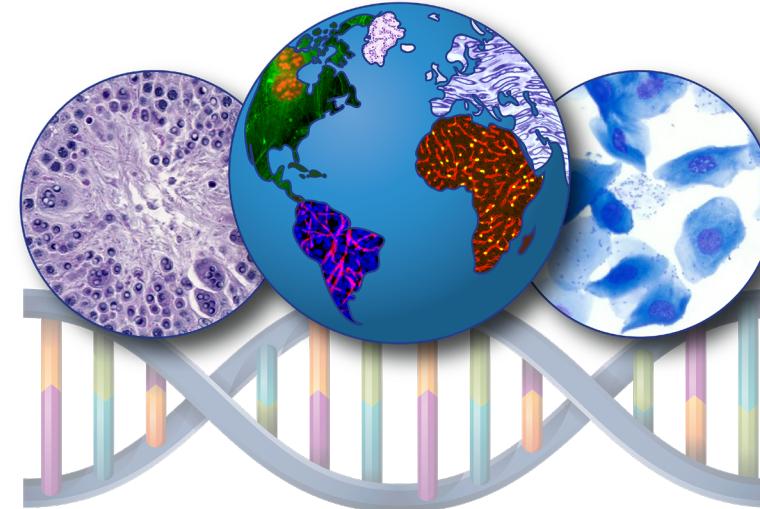


Proliferative Lesions of the Rodent Thyroid Gland



Division of Translational Toxicology Global Toxicologic Pathology Training Program

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

Proliferative Lesions of the Thyroid Gland

- Follicular Cell
 - Hyperplastic Lesions
 - Hyperplasia, Follicular Cell
 - Benign Tumors
 - Adenoma, Follicular Cell
 - Malignant Tumors
 - Carcinoma, Follicular Cell
- C Cell
 - Hyperplastic Lesions
 - Hyperplasia, C-Cell
 - Benign Tumors
 - Adenoma, C-Cell
 - Malignant Tumors
 - Carcinoma, C-Cell

Histopathological Features

- Increased numbers of cuboidal to low columnar follicular epithelial cells
 - The cells that line the follicles and produce thyroxine
- Crowding and piling up of cells may occur
- May form papillary projections into the lumen
- May be **focal, cystic, or diffuse**
- Not encapsulated
- May be accompanied by hypertrophy (increased height and volume)
- Minimal to no compression of adjacent parenchyma
- Occurs in rats and mice

Thyroid Gland – Hyperplasia, Follicular Cell

Hyperplasia, Follicular Cell, Focal

Crowded follicular epithelial cells formed from small papillary projections (arrows) into the lumen of the affected follicle (*)

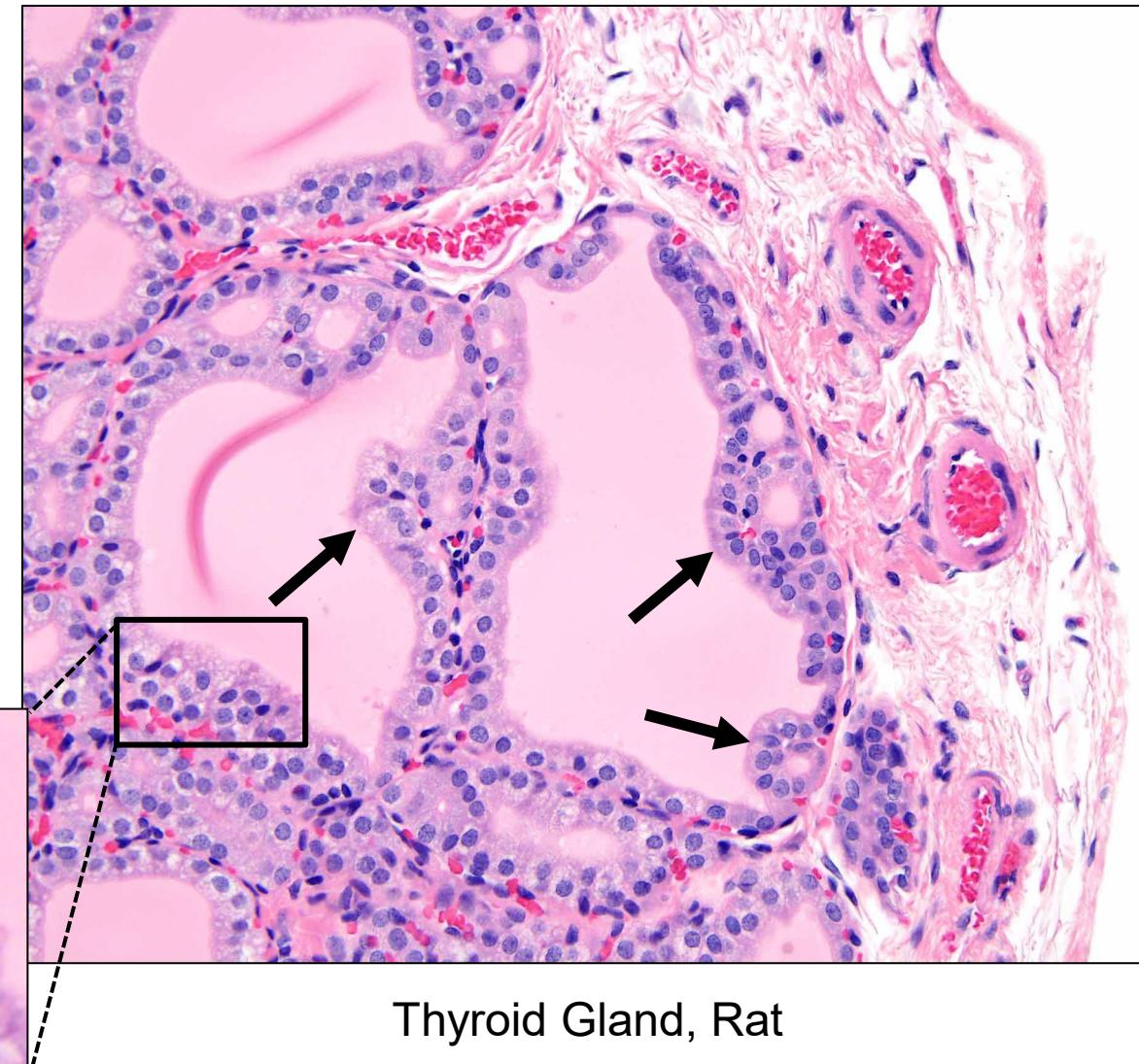
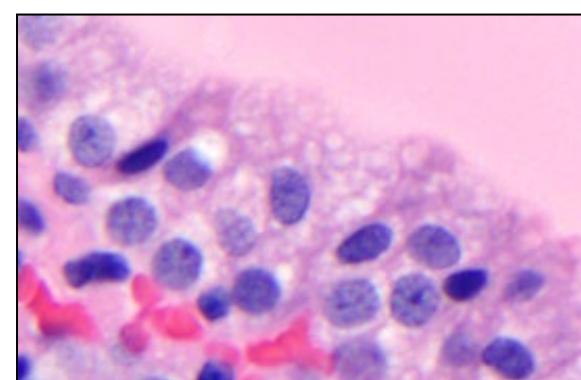


Thyroid Gland, Mouse

Thyroid Gland – Hyperplasia, Follicular Cell

Hyperplasia, Follicular Cell, Focal

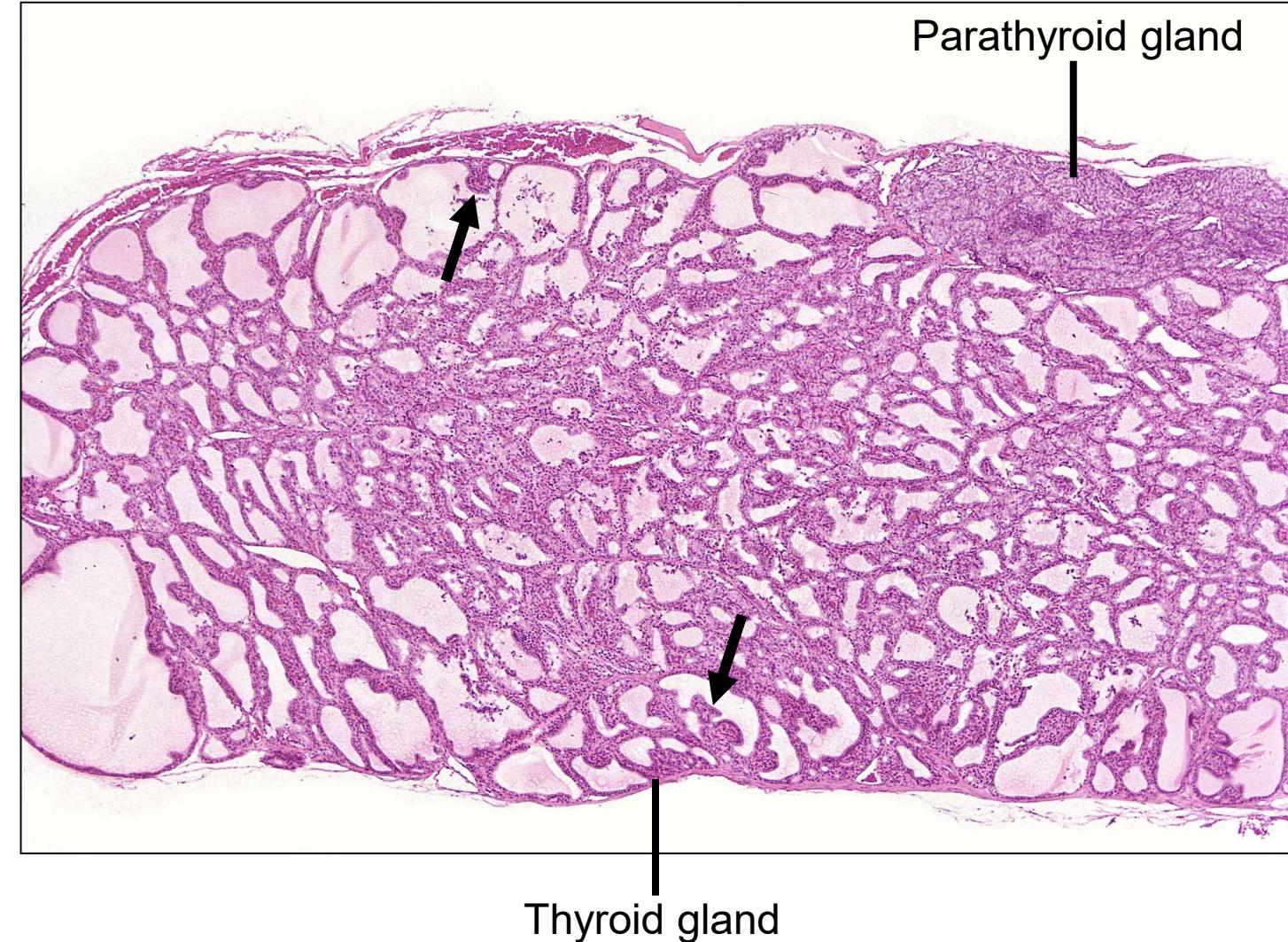
- Hyperplastic follicular epithelial cells form small papillary projections (Right: arrows) into the lumen of the affected follicles
- The hyperplastic cells can also have features of hypertrophy (enlarged cells with vacuolated cytoplasm) (inset)



Thyroid Gland – Hyperplasia, Follicular Cell

Hyperplasia, Follicular Cell, Diffuse

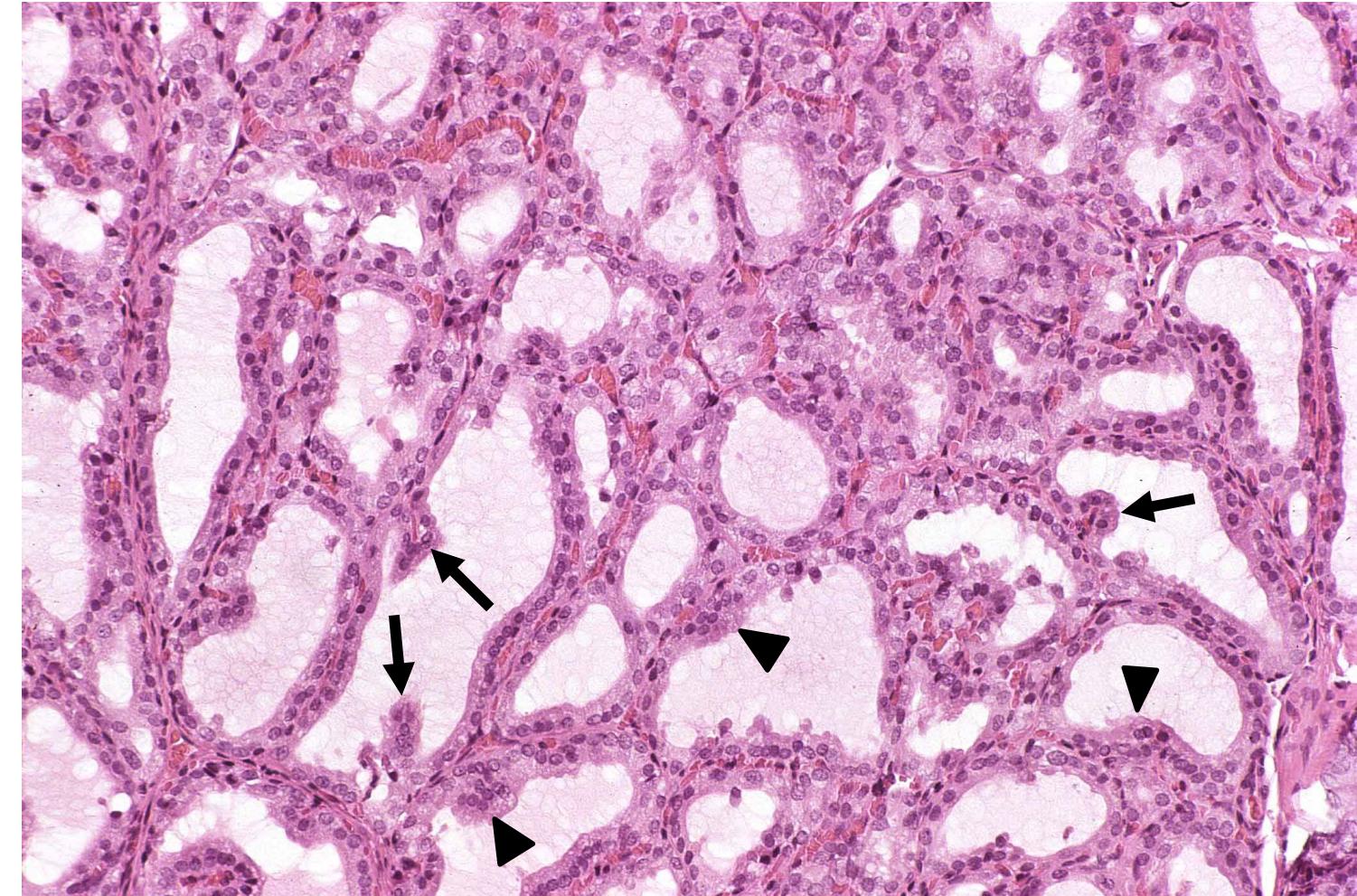
- Hyperplastic epithelial cells line all follicles; may cause overall enlargement of gland
- Hyperplastic follicular epithelial cells may form small papillary projections (arrows) into the follicular lumen
- Follicles often smaller



Thyroid Gland – Hyperplasia, Follicular Cell

Hyperplasia, Follicular Cell, Diffuse

- Higher magnification of diffuse hyperplasia from the previous slide
- The hyperplastic cells line all follicles (arrowheads) and form occasional small papillary projections (arrows) into the follicular lumen



Histopathological Features

- Benign nodular proliferation of follicular epithelial cells
- Well demarcated and may be partially or completely encapsulated
- Often compresses adjacent parenchyma
- Single or multiple layers of cuboidal to columnar cells
- Greater degree of cellular atypia than in hyperplasia
- Increased nuclear-to-cytoplasmic ratio, eosinophilic to basophilic cytoplasm that may be vacuolated, and variably distinct nucleoli
- Growth patterns are **follicular, cystic, papillary, and solid**
 - More than one pattern may be present in the same adenoma
 - Growth patterns are modifiers and their inclusion in the diagnosis is optional
- Occurs in rats and mice

Histopathological Features of Growth Patterns

- **Follicular**
 - Variably sized, densely packed follicles
- **Cystic**
 - Large, dilated follicles
- **Papillary**
 - Follicles with complex branching papillary structures protruding into the lumens
- **Solid**
 - Cells are arranged in solid sheets, nests, or lobules
 - May resemble C-cell tumors, but small colloid-containing follicles are often present
 - Immunohistochemistry is positive for thyroglobulin, negative for calcitonin

Thyroid Gland – Adenoma, Follicular Cell

- Well-demarcated follicular cell adenoma (arrows)
- Slight compression of adjacent parenchyma (arrowheads)
- Follicular and papillary growth patterns



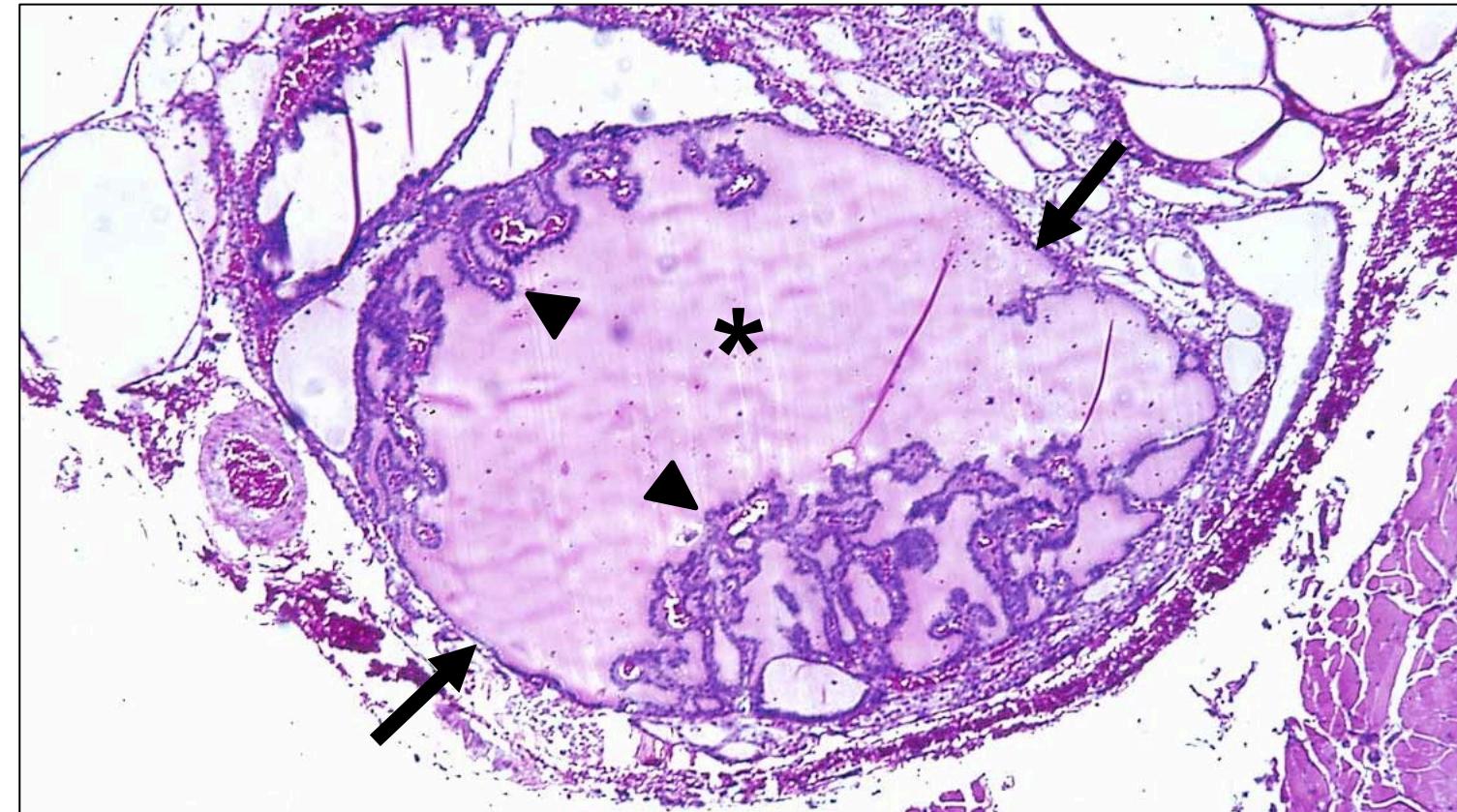
Thyroid Gland – Adenoma, Follicular Cell

- Higher magnification of follicular cell adenoma from the previous slide
- Neoplastic follicular cells are well differentiated and form variably sized follicles (*) and papillary projections (arrows)



Thyroid Gland – Adenoma, Follicular Cell

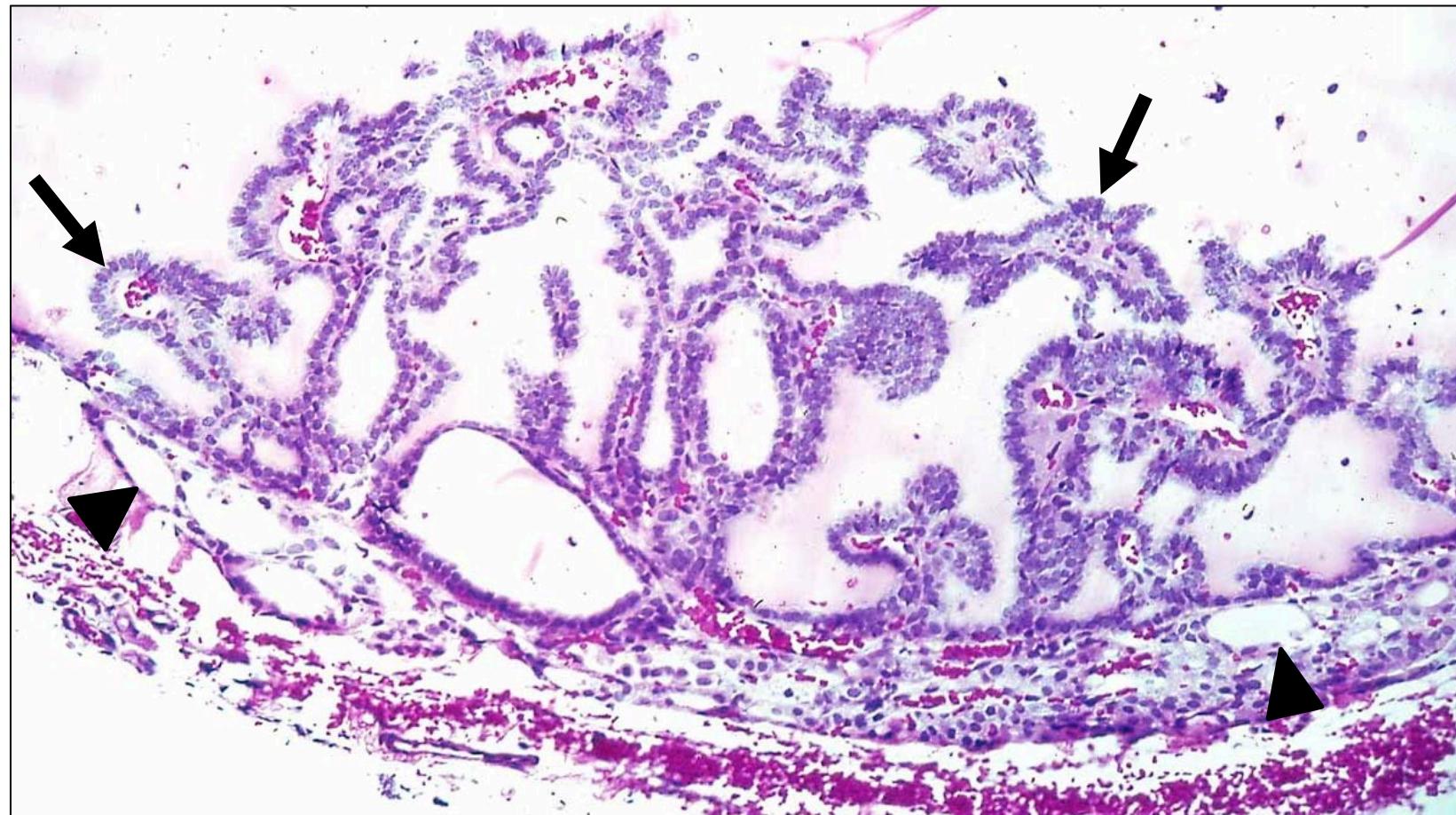
- Well-demarcated follicular cell adenoma (arrows)
- Compression of adjacent thyroid parenchyma
- Cystic (*) and papillary (arrowheads) growth patterns



Thyroid Gland, Rat

Thyroid Gland – Adenoma, Follicular Cell

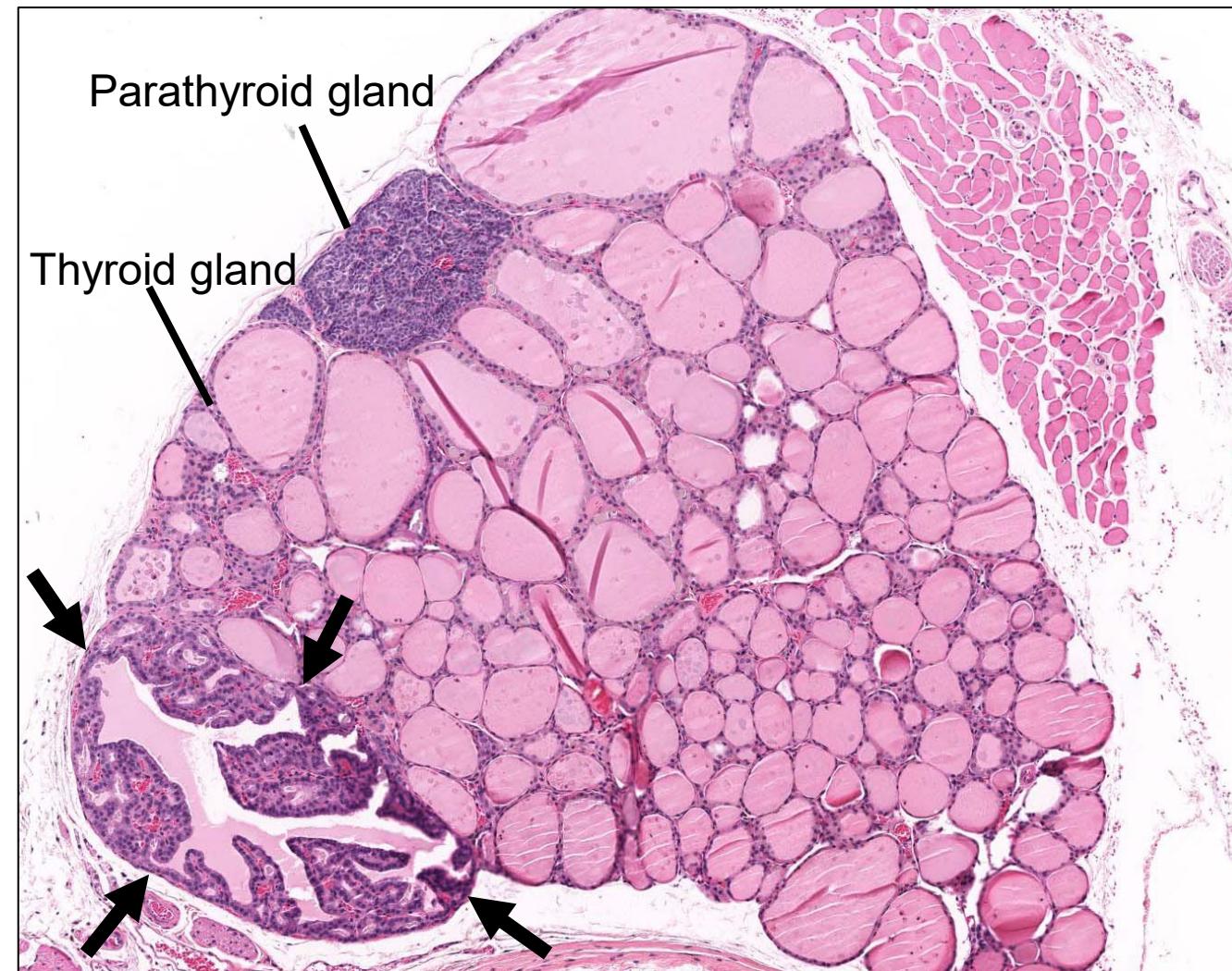
- Higher magnification of follicular cell adenoma from previous slide
- Well-differentiated neoplastic follicular cells forming papillary projections (arrows)
- Compression of adjacent thyroid follicles (arrowheads)



Thyroid Gland, Rat

Thyroid Gland – Adenoma, Follicular Cell

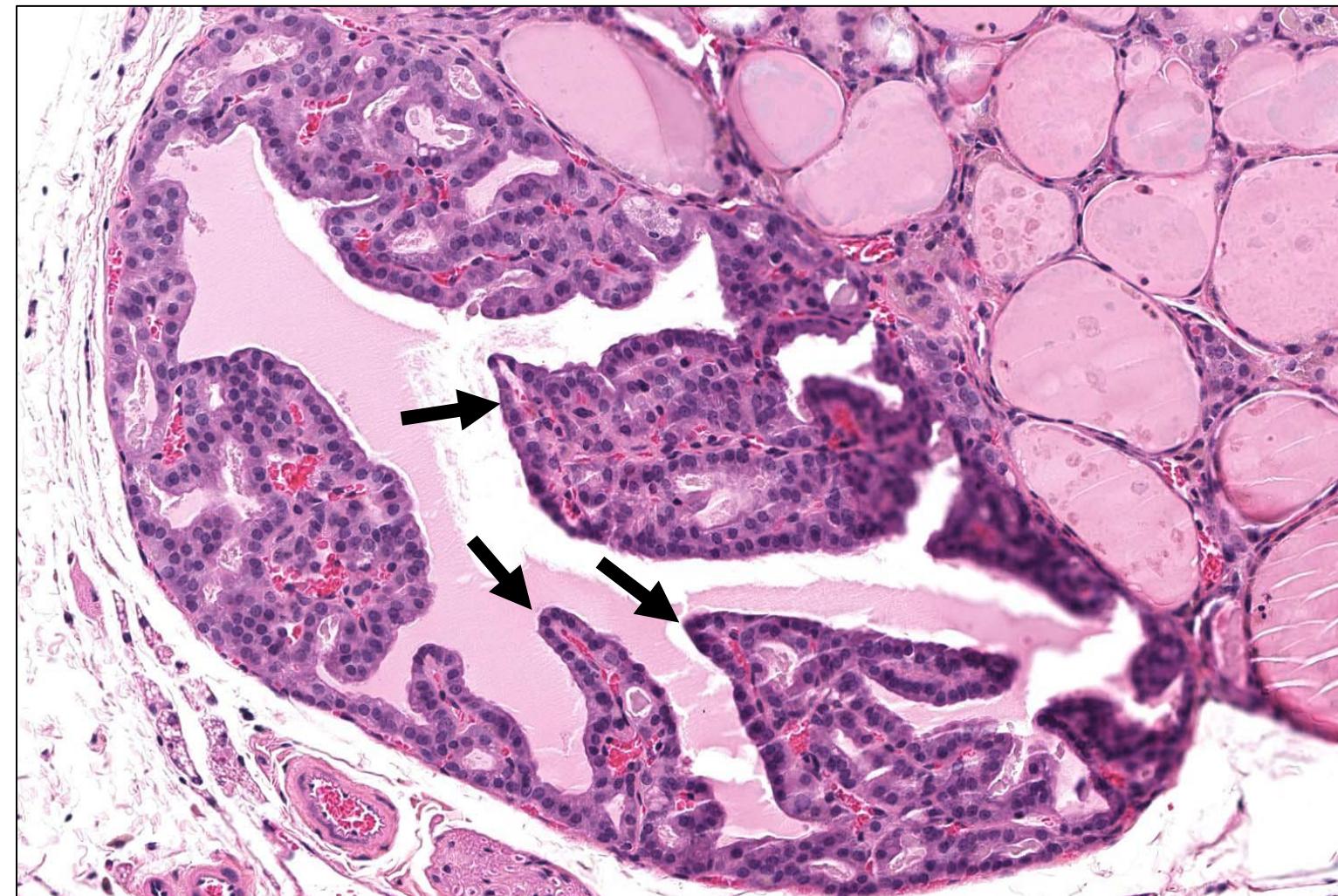
- Well-demarcated follicular cell adenoma (arrows)
- Papillary growth pattern
- Neoplastic cells can have basophilic (image on right), eosinophilic, or vacuolated cytoplasm



Thyroid Gland, Mouse

Thyroid Gland – Adenoma, Follicular Cell

- Higher magnification of well-demarcated follicular cell adenoma from previous slide
- Well-differentiated neoplastic follicular cells are forming papillary projections (arrows)



Thyroid Gland, Mouse

Histopathological Features

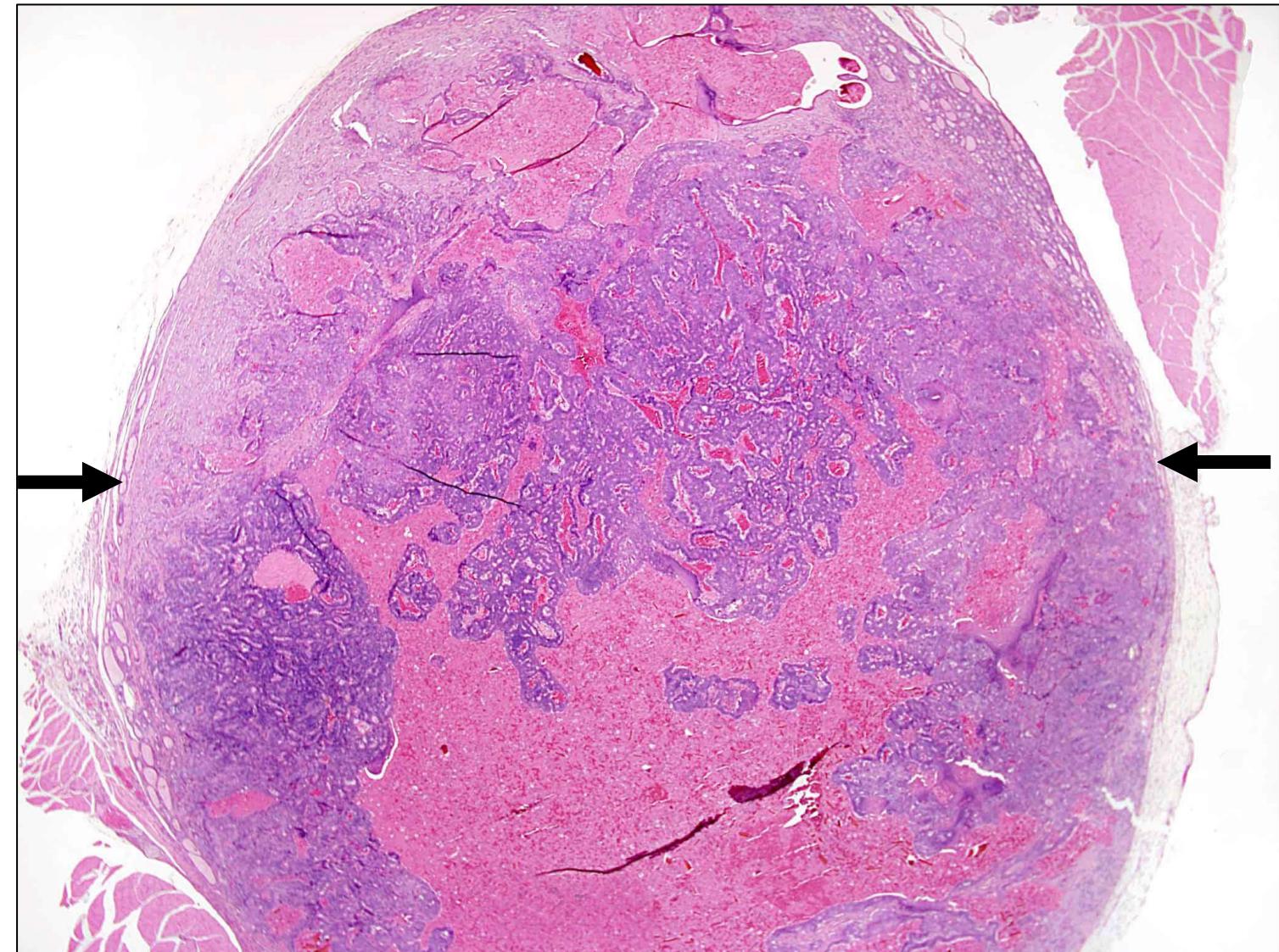
- Malignant proliferation of follicular epithelial cells
- Poorly demarcated mass tumor with capsular and/or vascular invasion
- Metastasis may occur
- Scirrhous reaction (fibrosis), necrosis, hemorrhage, and mineralization may be present
- Cellular atypia or pleomorphism (varied in size and shape) may be present
- May have numerous mitotic figures
- Growth patterns include **follicular**, **papillary**, **pleomorphic**, and **solid**
 - Growth patterns are modifiers and their inclusion in the diagnosis is optional
- May progress from adenomas
- Occurs in rats and mice

Histopathological Features of Growth Patterns

- **Follicular**
 - Irregular follicles formed by multiple layers of epithelial cells
- **Papillary**
 - Irregular papillary structures formed by single or multiple layers of epithelial cells
- **Pleomorphic**
 - Pleomorphic (varied in size and shape and/or nuclear appearance) or anaplastic (poorly differentiated) cells that may be multinucleated
- **Solid**
 - Atypical polygonal cells arranged in solid sheets
 - May resemble C-cell tumors

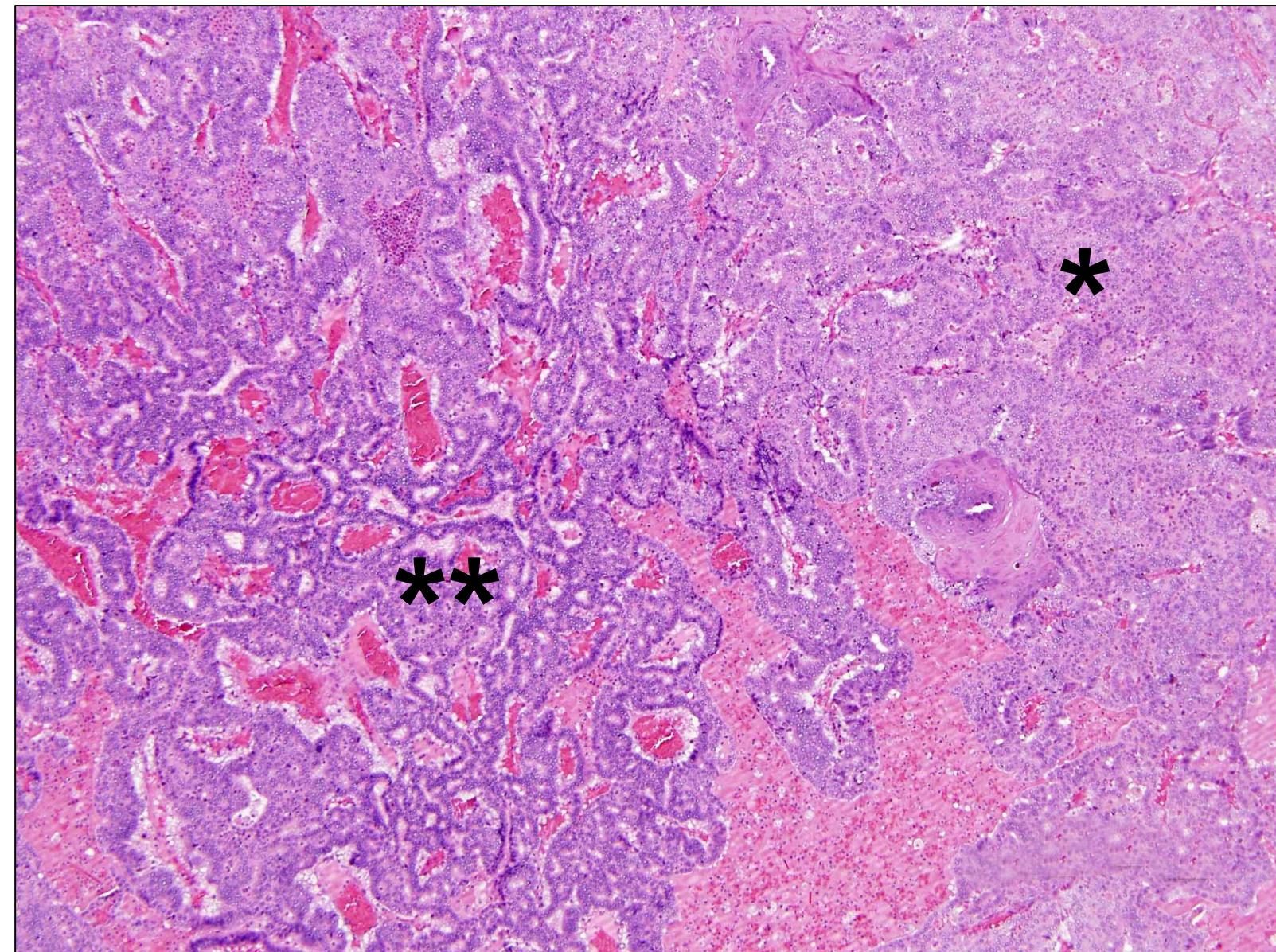
Thyroid Gland – Carcinoma, Follicular Cell

- Follicular cell carcinoma (arrows) in the thyroid gland
- Tumor effaces the thyroid gland



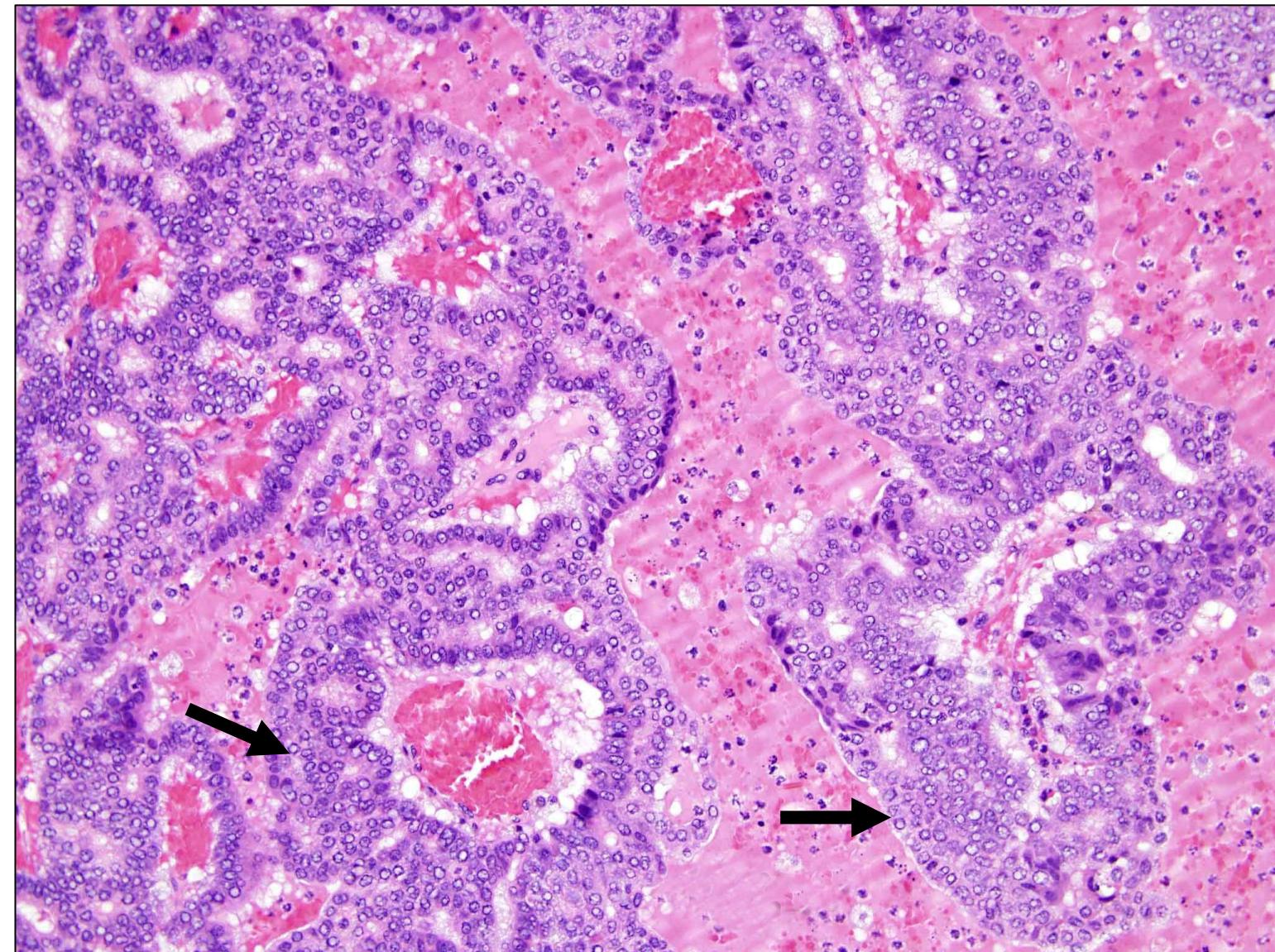
Thyroid Gland – Carcinoma, Follicular Cell

- Higher magnification of follicular cell carcinoma from previous slide
- Mixture of solid (*) and papillary (**) growth patterns



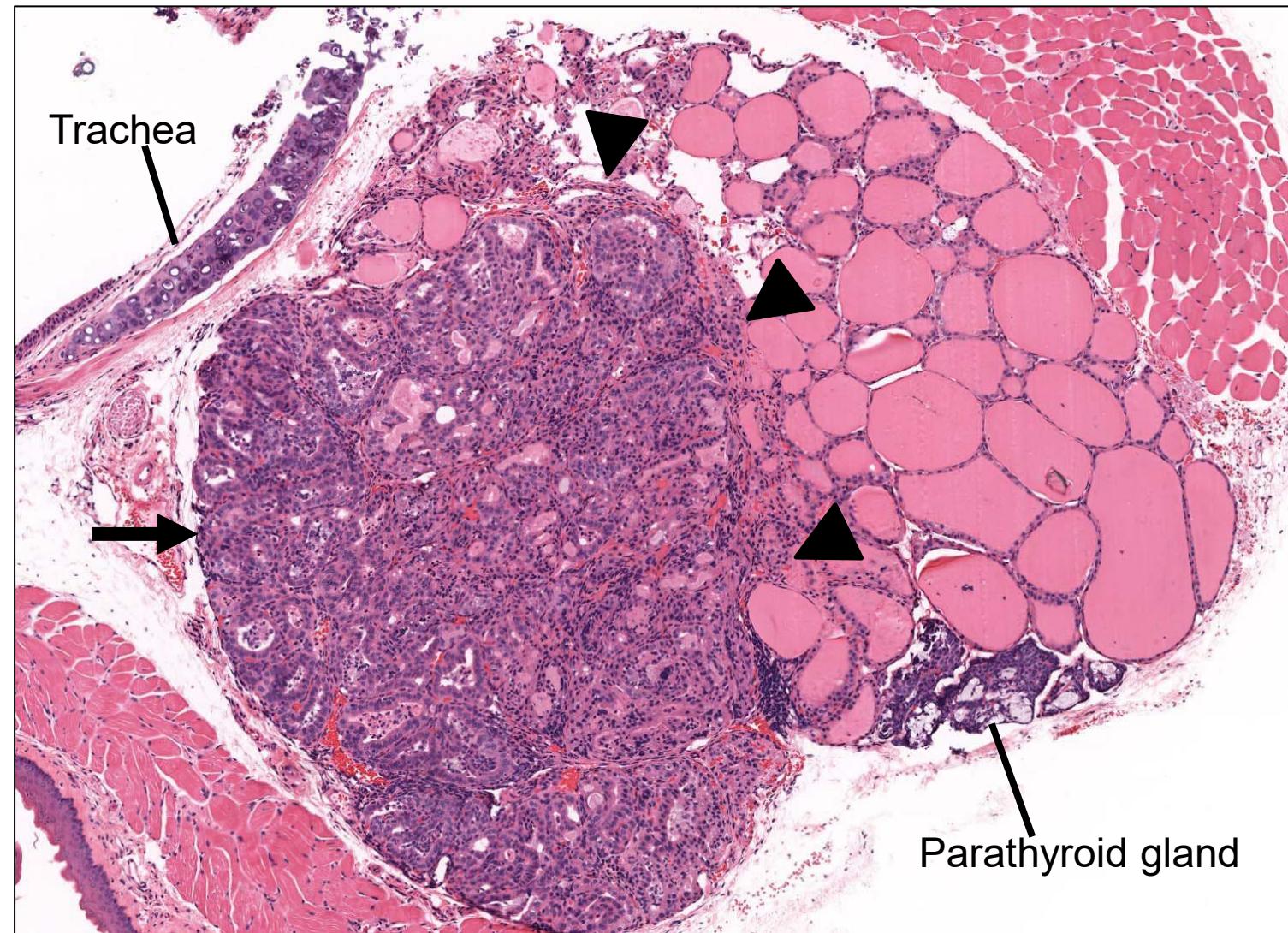
Thyroid Gland – Carcinoma, Follicular Cell

Higher magnification showing irregular papillary structures formed by multiple layers of disorganized epithelial cells (arrows)



Thyroid Gland – Carcinoma, Follicular Cell

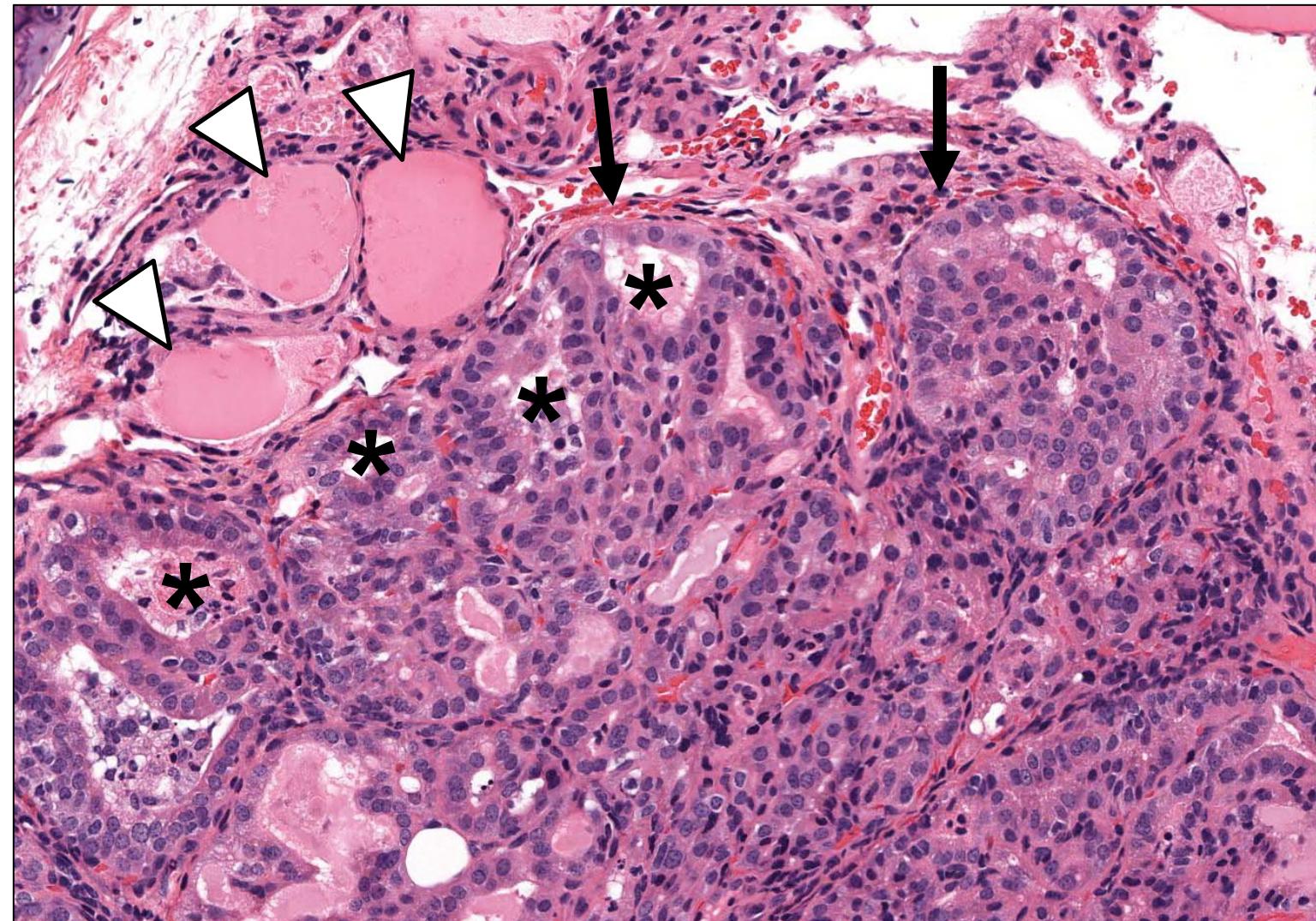
- Follicular cell carcinoma (arrow)
- Invasion of adjacent thyroid parenchyma is present (arrowheads)



Thyroid Gland, Mouse

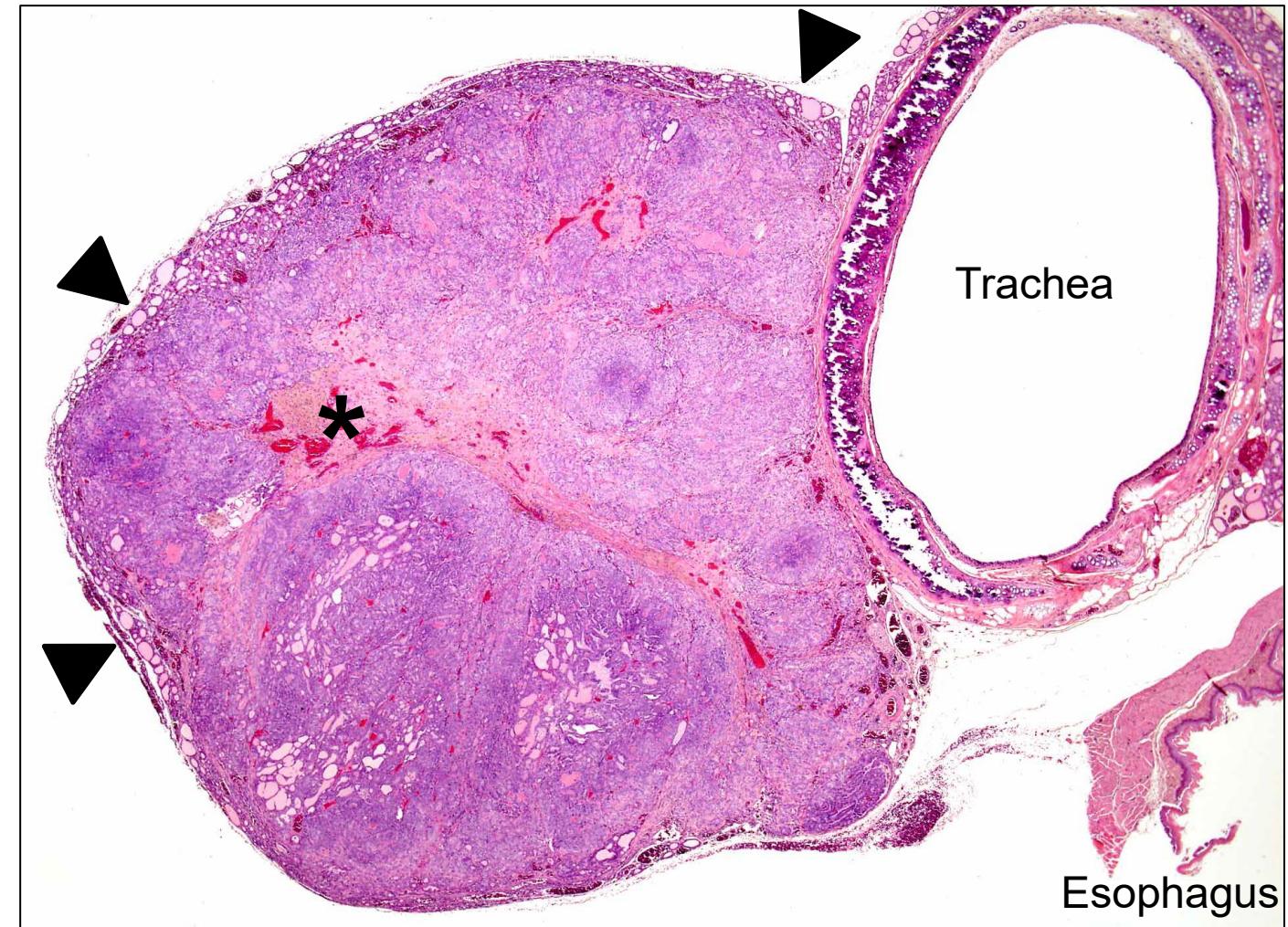
Thyroid Gland – Carcinoma, Follicular Cell

- Higher magnification of tumor on previous slide
- Irregular follicles (*) formed by neoplastic cells
- Invasion of adjacent thyroid parenchyma (arrows)
- Preexisting follicles (arrowheads) are present along the edge of the tumor



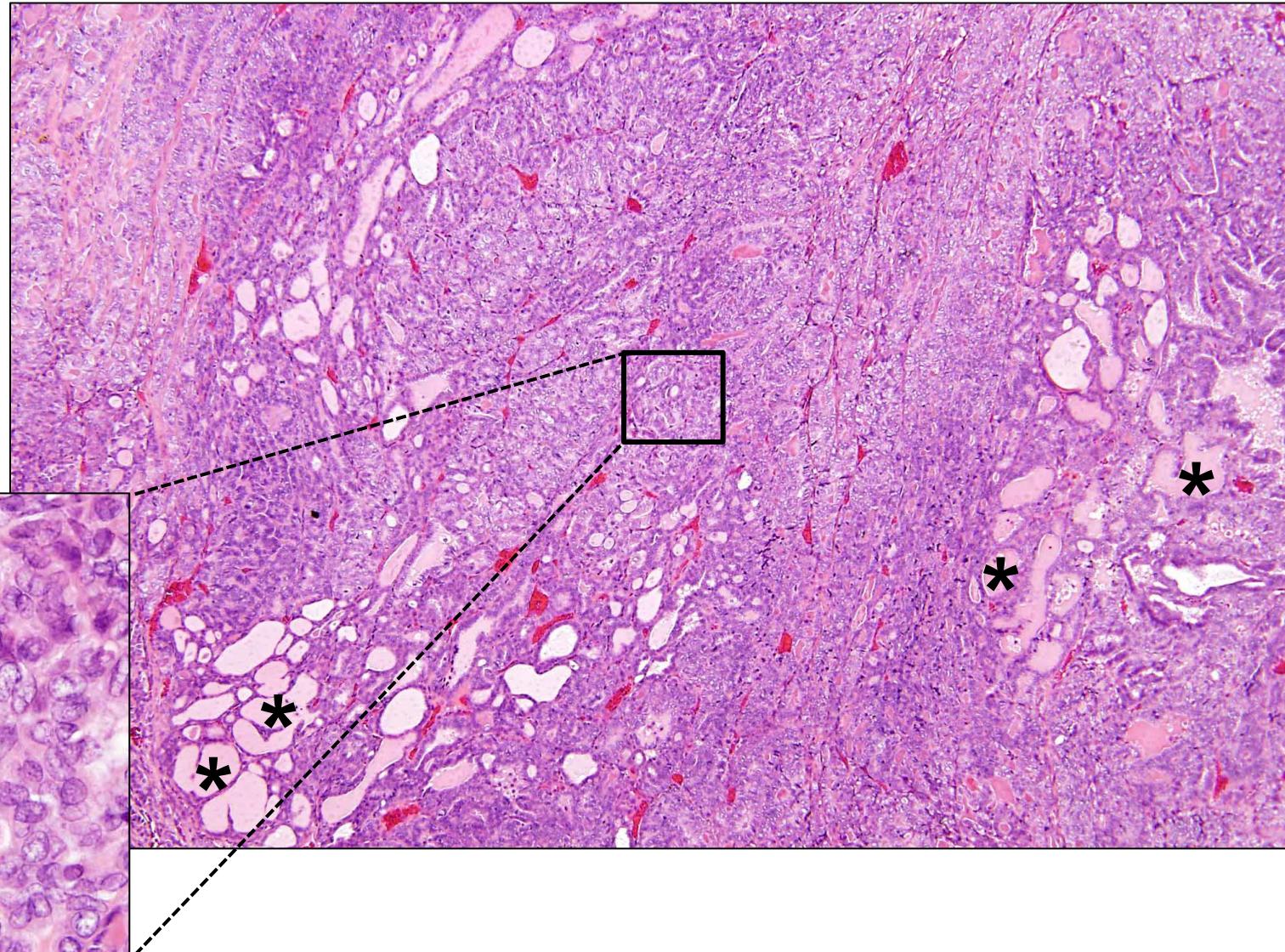
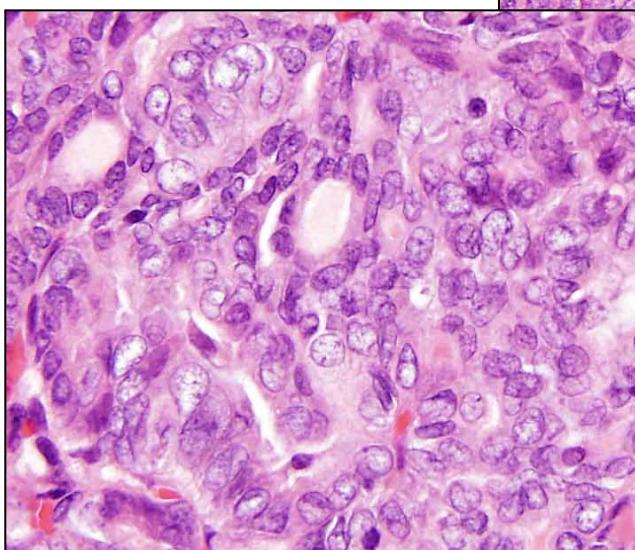
Thyroid Gland – Carcinoma, Follicular Cell

- Follicular cell carcinoma effaces the thyroid gland
- Small residual foci of remnant thyroid follicles are present along the periphery of the tumor (arrowheads)
- Pale eosinophilic area of necrosis (*)



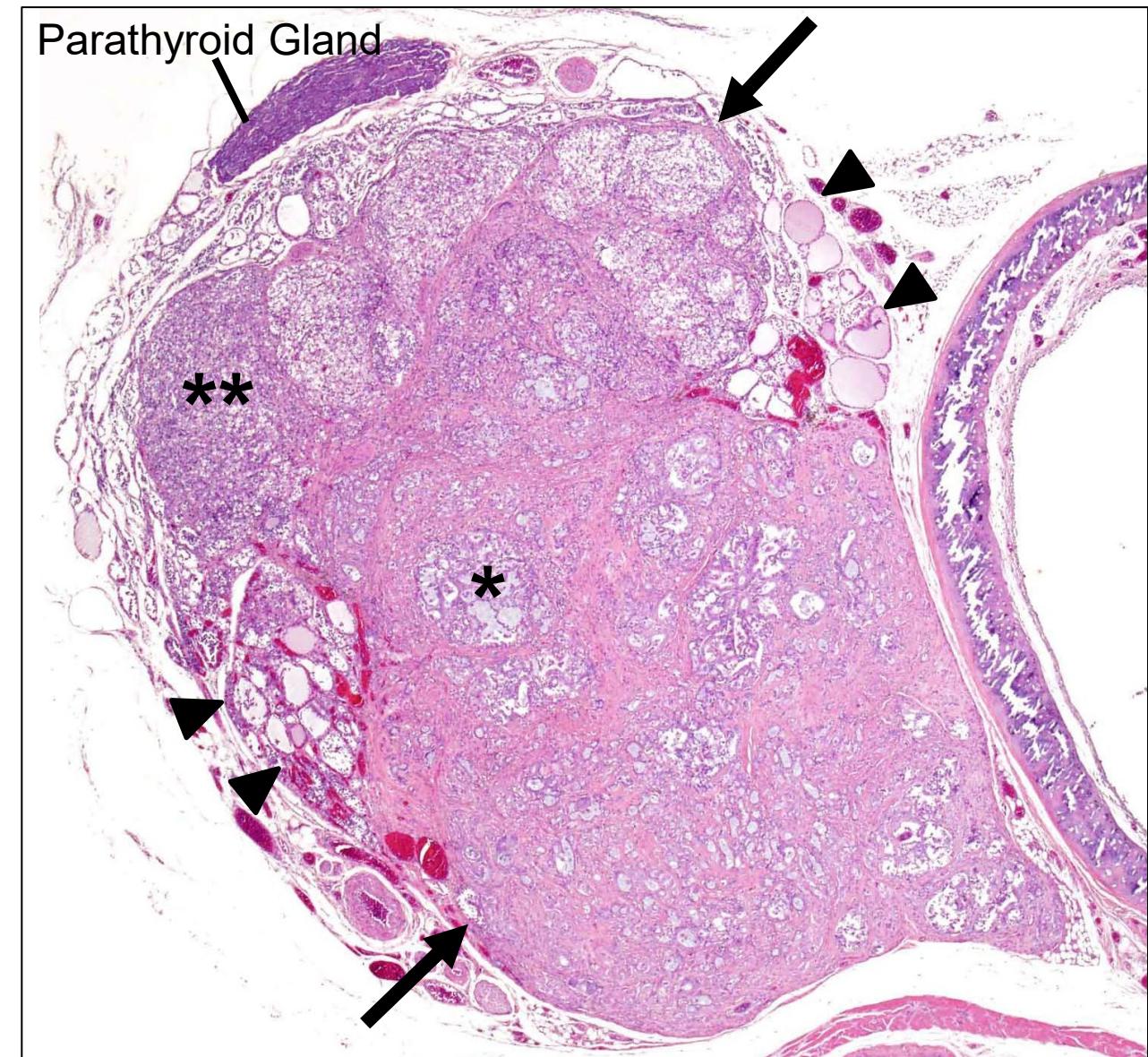
Thyroid Gland – Carcinoma, Follicular Cell

- Higher magnification of carcinoma from previous slide
- Numerous irregular follicles containing colloid (*)
- Neoplastic cells are pleomorphic (varied in size and shape) (inset)



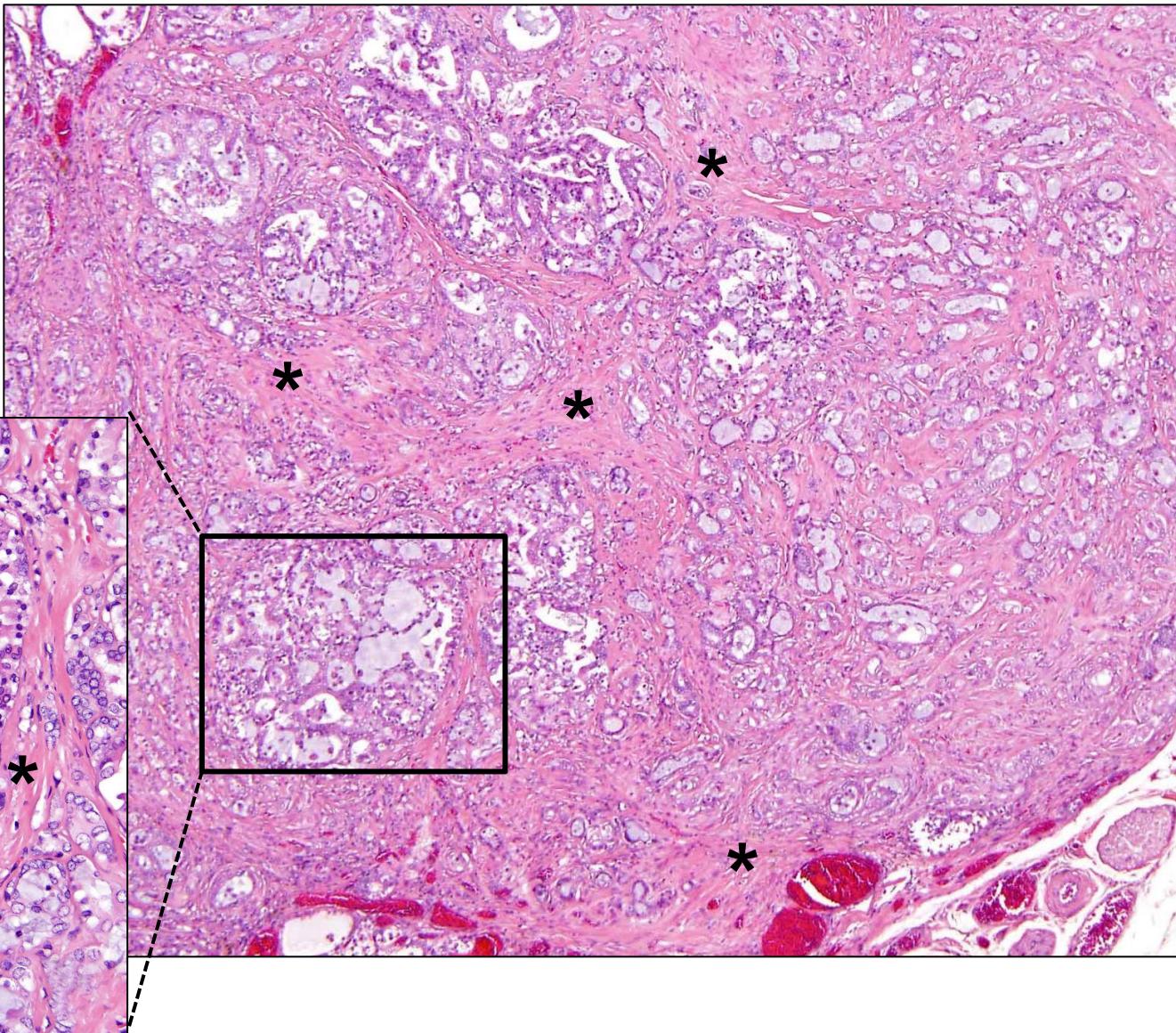
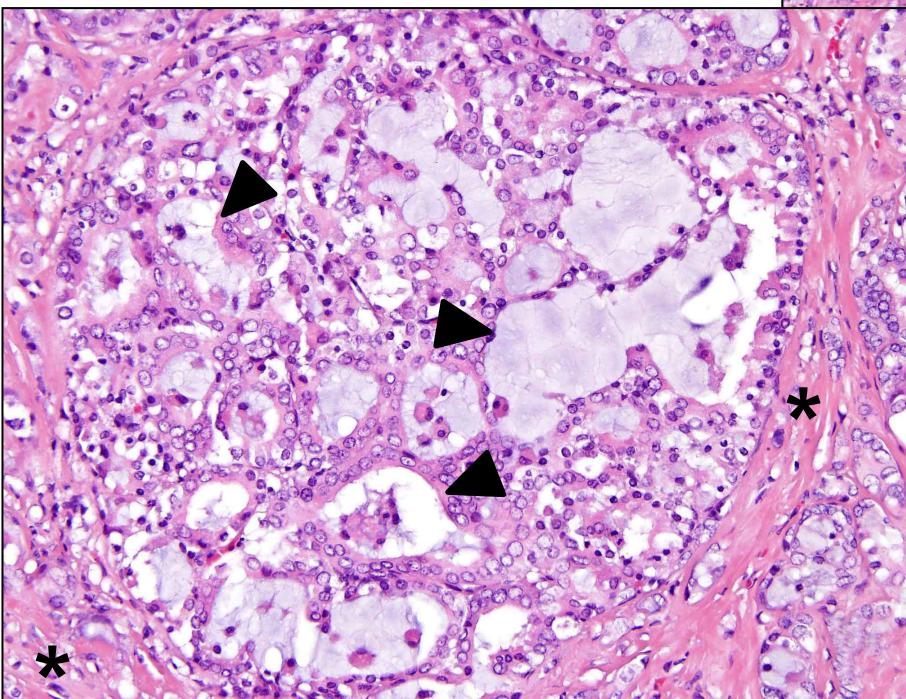
Thyroid Gland – Carcinoma, Follicular Cell

- Follicular cell carcinoma (arrows)
- Small residual foci of remaining thyroid follicles along the periphery (arrowheads)
- Mixture of follicular (*) and solid (**) growth patterns



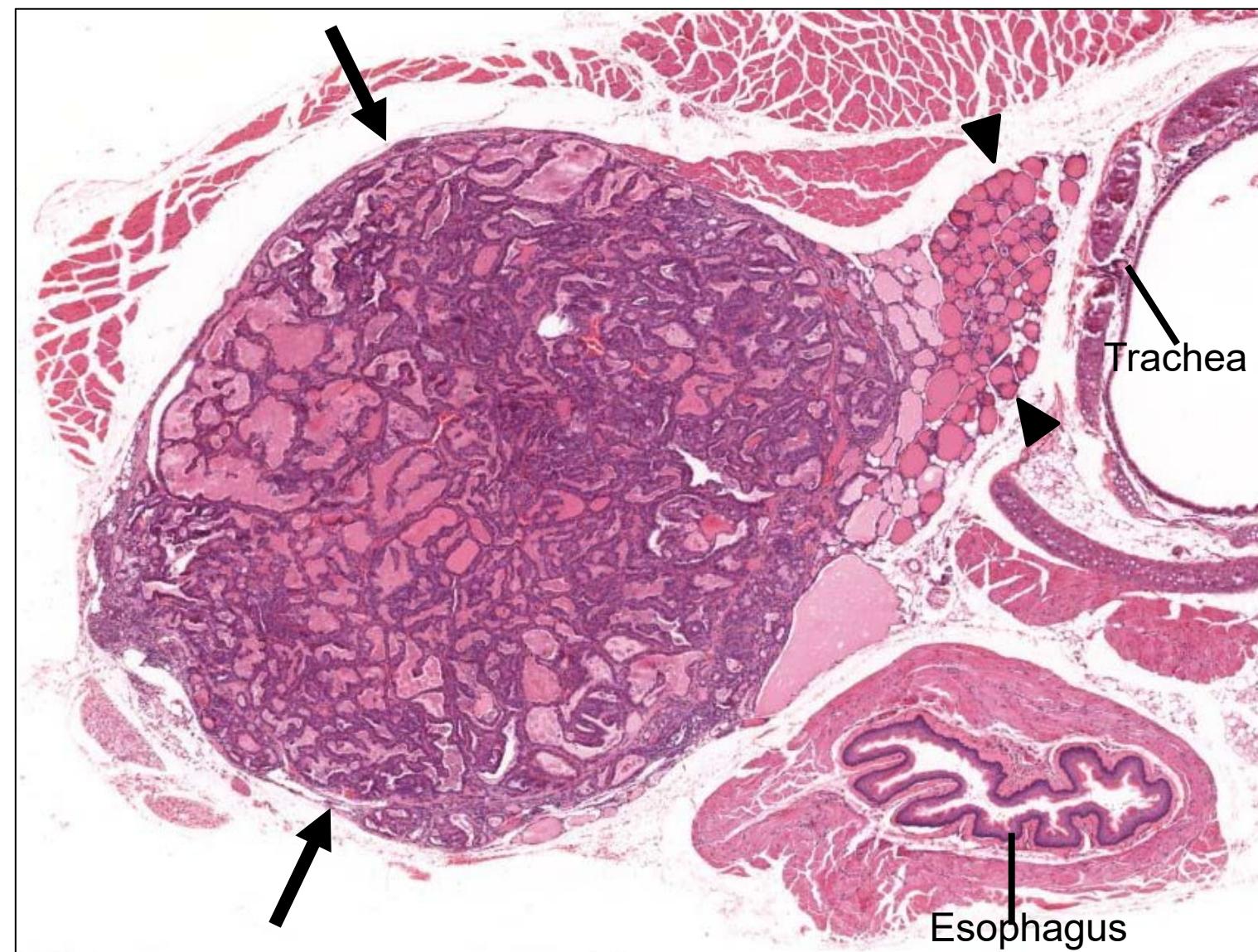
Thyroid Gland – Carcinoma, Follicular Cell

- Higher magnification of previous slide showing densely packed, irregular follicles (inset, arrowheads)
- Bands of fibrosis (scirrhous response) course through the neoplasm (*)



Thyroid Gland – Carcinoma, Follicular Cell

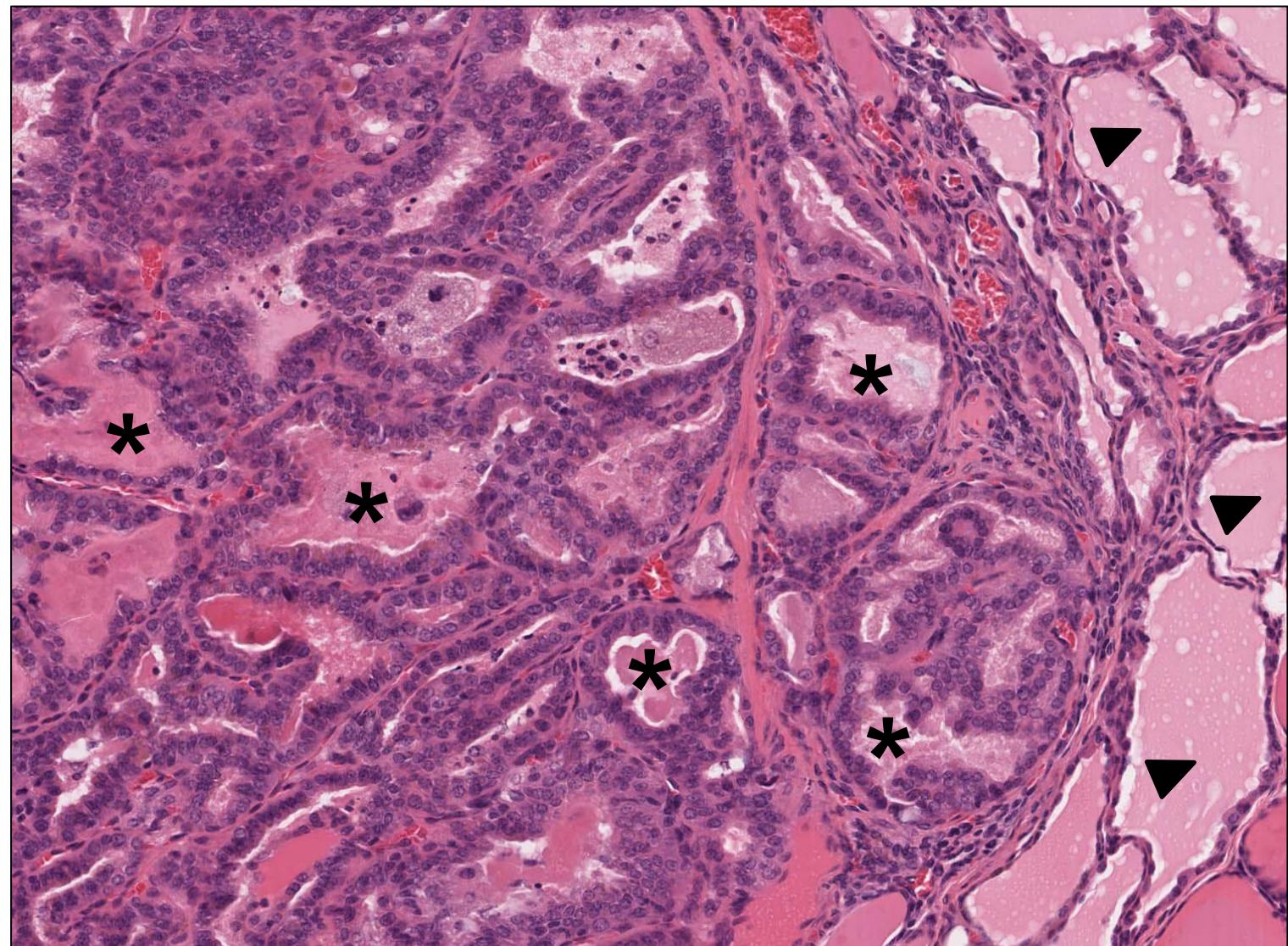
- Follicular cell carcinoma (arrows) effaces the thyroid gland
- A small residual focus of preexisting thyroid follicles remains along the periphery (arrowheads)



Thyroid Gland, Mouse

Thyroid Gland – Carcinoma, Follicular Cell

- Higher magnification showing the neoplastic cells forming densely packed, irregular follicles (*)
- Invasion of adjacent thyroid parenchyma
- Small residual focus of preexisting thyroid follicles (arrowheads) along the periphery



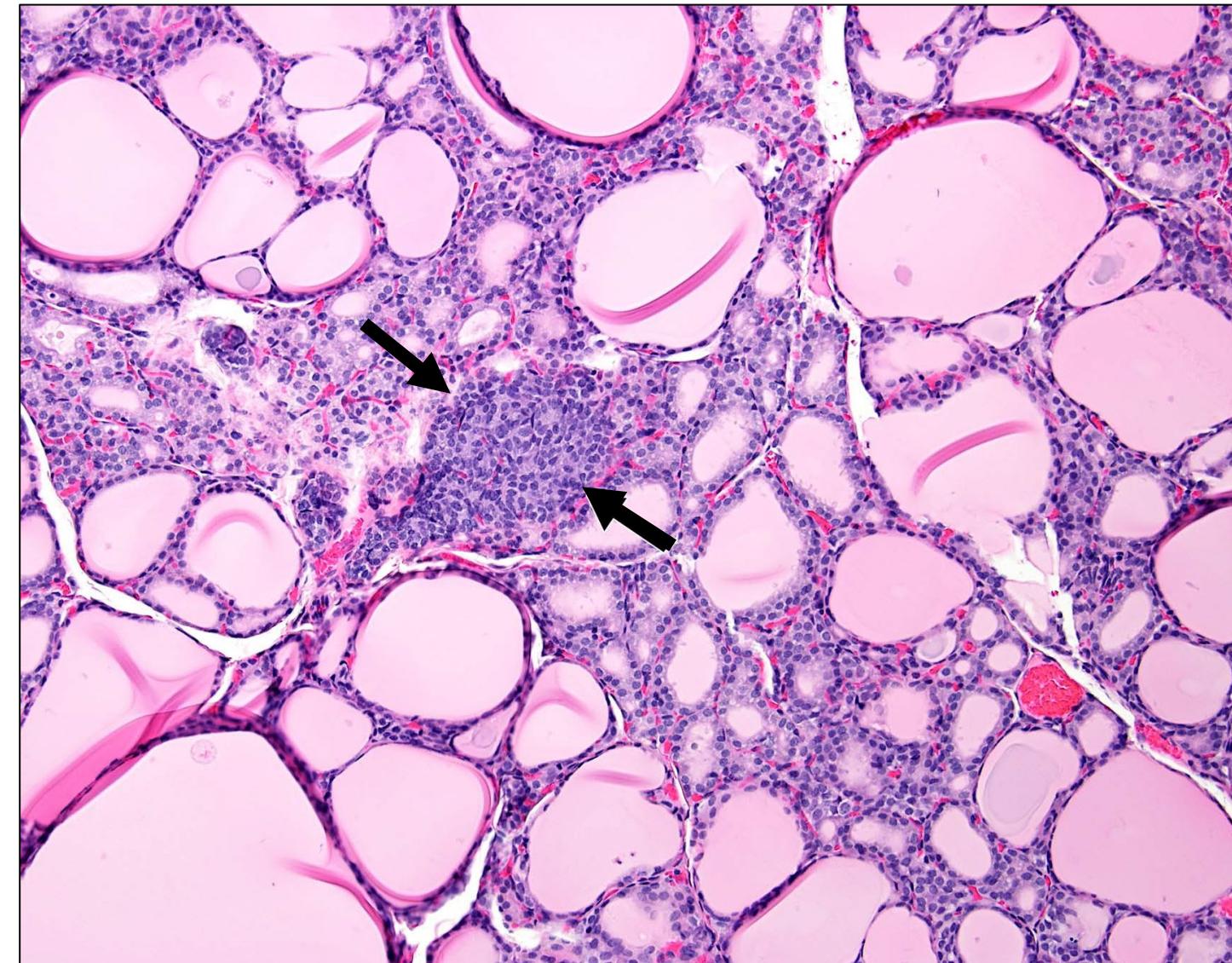
Histopathological Features

- Increased numbers of C cells (parafollicular cells)
 - C cells are polygonal cells with indistinct cell borders that produce the hormone calcitonin
- May be focal or diffuse
 - **Focal** hyperplasia is preneoplastic (may progress to adenoma, then carcinoma)
 - **Diffuse** hyperplasia is not considered preneoplastic and is a response to C cell stimulation, such as with chronic hypercalcemia
- **Focal**
 - Small nodular accumulation of C cells
 - Smaller than the area of 5 average follicles
 - No capsule and no compression of adjacent tissue
 - **Complex** is a rare type of focal hyperplasia that also contains ganglion cells (seen only in rats)
- **Diffuse**
 - Diffuse increase in numbers of C cells involving most follicles with no discrete nodule
 - No compression of adjacent tissue
 - Compare with age- and sex-matched controls to differentiate from normal aging change in rat
- Occurs in rats and mice; note that C cell numbers normally increase in aged rats

Thyroid Gland – Hyperplasia, C-Cell

Hyperplasia, C-Cell, Focal

Focal, nodular
accumulation of C cells
(arrows) that is smaller than
the area of 5 average
contiguous thyroid follicles

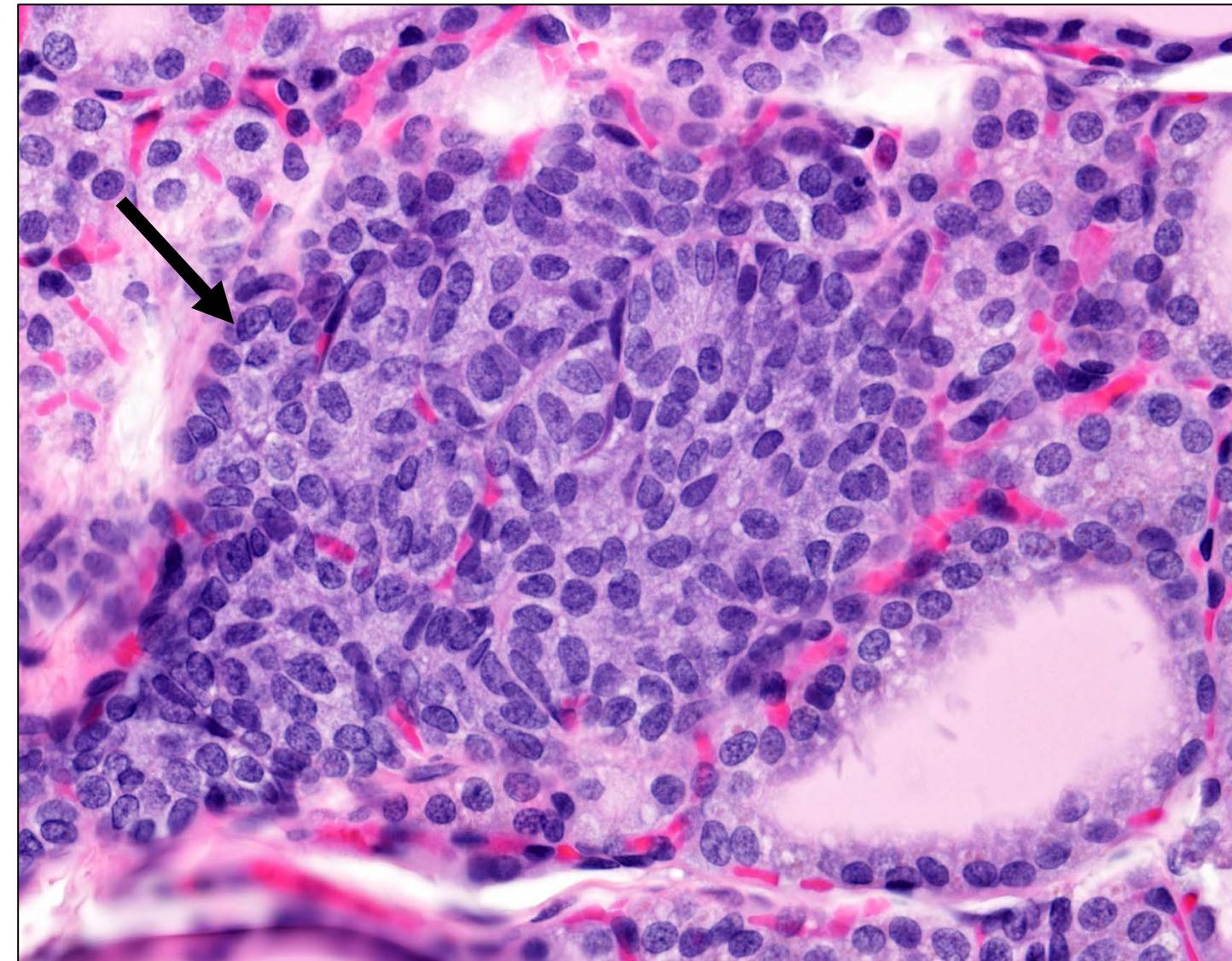


Thyroid Gland, Rat

Thyroid Gland – Hyperplasia, C-Cell

Hyperplasia, C-Cell, Focal

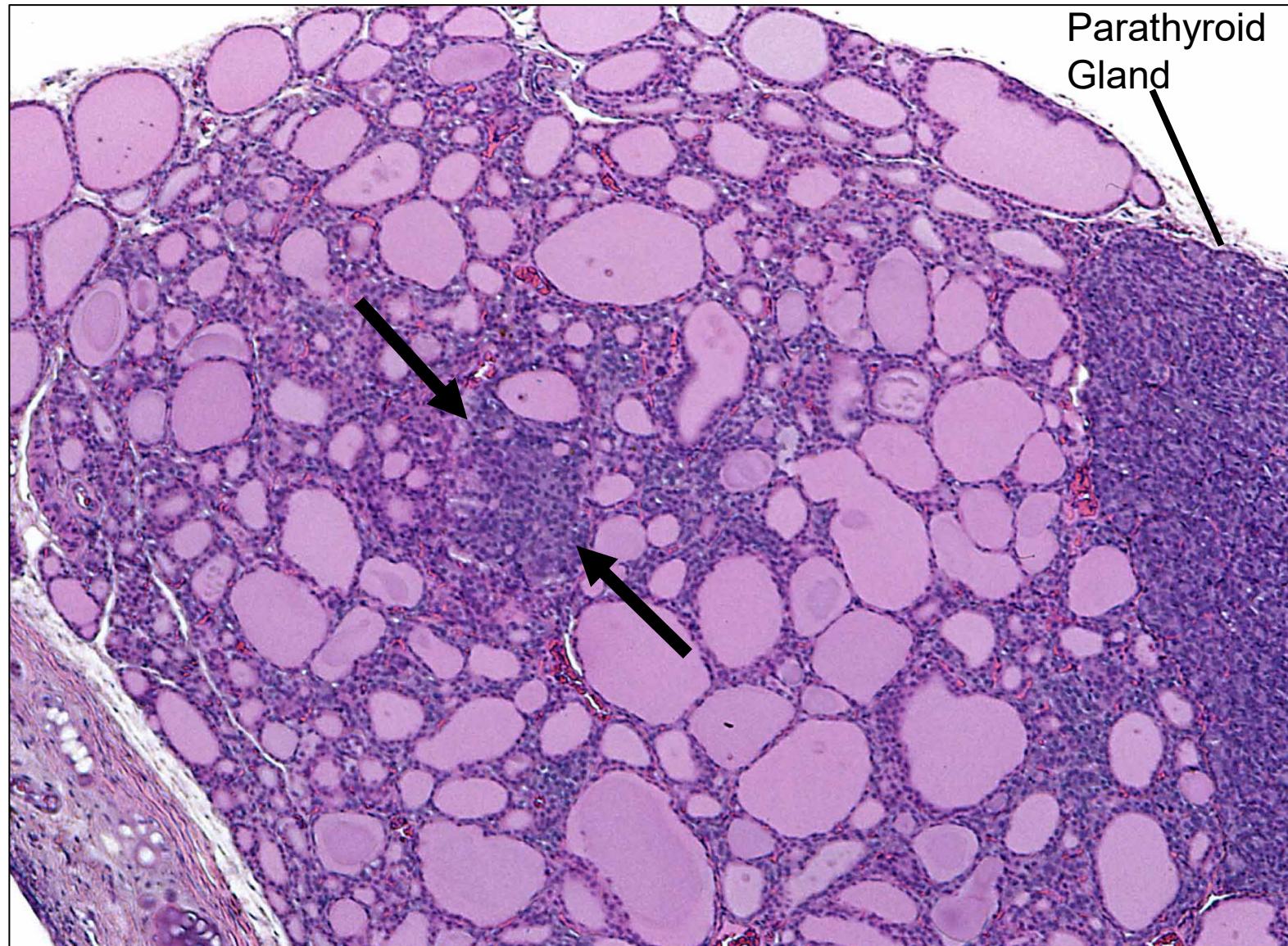
- Higher magnification of focal C-cell hyperplasia (arrow) from the previous slide
- Solid nest of C cells with indistinct cell borders, oval nuclei, and amphophilic (purple) cytoplasm



Thyroid Gland – Hyperplasia, C-Cell

Hyperplasia, C-Cell, Focal

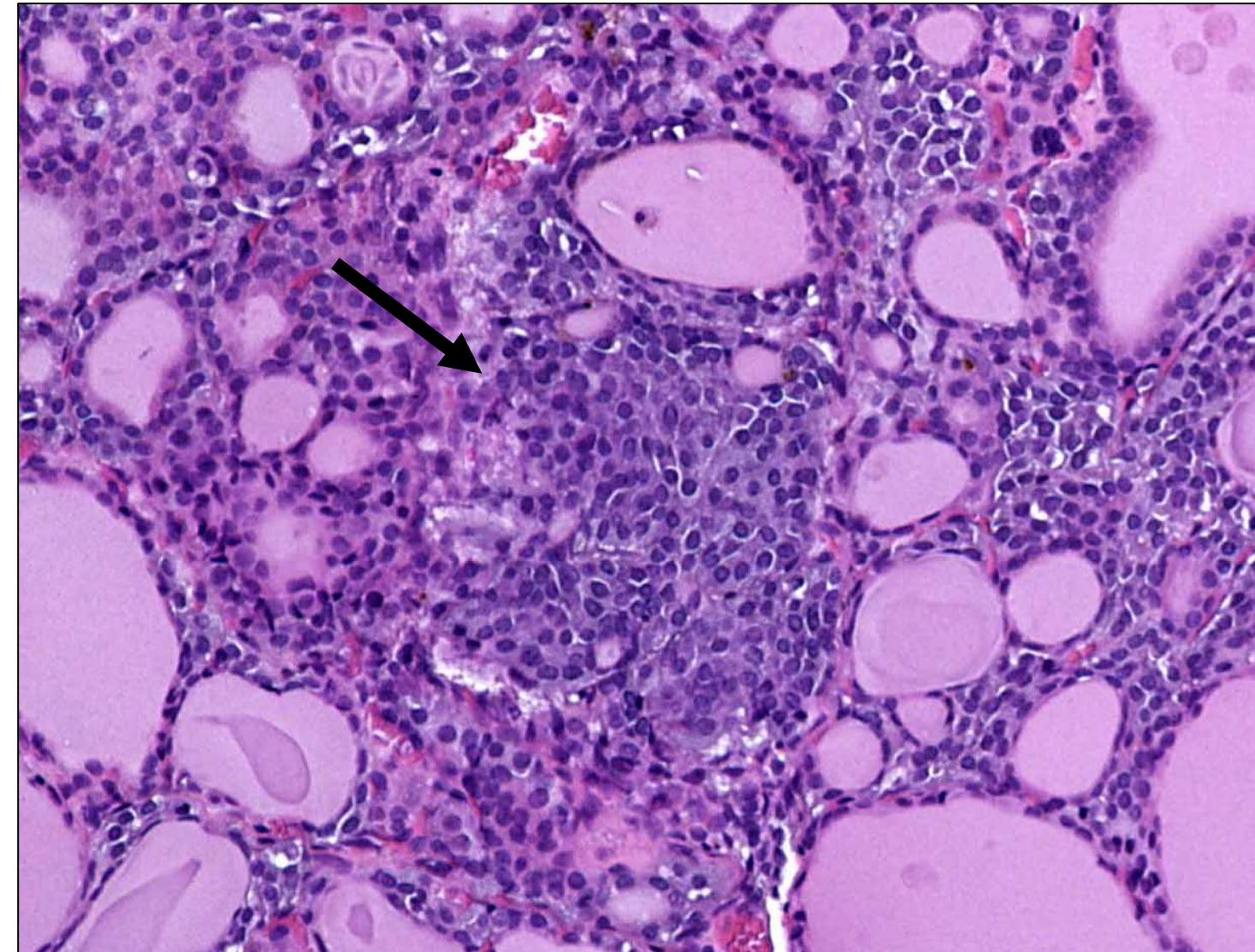
- Focal C-cell hyperplasia (arrows)
- Focal increase in the number of C cells that is smaller than the area of 5 average contiguous thyroid follicles



Thyroid Gland – Hyperplasia, C-Cell

Hyperplasia, C-Cell, Focal

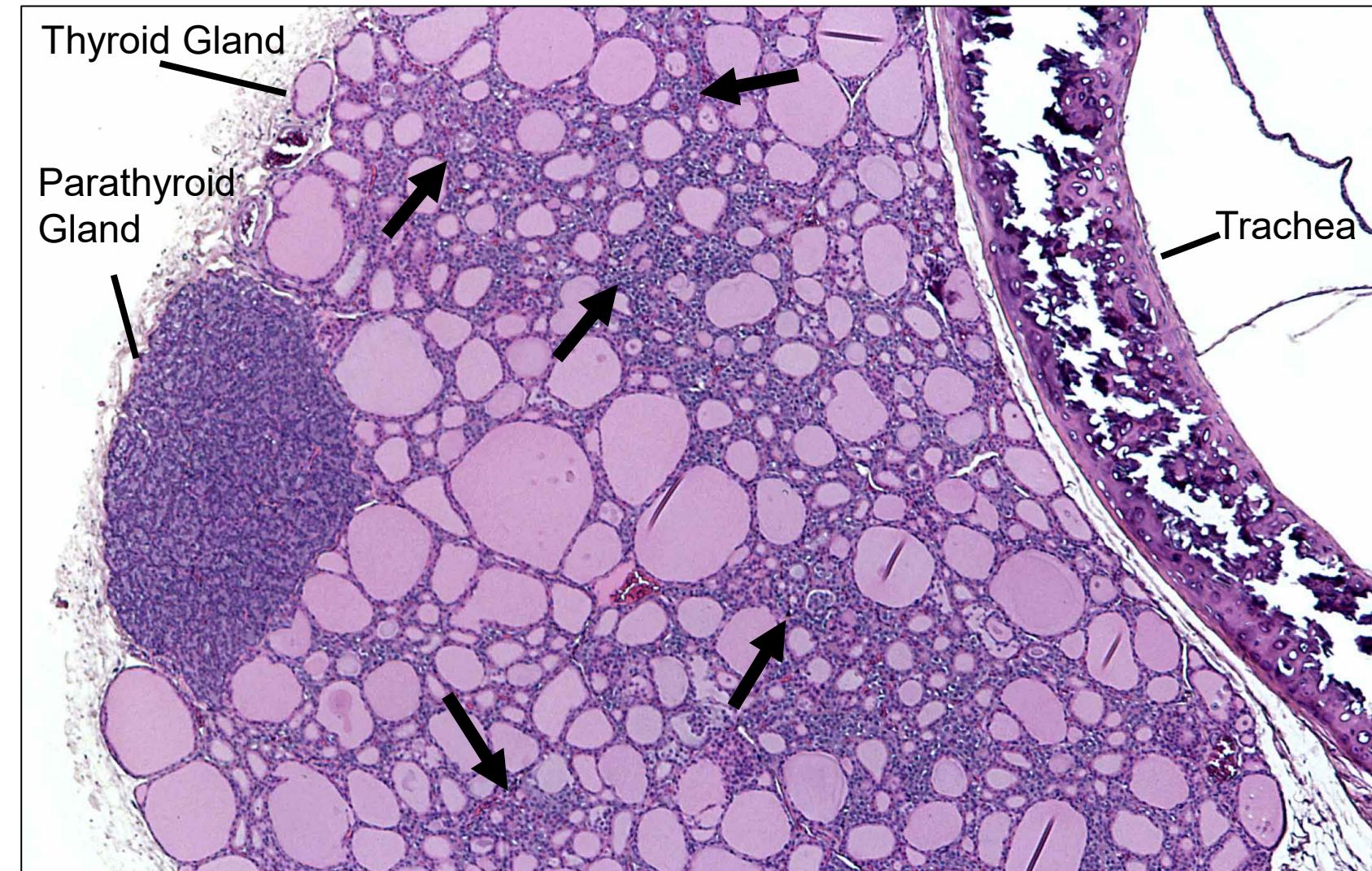
- Higher magnification of focal C-cell hyperplasia (arrow) from the previous slide
- Solid nest of C cells with indistinct cell borders, oval nuclei, and amphophilic to basophilic cytoplasm



Thyroid Gland – Hyperplasia, C-Cell

Hyperplasia, C-Cell, Diffuse

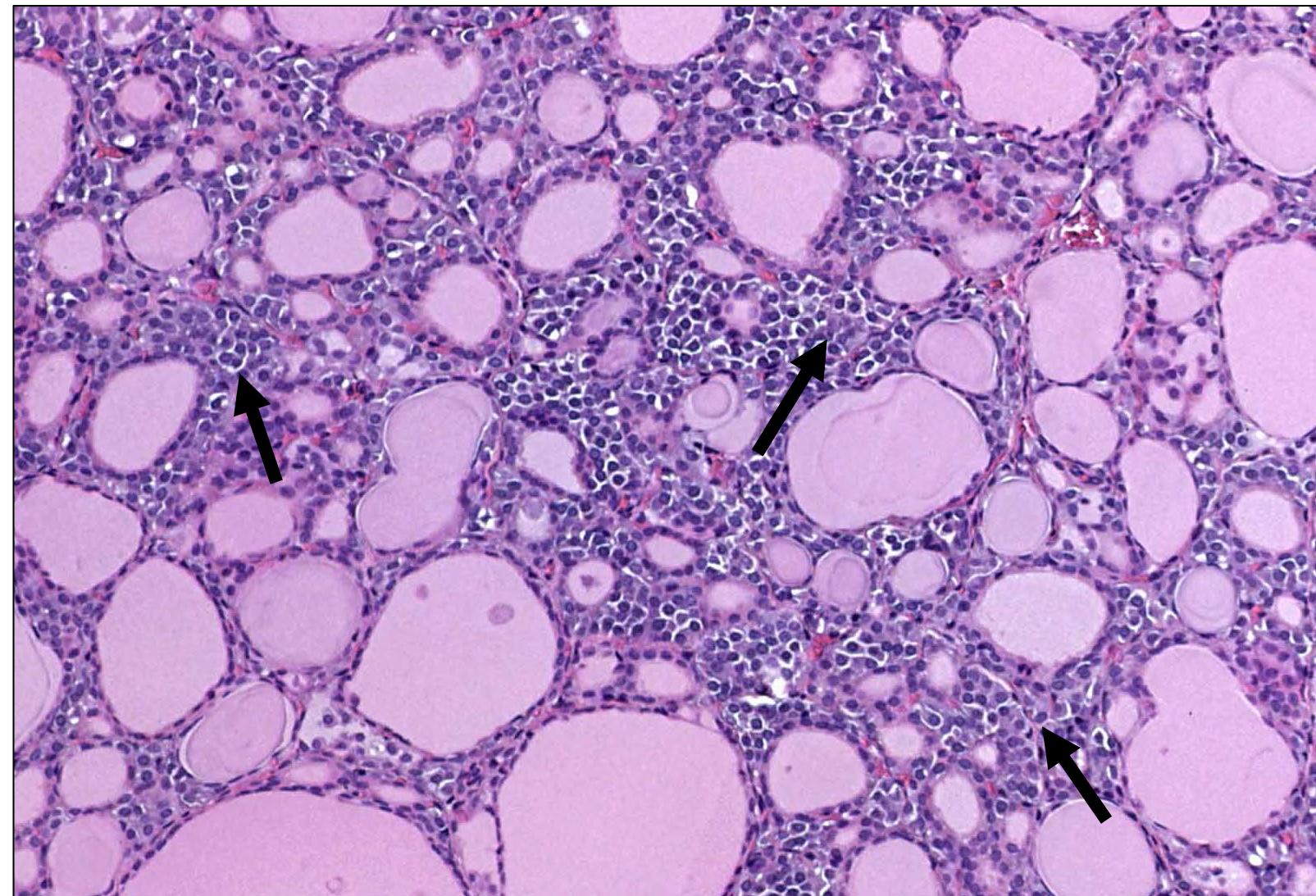
Increased numbers of C cells are present throughout the thyroid gland (arrows)



Thyroid Gland – Hyperplasia, C-Cell

Hyperplasia, C-Cell, Diffuse

- Higher magnification of diffuse C-cell hyperplasia (arrows) from the previous slide
- Increased numbers of C cells expand the parafollicular region (between the follicles)



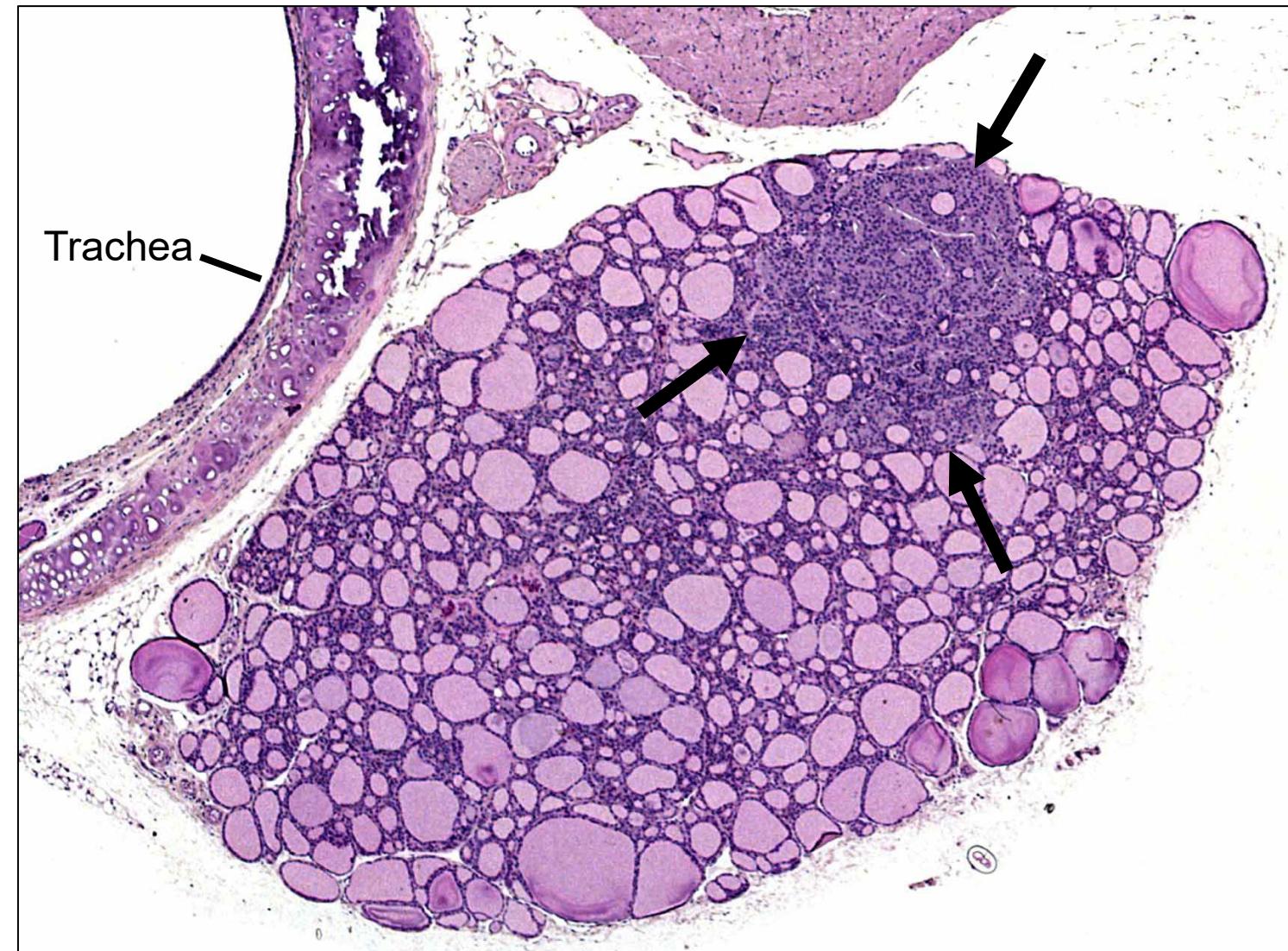
Thyroid Gland – Adenoma, C-Cell

Histopathological Features

- Benign, well-demarcated, discrete mass of C cells larger than the area of 5 average follicles
- May compress surrounding follicles and may have a thin capsule
- Polygonal cells with indistinct borders arranged in solid nests with neuroendocrine packing (nests of cells separated by delicate fibrovascular stroma)
- Stroma may contain amyloid or fibrous septa
- May resemble solid follicular cell adenomas
 - Small colloid-containing follicles are often present in follicular cell adenomas, but follicle remnants also may be present in C-cell adenomas
 - In C-cell adenomas, immunohistochemistry for calcitonin is positive, and thyroglobulin is negative
 - Electron microscopy may identify membrane-bound intracytoplasmic granules characteristic of C cells
- Occurs in rats; rare in mice

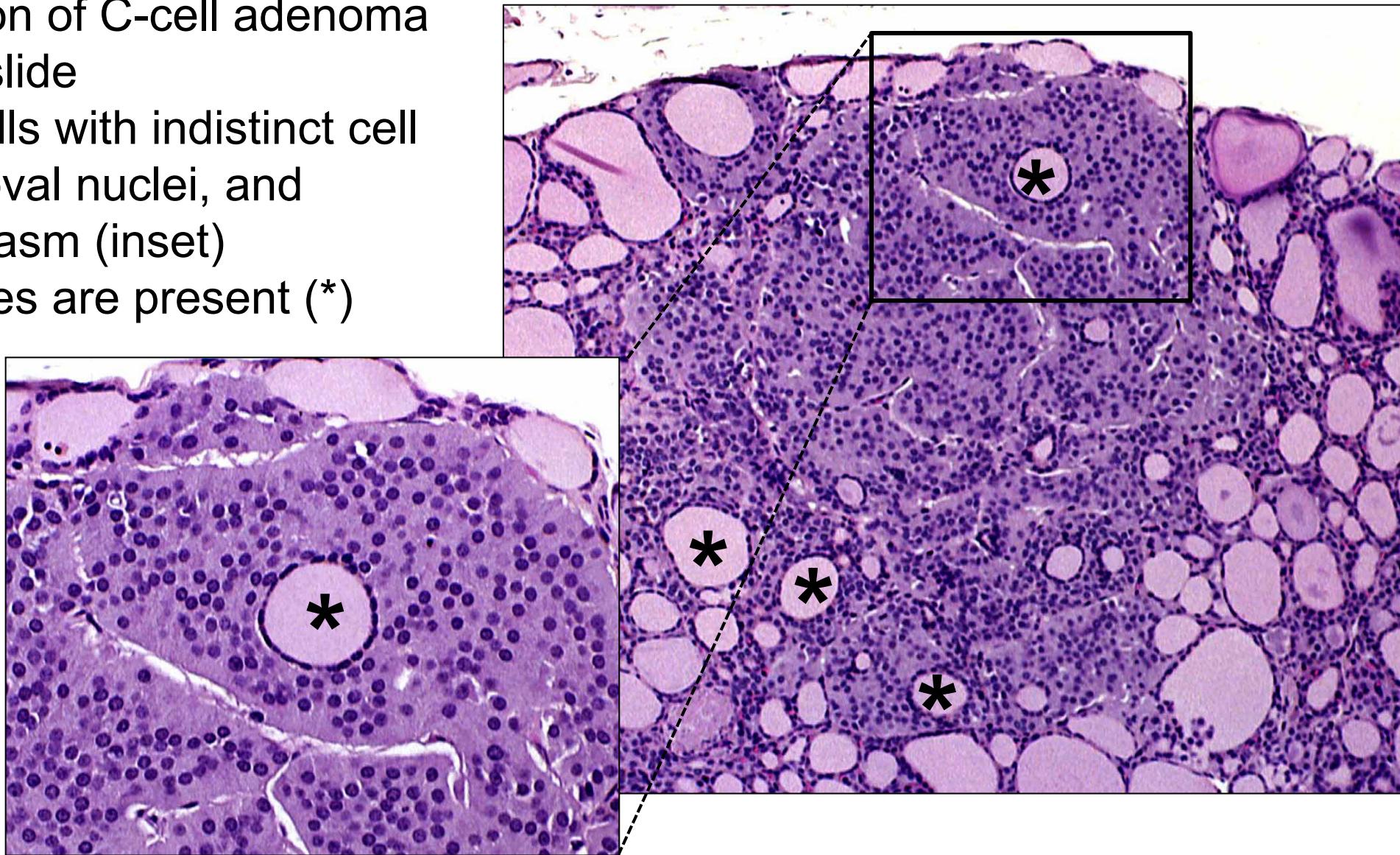
Thyroid Gland – Adenoma, C-Cell

- C-cell adenoma (arrows) in the thyroid gland
- Discrete mass that is larger than the area of 5 average contiguous thyroid follicles



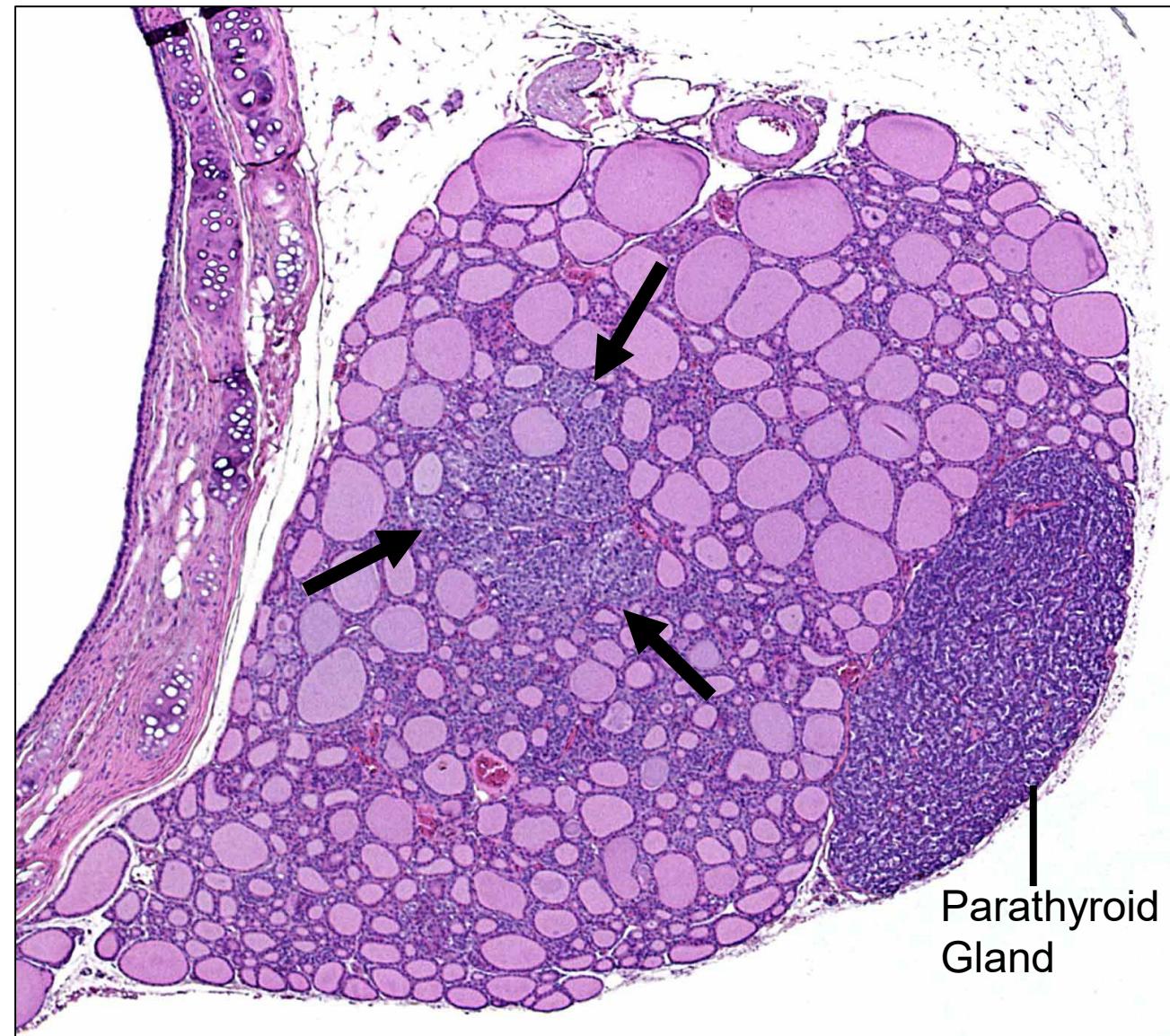
Thyroid Gland – Adenoma, C-Cell

- Higher magnification of C-cell adenoma from the previous slide
- Solid nests of C cells with indistinct cell borders, round to oval nuclei, and amphophilic cytoplasm (inset)
- Remnants of follicles are present (*)



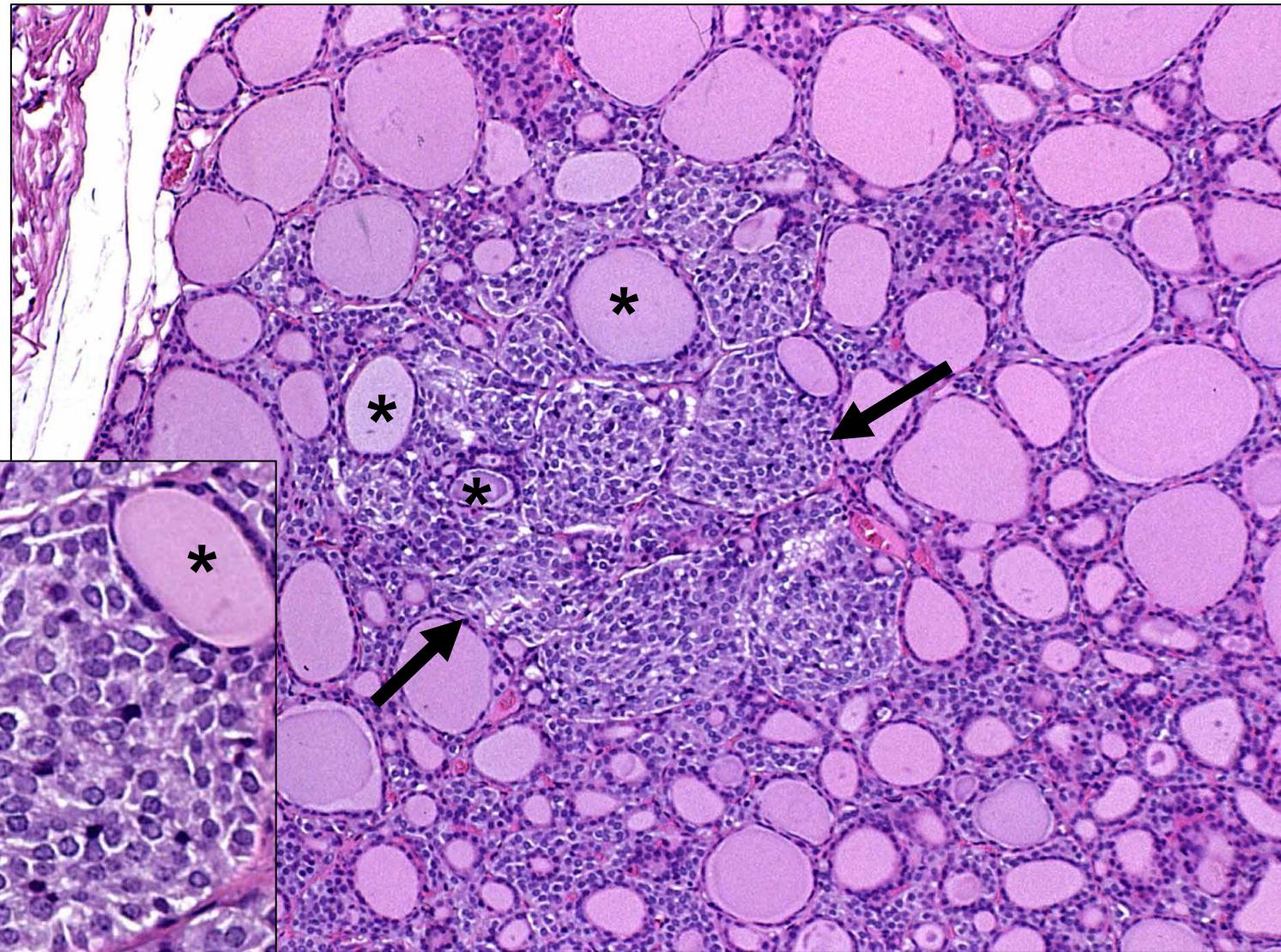
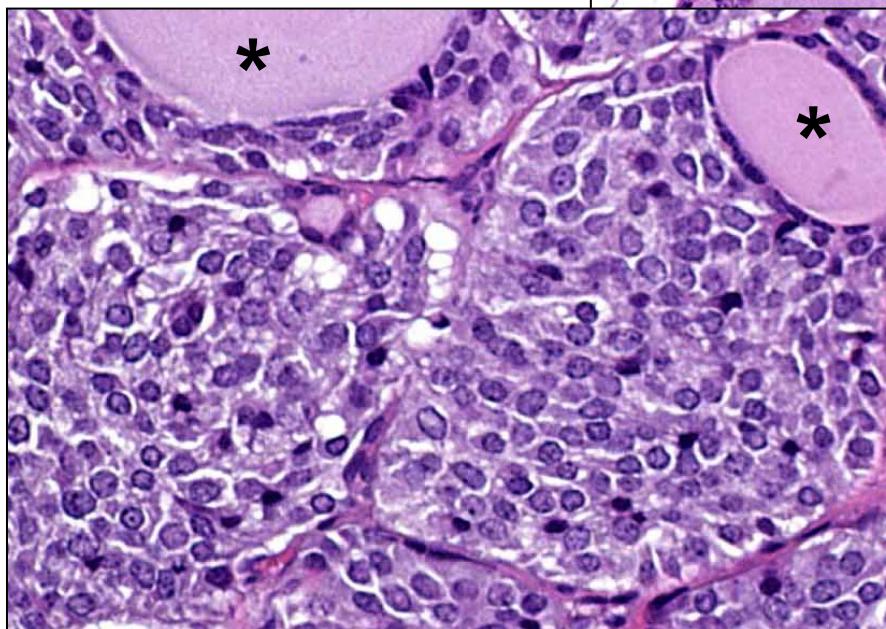
Thyroid Gland – Adenoma, C-Cell

- C-cell adenoma (arrows) in the thyroid gland
- Discrete mass that is larger than the area of 5 average contiguous follicles



Thyroid Gland – Adenoma, C-Cell

- Higher magnification of C-cell adenoma (arrows) from the previous slide
- Solid nests of C cells with indistinct cell borders, round to oval nuclei, and amphophilic cytoplasm (inset)
- Remnants of follicles are present (*)



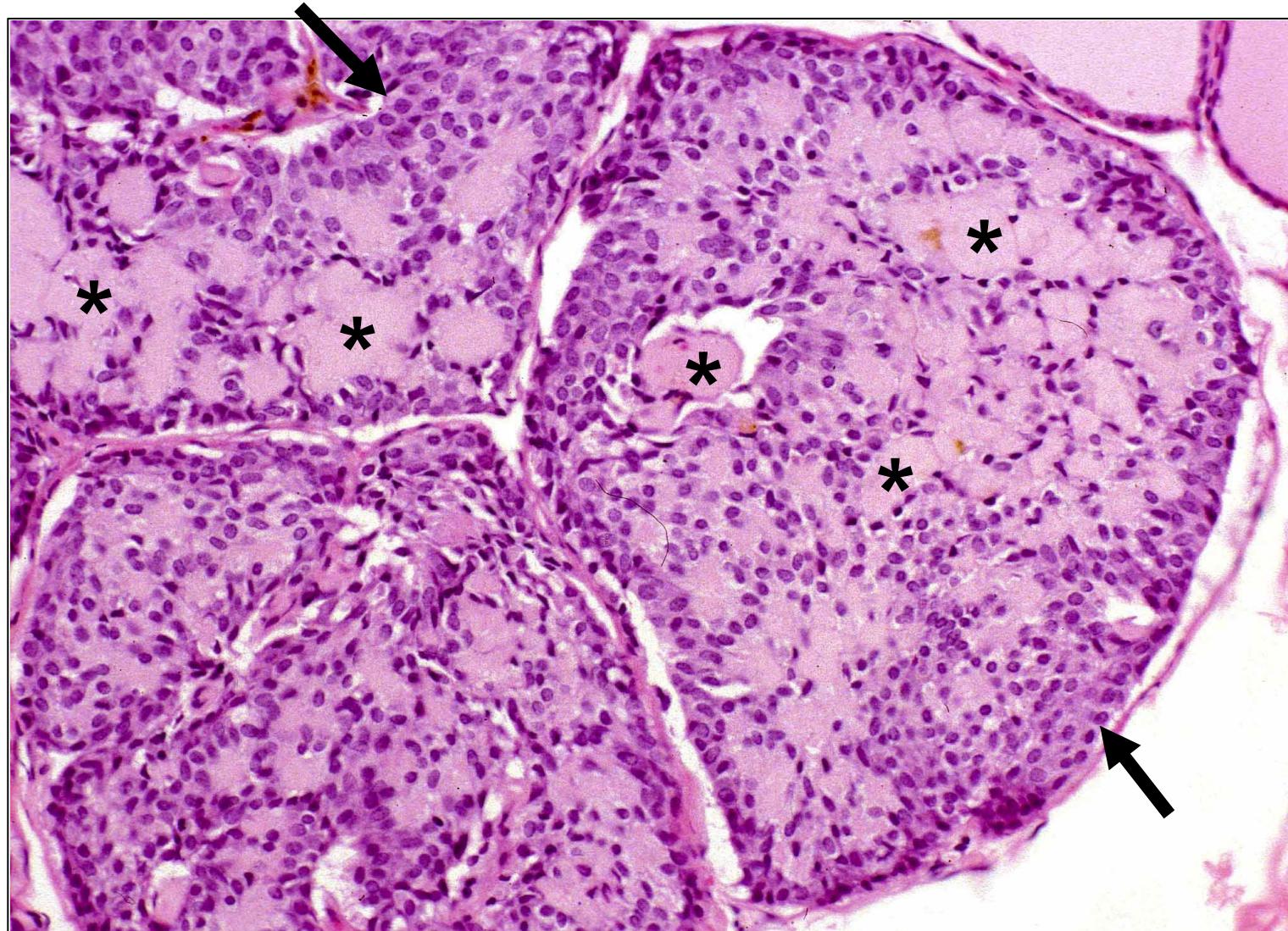
Thyroid Gland – Adenoma, C-Cell

- C-cell adenoma (arrows) in the thyroid gland
- Amorphous eosinophilic material consistent with amyloid deposits (*)



Thyroid Gland – Adenoma, C-Cell

- Higher magnification of C-cell adenoma with amyloid
- Solid nests of neoplastic C cells (arrows) with indistinct cell borders, oval nuclei, and amphophilic cytoplasm
- Amyloid (*) is present in the tumor stroma



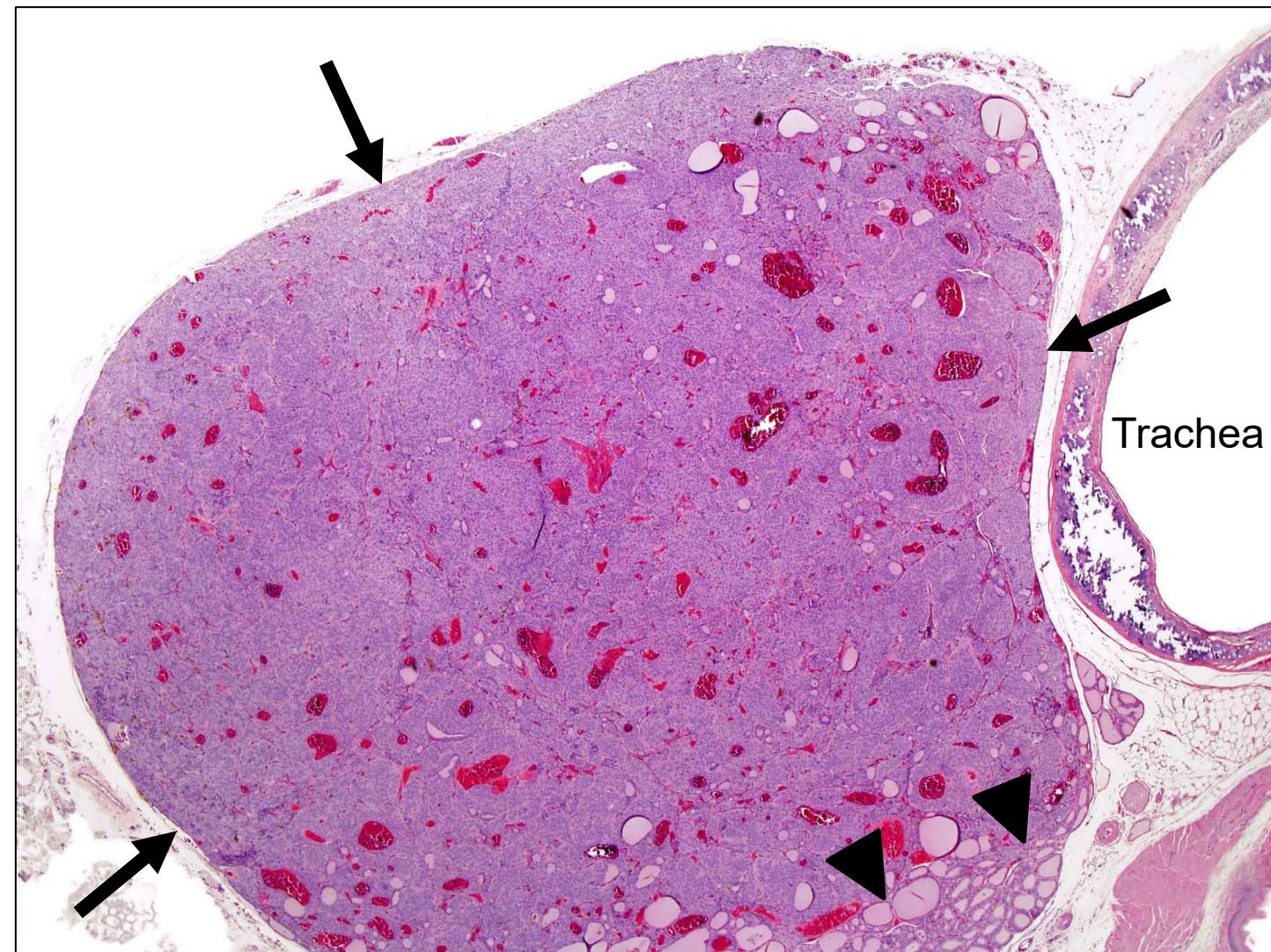
Thyroid Gland – Carcinoma, C-Cell

Histopathological Features

- Malignant proliferation of nests and sheets of C cells that effaces the thyroid gland and invades the thyroid capsule and adjacent tissues or vessels
 - Metastasis may occur
 - May contain central necrosis and hemorrhage
 - Amyloid may be present
- Cellular pleomorphism (varied in size and shape) and mitotic figures may be present
- May resemble solid type of follicular cell carcinoma
 - Small colloid-containing follicles are often present in solid follicular cell carcinomas, but entrapped follicles also may be present in C-cell carcinomas
 - In C-cell tumors, immunohistochemistry for calcitonin is positive, and thyroglobulin is negative
- Occurs in rats; rare in mice

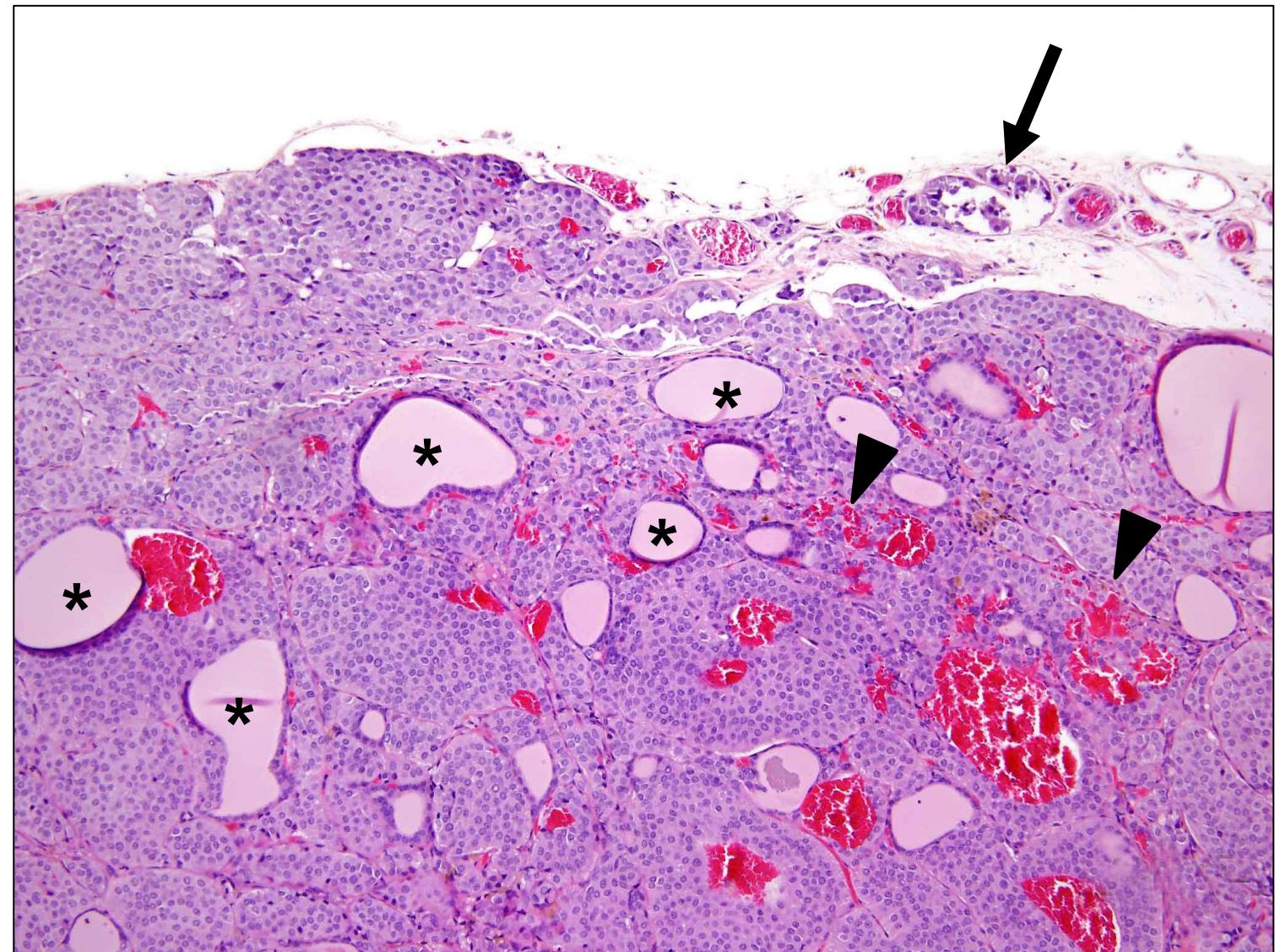
Thyroid Gland – Carcinoma, C-Cell

- C-cell carcinoma (arrows) in the thyroid gland
- Neoplastic cells have effaced most of the thyroid gland except for residual thyroid tissue along one edge (arrowheads)



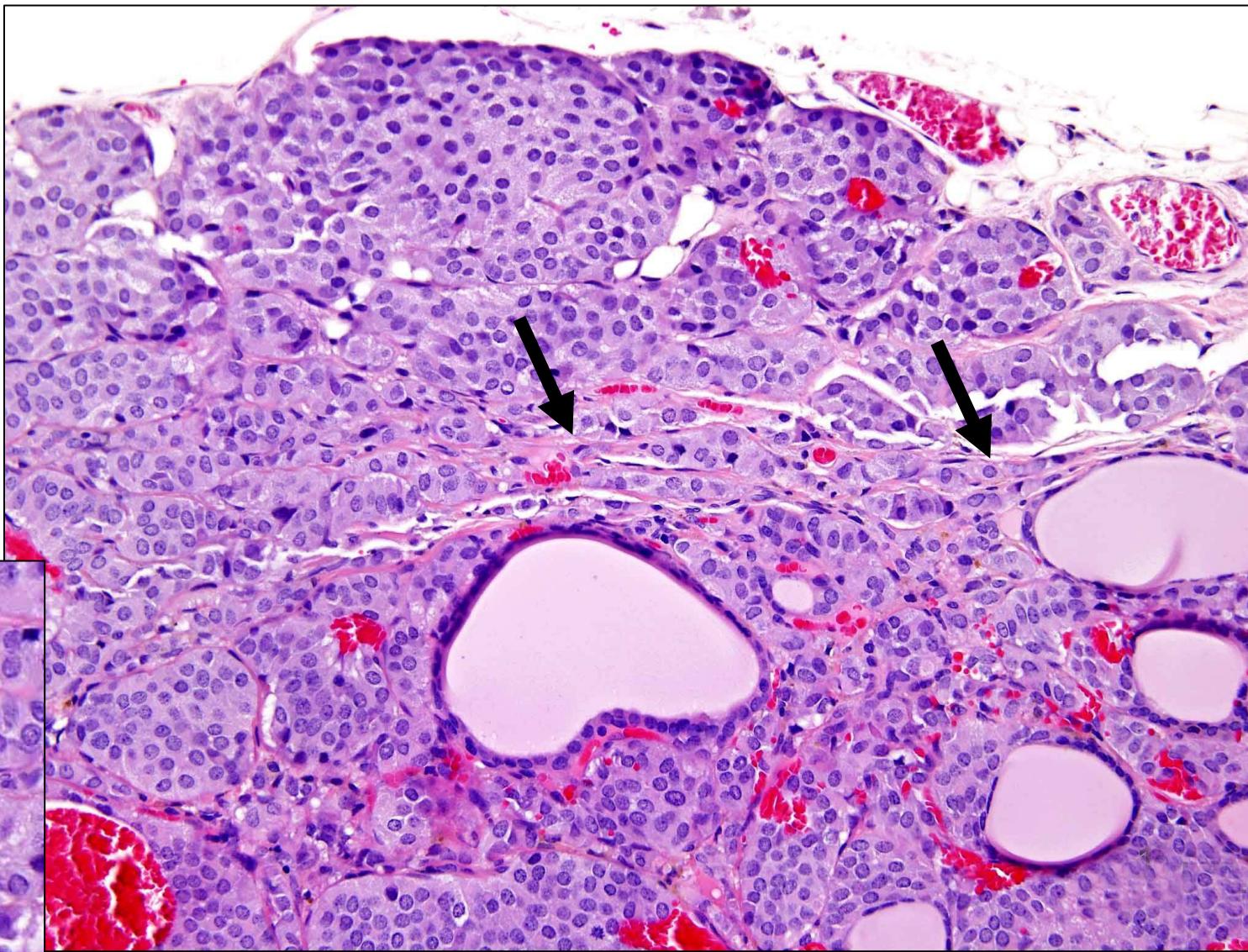
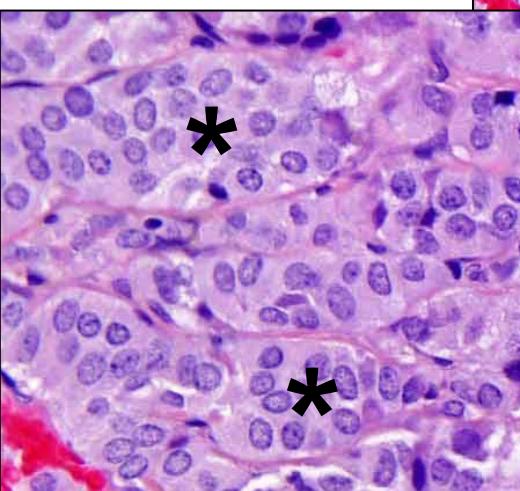
Thyroid Gland – Carcinoma, C-Cell

- Higher magnification of C-cell carcinoma from the previous slide
- Remnant follicles are present (*)
- Small areas of hemorrhage (arrowheads)
- Vascular invasion (arrow)



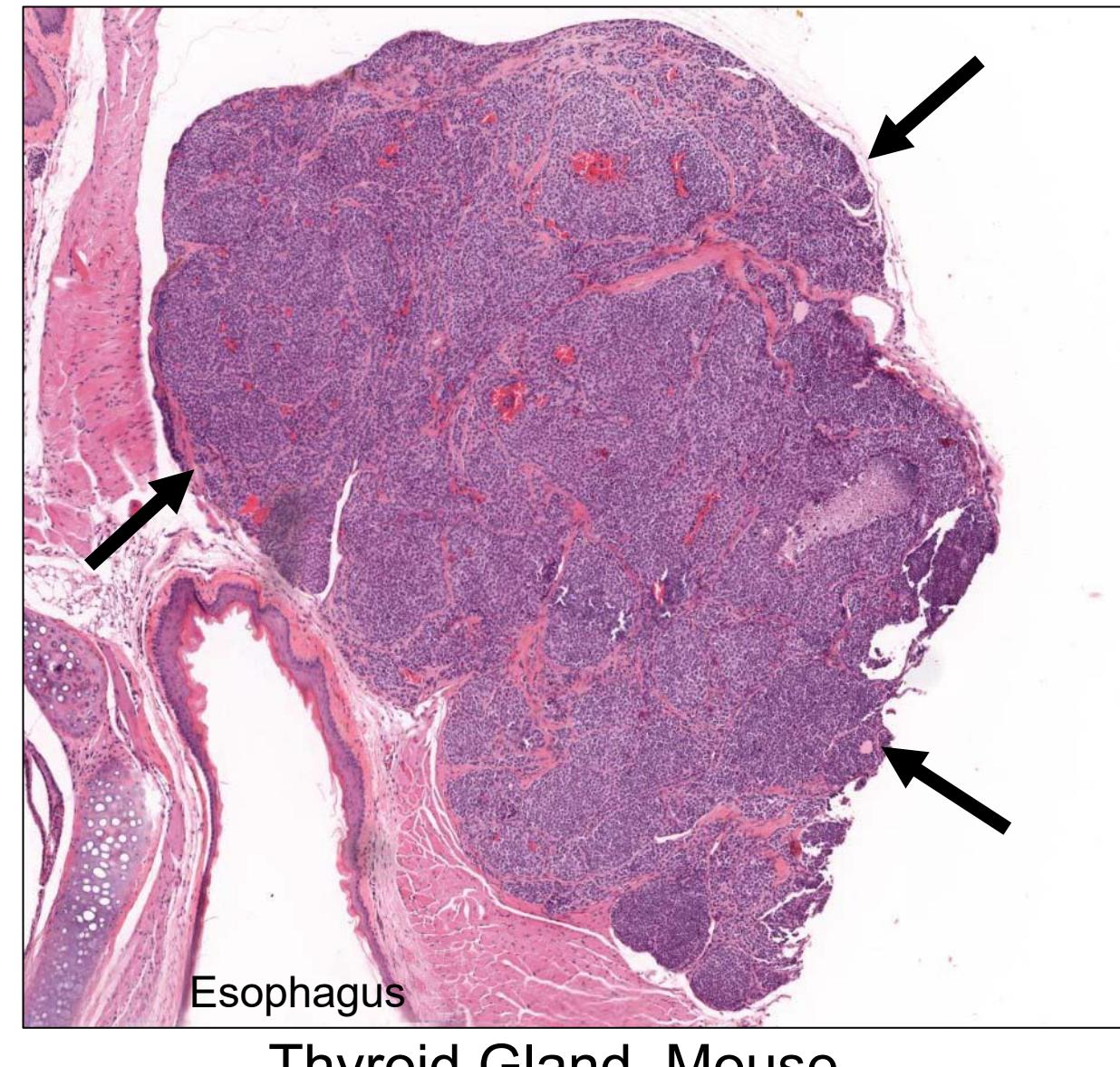
Thyroid Gland – Carcinoma, C-Cell

- Higher magnification of C-cell carcinoma showing invasion of the capsule (arrows)
- Solid nests of C cells with neuroendocrine packing (*) separated by delicate fibrous stroma (inset)
- Cells have indistinct cell borders, oval nuclei, and amphophilic cytoplasm (inset)



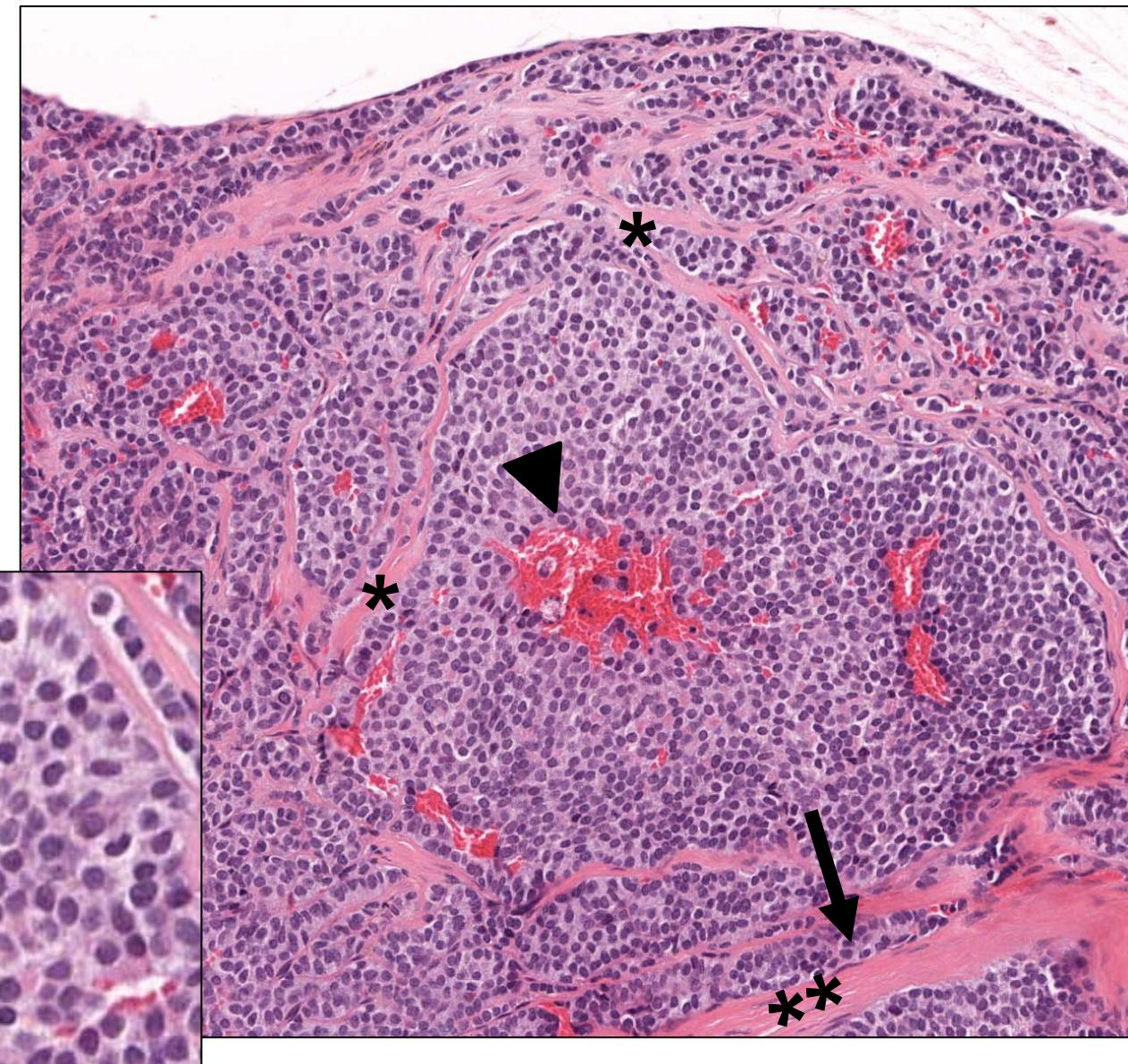
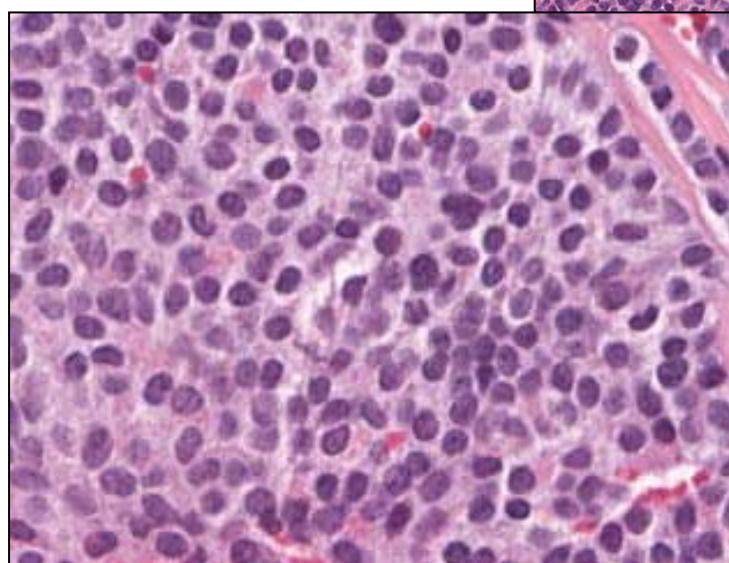
Thyroid Gland – Carcinoma, C-Cell

- C-cell carcinoma (arrows)
- Neoplastic cells have effaced the thyroid gland



Thyroid Gland – Carcinoma, C-Cell

- Higher magnification of the previous slide showing invasion of the capsule (**) by tumor cells (arrow)
- Solid nests are separated by fibrous stroma (*)
- Small area of hemorrhage (arrowhead)
- Cells have indistinct cell borders, oval to round nuclei, and amphophilic cytoplasm (inset)



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Author

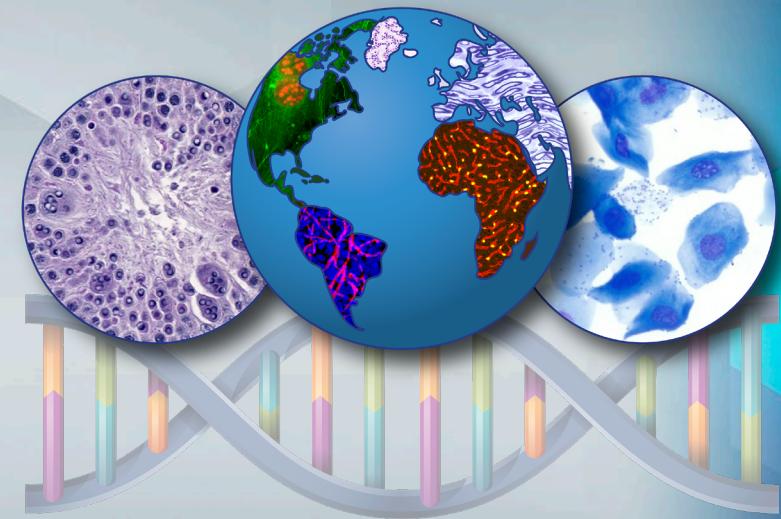
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Division of Translational Toxicology
Global Toxicologic Pathology Training Program