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Immunohistochemistry in gynecologic pathology

In Gynecologic Pathology, immunohistochemical stains are used as a diagnostic tool in challenging cases by routine examination, screening of Lynch syndrome and in guiding clinicians for adjuvant therapy in advanced staged cancers. Immunohistochemistry can be crucial in differentiating metastatic lesions to the gynecologic tract from primary tumors. Obtaining pertinent clinical history and applying focused panels are important in adjunct to morphological findings. Other common applications include subtyping high-grade and mixed endometrial and ovarian adenocarcinomas, differentiating endocervical cancer from endometrial type in small biopsies and endometrial stromal tumors from smooth muscle lesions. Immunostains for p16 and Ki67 have a role in screening cervical precursor lesions and their differentiation from immature squamous metaplasia and atrophy. Immunostains for Mismatch repair (MMR) proteins are routinely used for universal screening of Lynch syndrome in many institutions. Their results can guide further genetic testing. MMR can also be tested in synchronous ovarian and endometrial cancers. Finally, hormonal receptor status can be clinically important to make treatment decisions in advance staged cancers.

Biography

Ozlen Saglam is a Surgical Pathologist with areas of interest in Gynecology and Breast Pathology. Currently, she is an associate member at Moffitt Cancer Center in Tampa, FL. Between 2008 and 2014; she worked in the women's health group at Yale New Haven Hospital. She is board certified in Anatomic/Clinical Pathology and Cytopathology. She enjoys collaborating with scientists and clinical colleagues in translational research projects. Her research interests include gynecologic cancers in particular ovarian neoplasms.

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