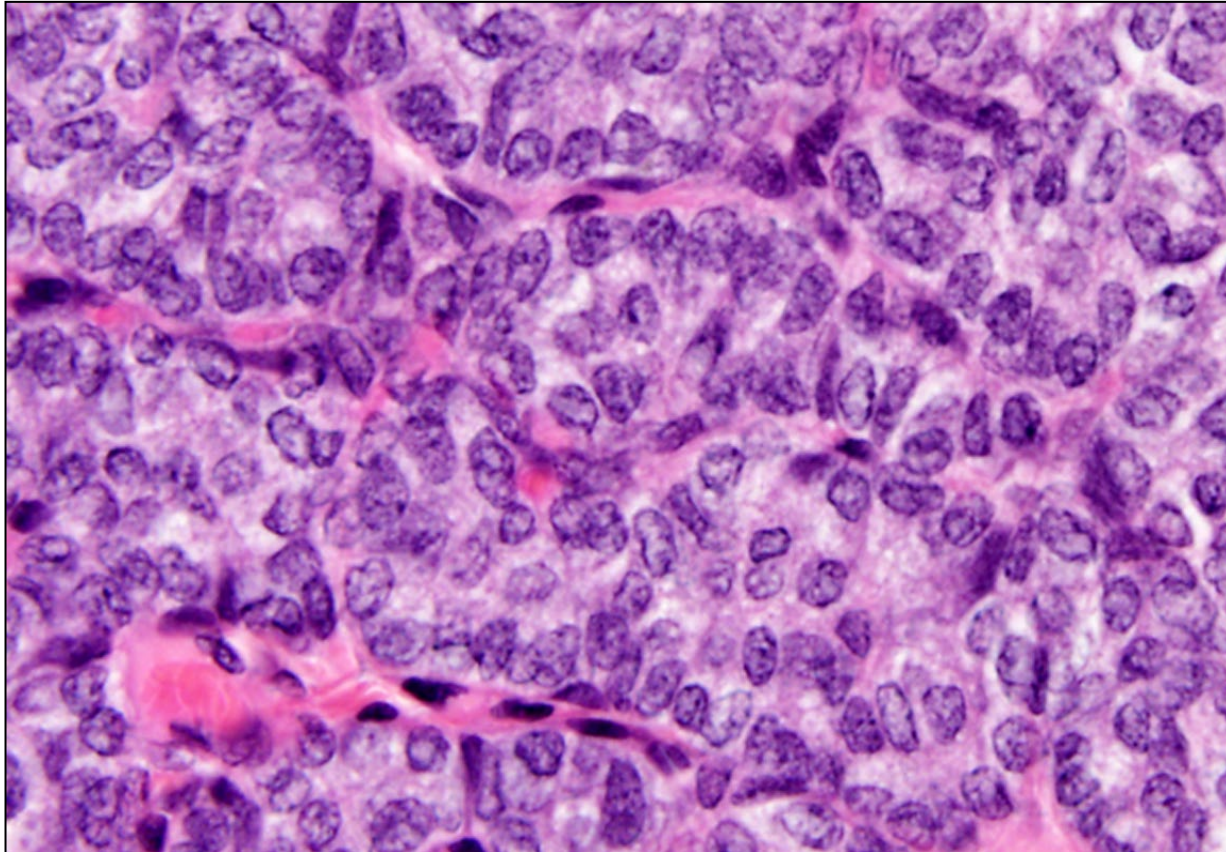


Diffuse parathyroid gland hyperplasia in a rat. The parathyroid gland is diffusely increased in size and would also be observed in the other parathyroid gland (bilateral).

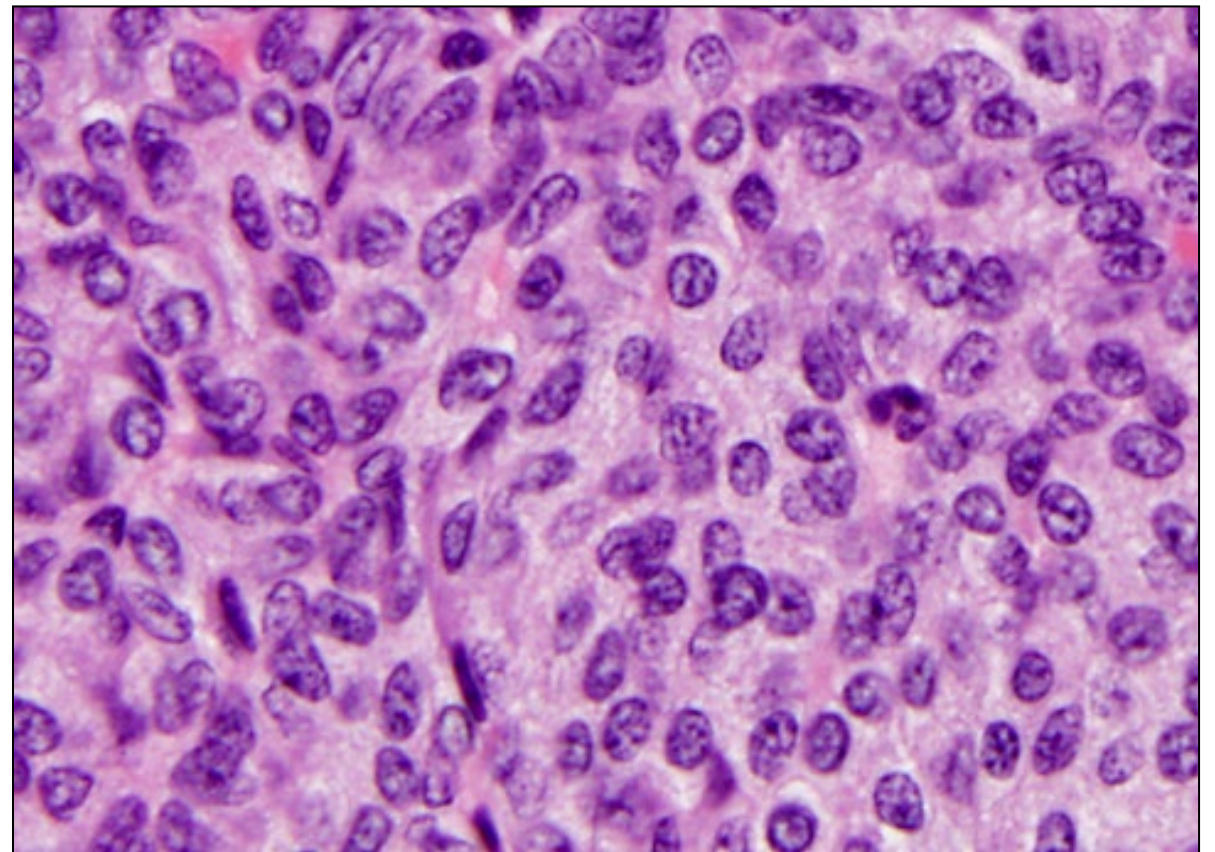


# Parathyroid Gland – Hyperplasia

## Hyperplasia, Diffuse



Normal chief cells from a rat.



Enlarged (hypertrophied) chief cells from a diffusely hyperplastic parathyroid gland from a rat.

## Hyperplasia, Focal

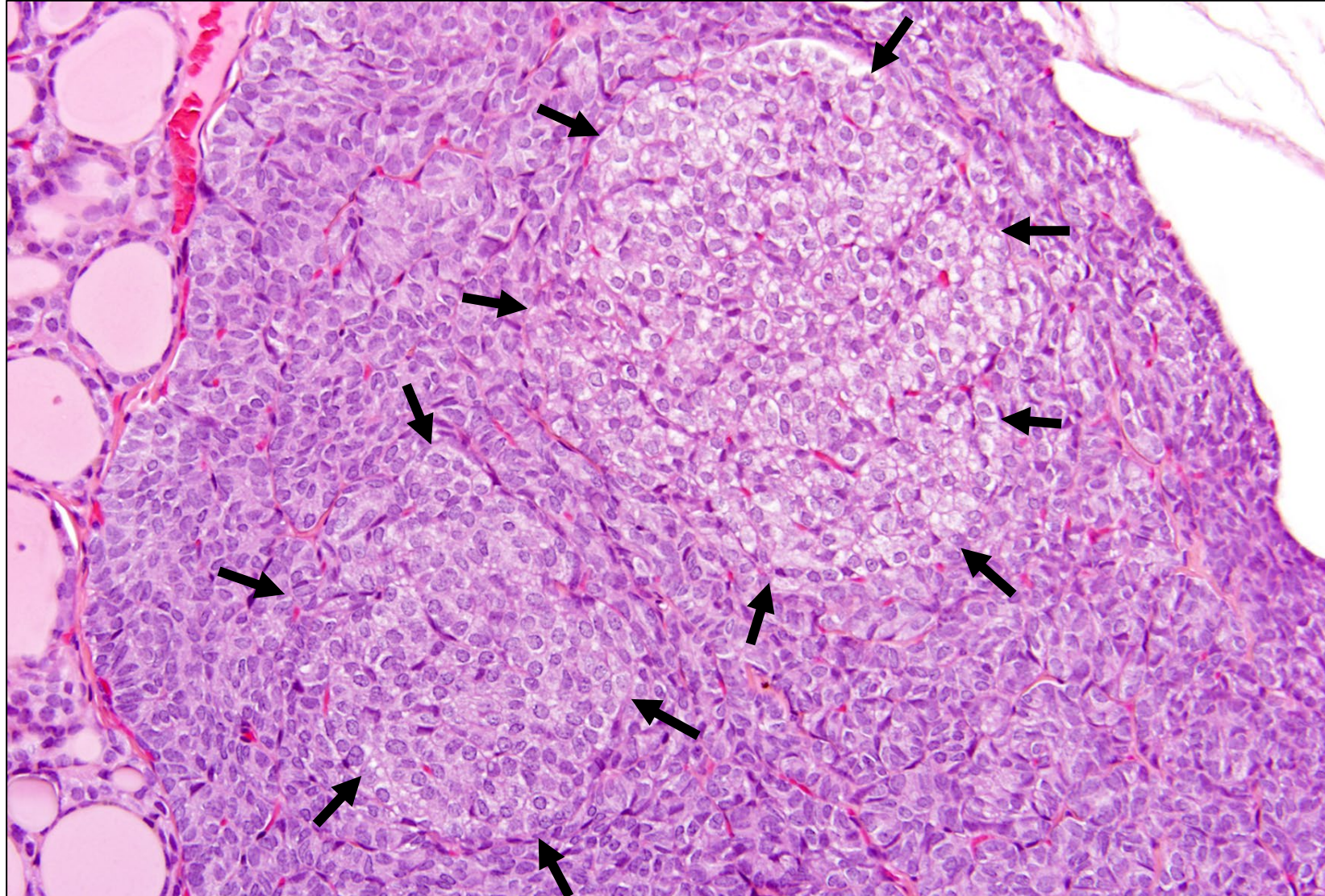
- Diagnostic features:
  - Nodular area(s) within an otherwise normal-looking parathyroid gland.
    - Unencapsulated and poorly demarcated with minimal or no compression of surrounding chief cells.
    - Occur in one or both parathyroid glands.
  - Alteration in growth pattern and/or differential tinctorial staining of cells causes foci to stand out from surrounding parenchyma.
  - Enlarged cells are increased in number in a single focus or multifocal areas.
  - Cellular characteristics are similar to those in diffuse hyperplasia.
    - Cytoplasm is eosinophilic and sometimes vacuolated.
    - Cytoplasm to nuclear ratio can be increased or decreased.
- Focal hyperplasia is usually nonfunctional and is potentially preneoplastic (potential to progress to a tumor).
- Differentiate from adenoma, which is a solitary, well-demarcated nodule with compression of surrounding parathyroid parenchyma or thyroid gland that may or may not have a capsule.
- Much less frequent than diffuse, bilateral hyperplasia.



# Parathyroid Gland – Hyperplasia

## Hyperplasia, Focal

- Focal hyperplasia in the parathyroid gland of a rat.
- Two focal areas of hyperplasia with increased numbers of pale, enlarged chief cells (arrows).
- There is little to no compression of surrounding tissue.





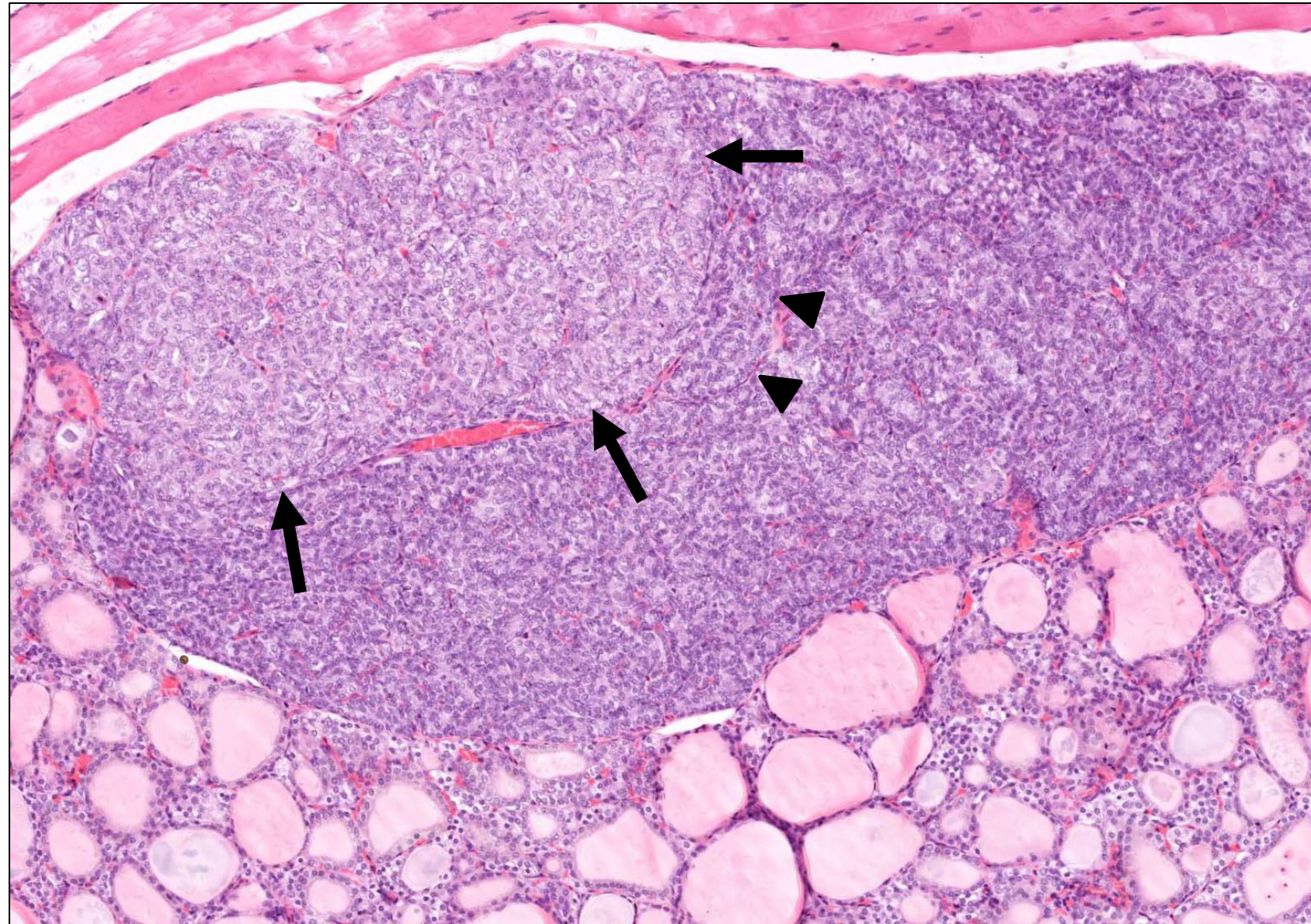
# Parathyroid Gland – Adenoma

- Benign tumor of chief cells of the parathyroid gland.
- Diagnostic features:
  - Solitary, well-demarcated, nodule that may or may not be encapsulated, with compression of adjacent chief cells or thyroid gland.
  - Composed of chief cells with nuclear pleomorphism, sometimes mitoses, and either an increased or decreased cytoplasm to nuclear ratio.
  - Usually solid growth pattern but may have papillary, acinar, or cystic pattern.
    - Papillary = projections on a fibrovascular core.
    - Acinar = round to oval glandular structures with central luminal spaces.
    - Cystic = formation of cyst-like spaces.
- Adenoma likely progresses from focal hyperplasia but does not progress from diffuse hyperplasia.
- May rarely arise from ectopic parathyroid tissue in the mediastinum.
- Uncommon in rats, rare in mice.



# Parathyroid Gland – Adenoma

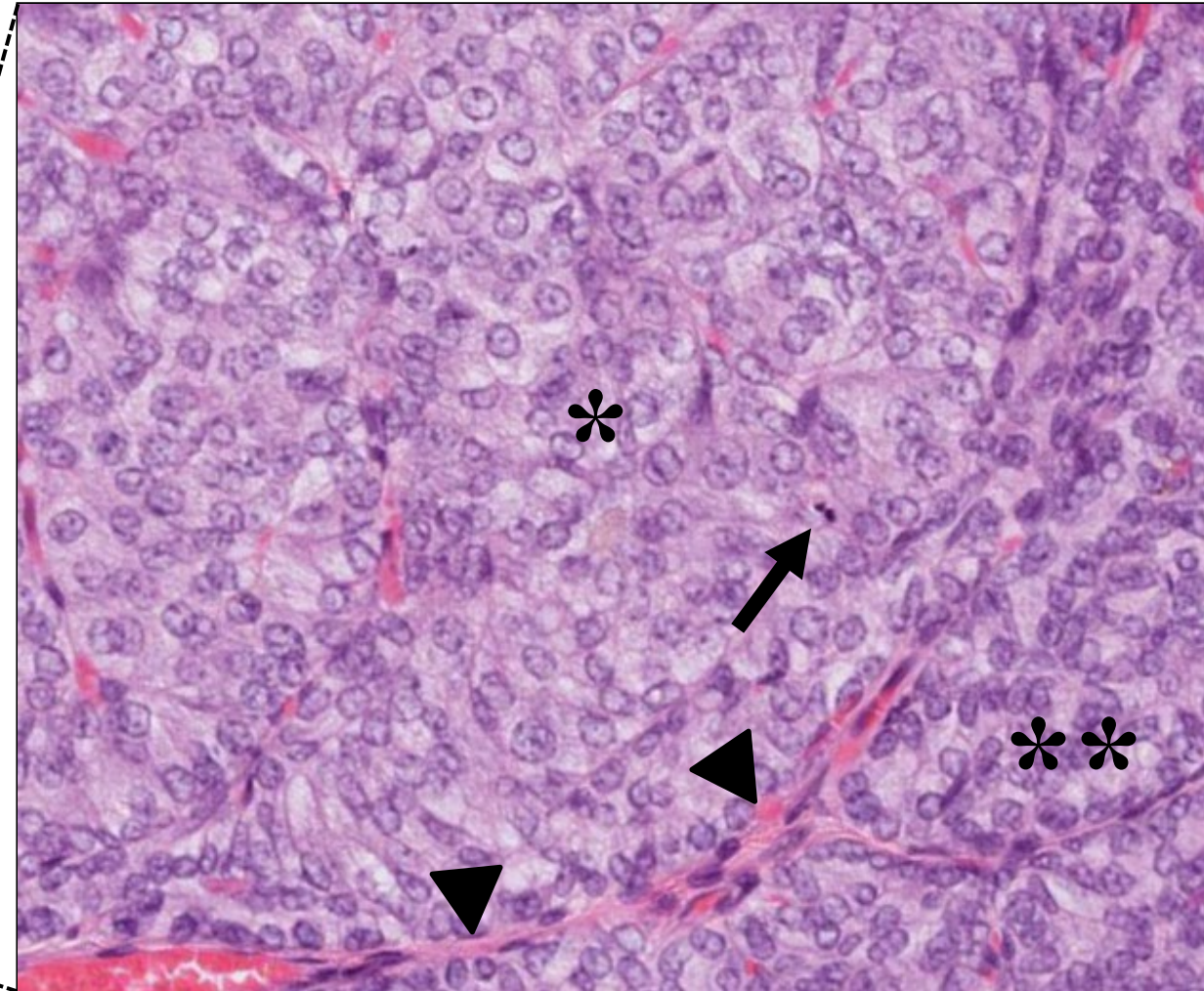
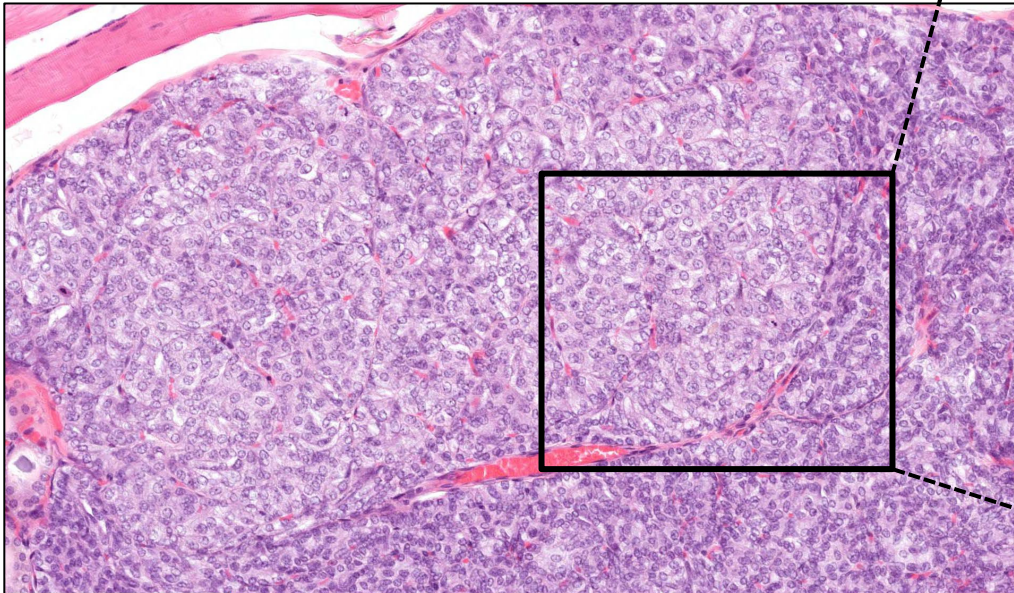
- Adenoma (arrows) in the parathyroid gland of a rat.
- Well demarcated, expansile nodule causing slight compression of the surrounding chief cells (arrowheads).
- Neoplastic chief cells form a solid growth pattern and have pale cytoplasm in comparison with surrounding chief cells.





# Parathyroid Gland – Adenoma

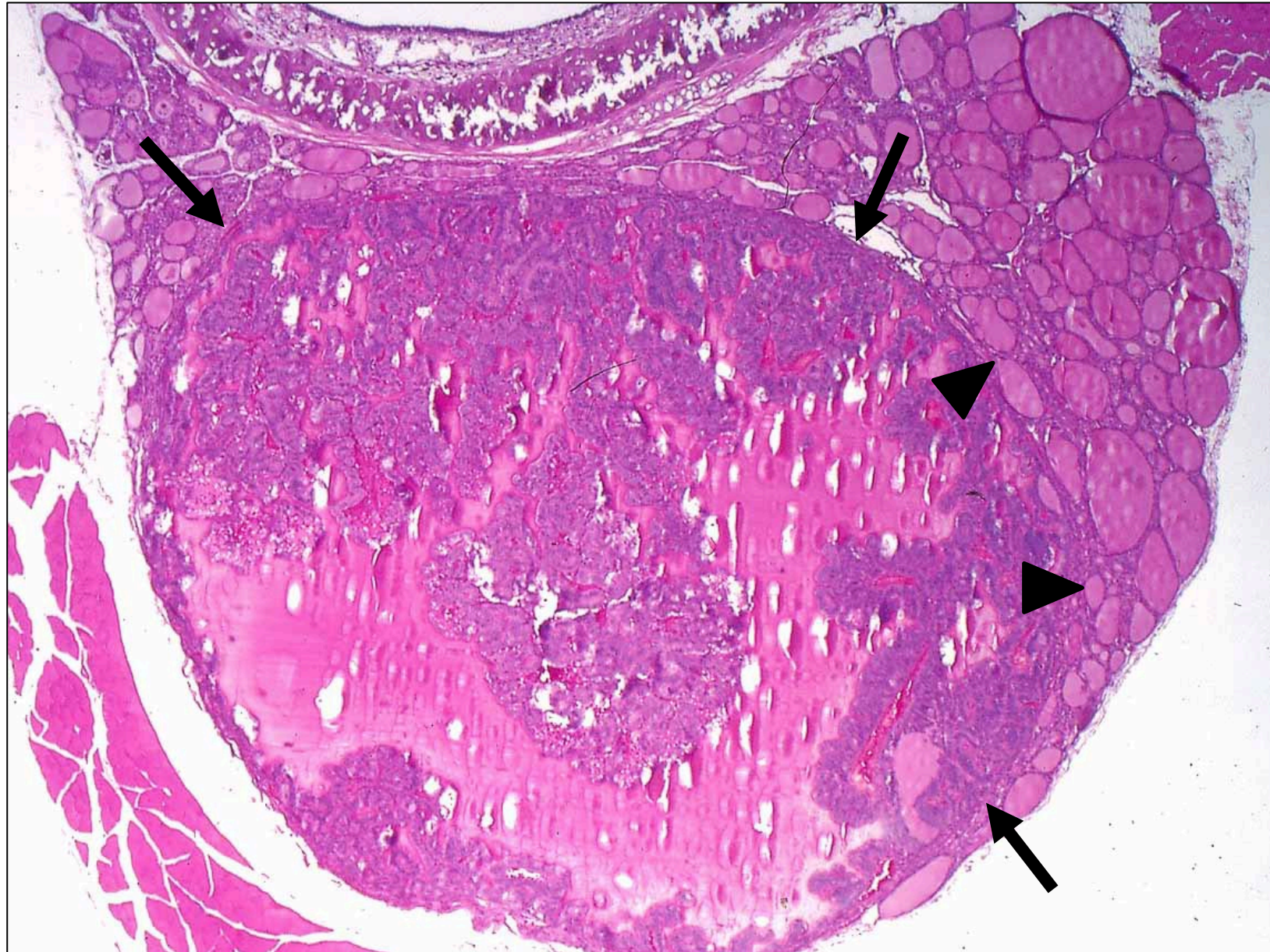
- Higher magnification of adenoma from previous slide.
- There is partial encapsulation by a rim of fibrous connective tissue (arrowheads).
- Neoplastic cells (\*) have large nuclei and abundant cytoplasm in comparison with surrounding normal chief cells (\*\*).
- Mitotic activity is present (arrow).





# Parathyroid Gland – Adenoma

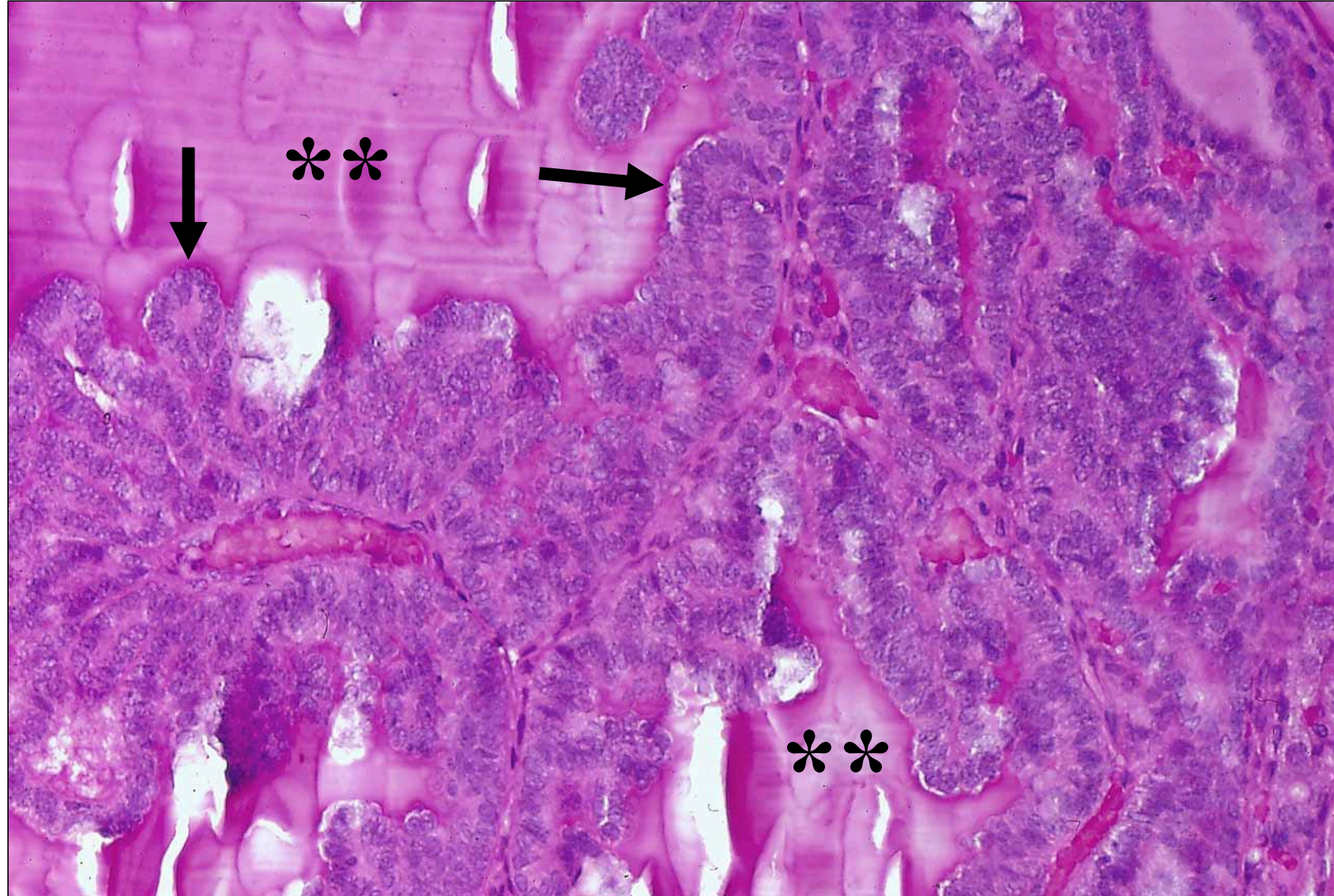
- Adenoma (arrows) in the parathyroid gland of a rat.
- Well demarcated, expansile nodule causing slight compression of the surrounding thyroid follicles (arrowheads).
- Neoplastic chief cells form a cystic (fluid-filled) papillary (finger-like projections) growth pattern.





# Parathyroid Gland – Adenoma

- Higher magnification of adenoma from previous slide showing cystic papillary growth pattern.
- Neoplastic chief cells form papillary projections (arrows) into eosinophilic-staining cystic fluid (\*\*).



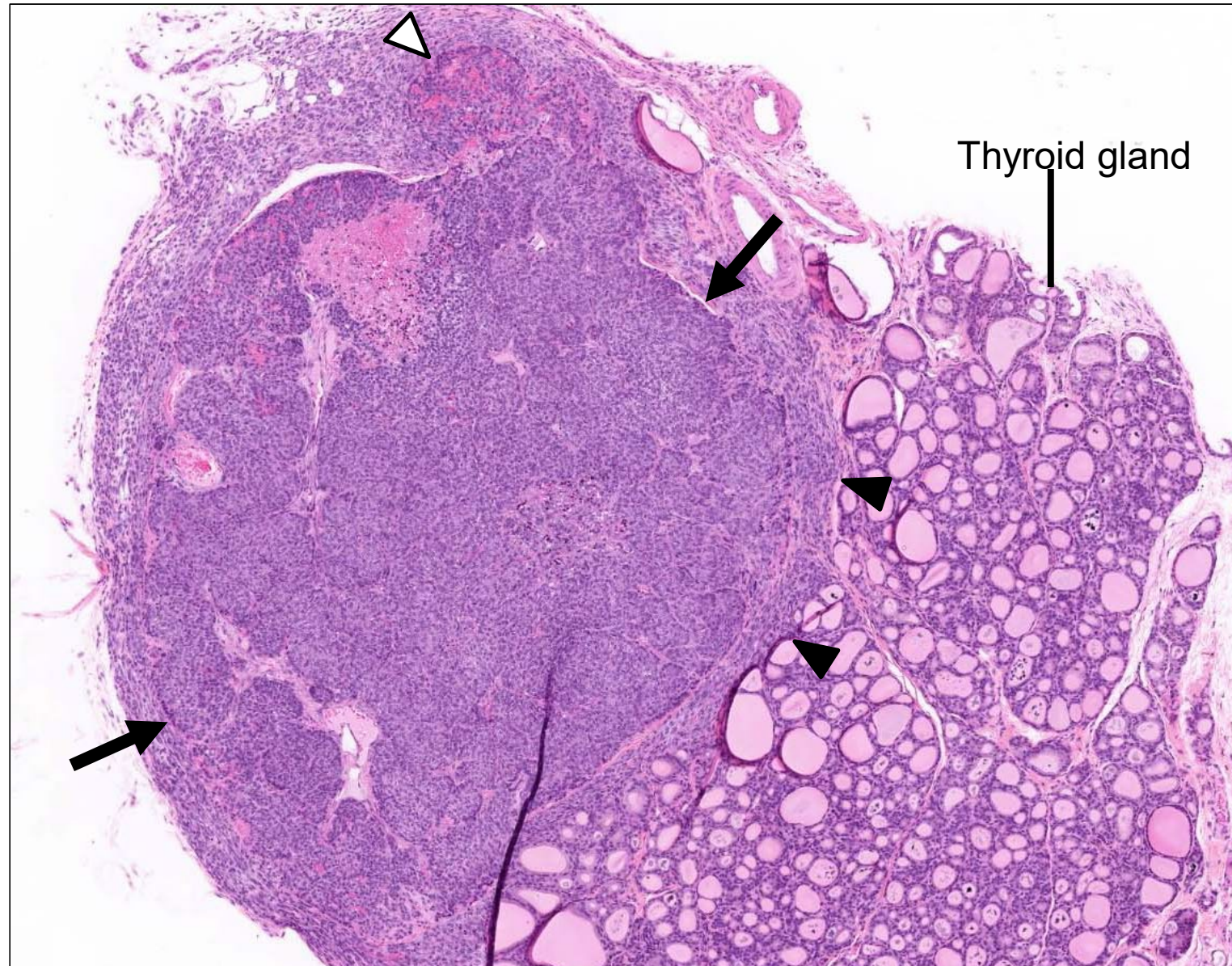
# Parathyroid Gland – Carcinoma

- Malignant tumor of chief cells of the parathyroid gland.
- Diagnostic features:
  - Large mass, often as large or larger than the normal parathyroid gland.
    - Usually has a solid growth pattern.
    - Causes compression of the normal adjacent chief cells.
  - Capsular, vascular, or intrathyroidal invasion.
    - Metastases most commonly occurs to regional lymph nodes or lungs; however, metastasis has not been described in rats.
  - Polygonal or elongated proliferative chief cells with nuclear pleomorphism and mitoses.
- Uncommon to rare in rats and mice.
- Differentiate from adenoma in that there is no invasion or metastasis with adenoma.



# Parathyroid Gland – Carcinoma

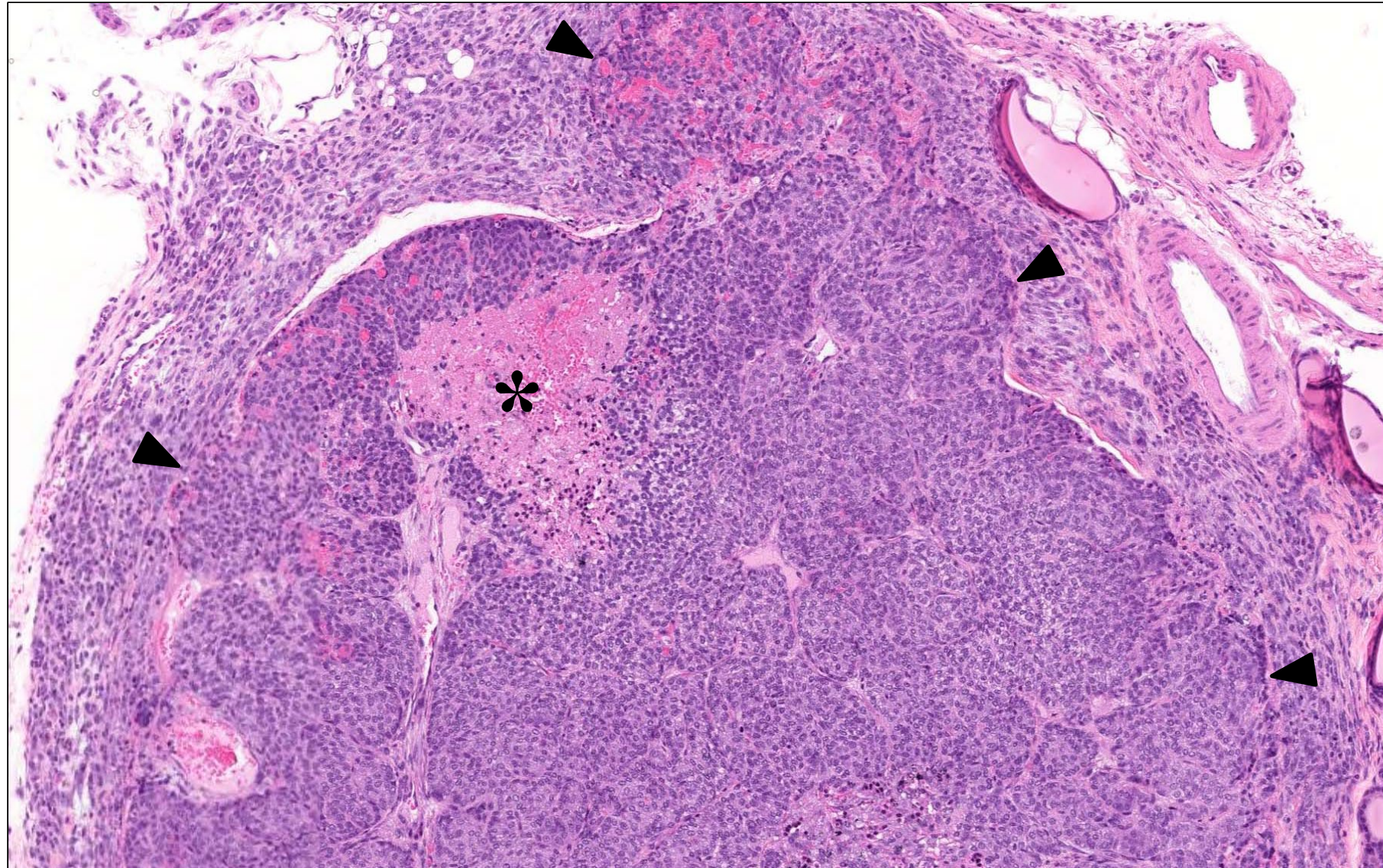
- Carcinoma (arrows) in the parathyroid gland of a rat.
- Large, poorly demarcated neoplastic proliferation of chief cells.
- Invasion of neoplastic cells into surrounding capsule (white arrowhead) and adjacent thyroid gland (black arrowheads).
- Predominantly solid growth pattern.





# Parathyroid Gland – Carcinoma

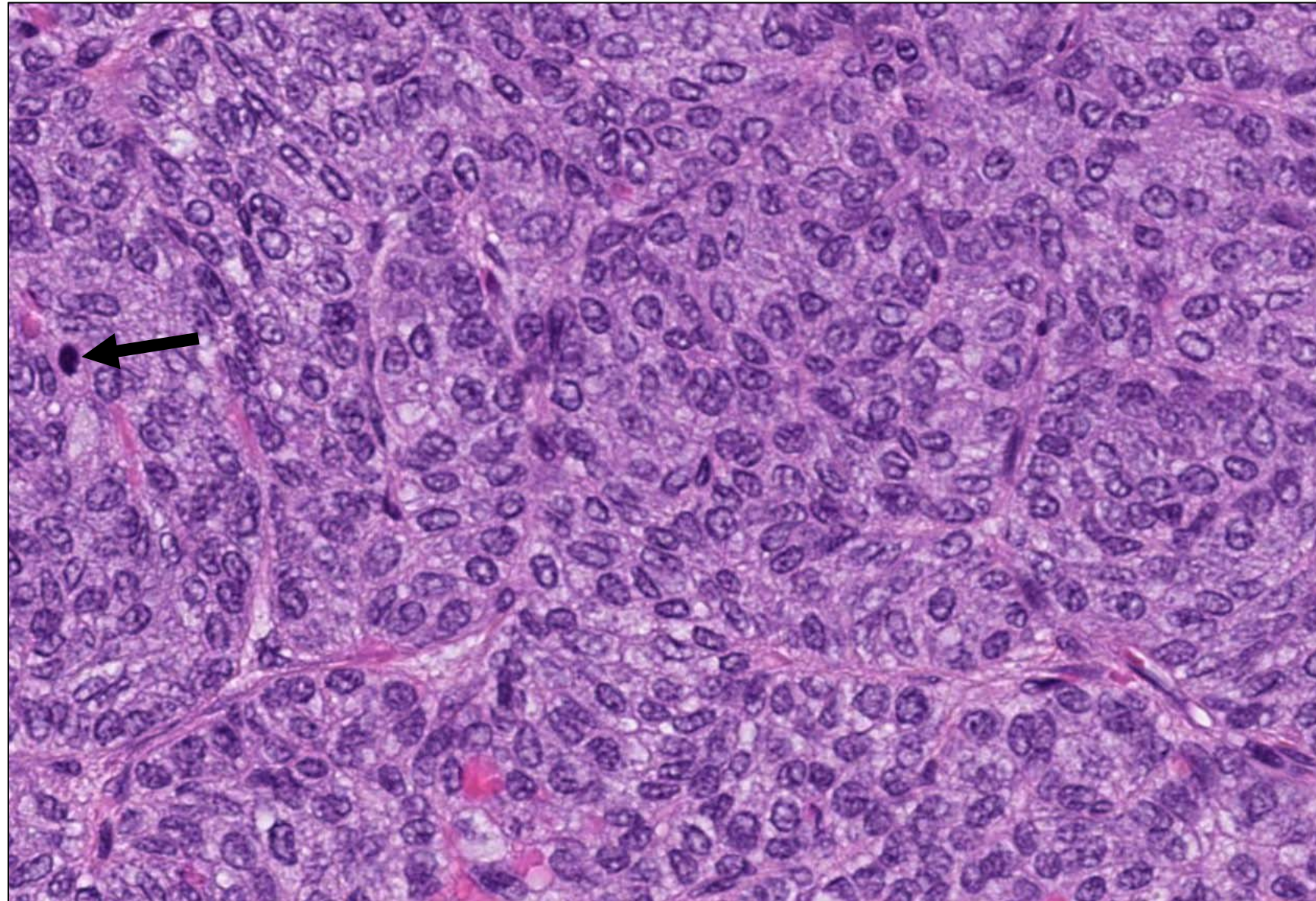
- Higher magnification of carcinoma from previous slide showing invasion of neoplastic cells into surrounding capsule and extrathyroidal tissue (black arrowheads).
- Area of necrosis (\*) within neoplasm.





# Parathyroid Gland – Carcinoma

- Higher magnification of carcinoma from previous slide.
- Neoplastic cells have large nuclei and amphophilic (purple) cytoplasm with slight variation in nuclear size and shape (pleomorphism).
- Mitotic activity is present (arrow).





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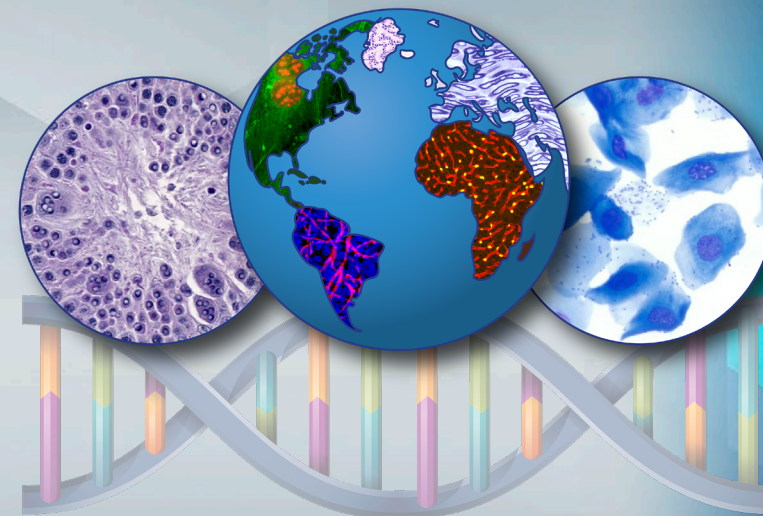
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