## <u>Unit I – Problem 9 – Pathology: Effects of Tumor On The Host</u>



## - Effects of tumors on the host can be:

• Local effects:

Bile accumulates,

to jaundice

lumor blocks flow of bile to intestine

- ✓ Effects due to location and size of the tumor:
  - Pituitary adenomas compress the normal pituitary gland resulting in hypopituitarism (reduced secretion of pituitary hormones).
  - Bile duct tumors result in obstructive jaundice.
  - \* Renal artery leiomyoma results in hypertension.
  - Effects due to ulceration through surface epithelium:
    - Gastrointestinal tumors results in bleeding in the form of:
      - $\blacktriangleright$  Melena (black stool due to the presence of blood).
      - Hematemesis (blood in the vomit).
    - Lung cancer:
      - Hemoptysis (coughing blood).
    - Cancer of urinary bladder and ureter:
      - Hematuria (blood in urine).
- Systemic effects:
  - ✓ <u>Secreted products: hormone synthesis</u>
    - *Pancreas*: insulin-secreting tumors result in hypoglycemia (reduced blood glucose level).
    - Adrenal cortical tumors (tumors in the cortex of adrenal glands):
      - Secretion of corticosteroids or aldosterone.
      - ➢ More common with well-differentiated benign tumors.
  - ✓ <u>Cancer cachexia (wasting of muscles):</u>



- *Definition*: it is a complex syndrome which includes the following:
  - ➢ Weight loss.
  - ➤ Lipolysis.
  - Loss of muscle and visceral protein.
  - Anorexia.
  - Chronic nausea.
  - Anemia.
  - Weakness.
- ✤ Pathogenesis: tumor cells and macrophages which surround them increase TNF thus basal metabolic rate remains high despite reduced food intake.
- ✓ <u>Paraneoplastic syndromes:</u>
  - Definition: these are clinical syndrome involving non-metastatic systemic effects that accompany malignant diseases.
  - *They are mediated by:* 
    - Humoral factors (hormones or cytokines) secreted by tumor cells.
    - Immune response against the tumor.
  - Paraneoplastic syndromes might be:
    - Earliest manifestation of an occult tumor.

- Clinically significant problems.
- Confused with metastatic disease.
- Symptoms may be endocrine, neuromuscular, musculoskeletal, cardiovascular, cutaneous, hematologic, gastrointestinal, renal or miscellaneous.
- Hypercalcemia (increased calcium level in the blood): due to
  - Para-Thyroid Hormone related Protein (PTHrP): this is secreted in renal cell carcinoma, breast cancer and T-cell leukemia/lymphomas.
  - Osteoclast activating factor: secreted in multiple myeloma (MM).
- Production of hormones/ bioactive substances:
  - Lung cancer:
    - ACTH (Adrenocorticotropic Hormone): Cushing syndrome.
    - ADH (Antidiuretic Hormone): hyponatremia.
    - PTH (Parathyroid Hormone): hypercalcemia.
    - Miscellaneous: hCG (human Chorionic Gonadotropin) and serotonin.
- *Hypercoagulability:* 
  - Thrombosis is seen with pancreatic, mucin-secreting GIT and lung cancers.
  - Non-bacterial thrombotic endocarditis: platelet-fibrin thrombi on cardiac valves.
- Clubbing of fingers; hypertrophic osteoarthropathy:

Clubbing: loss of normal angle

 $\succ$  Seen with lung cancer for unknown reasons.





■ADAM. Hypertrophic osteoarthropathy

- ✤ Dermatologic disorders:
  - > Acanthosis nigricans:
    - Brown-black poorly defined, velvety hyperpigmentation of the skin.
    - Caused by secretion of EGF that stimulates epidermal keratinocytes and dermal fibroblast proliferation.



- Seen with gastric, lung and uterine cancers.
- Dermatomyositis:
  - Symmetric, proximal muscle weakness.
  - Seen with lung and breast cancers.

