INTRODUCTION:
Angiosarcoma is a rare soft tissue sarcoma. It can occur in any region of the body but usually affects the face and scalp region, most often in elderly patients. 5% of the soft tissue sarcoma occur in the head, face and neck of which 10% comprise angiosarcoma. Angiosarcoma of the face and scalp are insidious and their clinical presentation varies widely. Clinically three types are described which are ulcerating, diffuse superficial spreading and nodular⁵,⁶. We present a case of angiosarcoma scalp which was diagnosed on histopathological examination and confirmed by IHC.

CASE REPORT:
A 27 years old female presented with scalp swelling which increased in size suddenly with in 3 months duration. CT scan brain showed large well defined extra axial heterogenous enhancing lesion in left frontal region with destruction of calvaria and intracranial extension and compressing the brain parenchyma. Excision of the scalp swelling done and specimen sent for histopathological examination.

Gross observation
Dark brown 5x3x3 cm mass partially covered with thick whitish capsule (cartilaginous consistency). Cut section shows dark brownish haemorrhagic and spongelike cut surface with small greyish white linear fibrous septa.

Microscopical examination
The section shows a vascular soft tissue tumor comprising of randomly arranged spindle cells surrounding irregularly sized anastomosing vascular channels. The vascular spaces are lined with endothelial cells with mildly pleomorphic plump oval nuclei. Occasional blood vessels show larger moderately pleomorphic oval and hyperchromatic nuclei with scanty cytoplasm which are lining and focally pilling up along the lumen. Scattered mitosis is seen. Focal areas of necrosis and haemorrhage is also seen. Histological grade was 2. FNCLCC score was 4 (Tumor differentiation score 2, Mitosis count score 1, Necrosis score 1)

IHC showed that tumor cells are strongly positive for CD 31 and negative for CD 34.
So on the basis of histopathological and IHC findings, a diagnosis of Angiosarcoma scalp was made.

DISCUSSION:
Angiosarcoma is a rare soft tissue sarcoma arising from the endothelial cells. Microscopically, they involve the dermis while the poorly differentiated ones may invade into deeper structures. Metastasis to regional lymph nodes or lungs can occur. Cutaneous angiosarcoma may be associated with chronic lymphoedema and previous radiation therapy. Treatment of these lesions is usually by radical excision and subsequent reconstruction⁵,⁶. Radiotherapy and chemotherapy have also been used in unresectable tumours, or those with distant metastasis.

CONCLUSION:
Angiosarcoma of the scalp is a very aggressive tumour with poor prognosis. Outcome can be improved with early diagnosis and aggressive early treatment. Wide surgical excision to achieve tumor free margin is associated with improved survival.

REFERENCES: