

Chondrosarcoma of Second Toe Distal Phalanx-A Case Report

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Abstract

Chondrosarcoma is a relatively common primary malignant bone lesion. It is a malignant, relatively slow growing cartilage producing tumor. It forms approximately 10% of malignant primary bone tumors. However, it usually arises in long bones and truncal bones, whereas these tumors are uncommon in the hands and feet. The type are (A) Primary chondrosarcomas arises denovo from bone without any preexisting lesion. (B) Secondary chondrosarcomas when tumor arises from preexisting benign lesions of bone. Primary tumor is generally seen between 40 to 60 years of age. Secondary chondrosarcomas are more common in young adults.

Keywords: Chondrosarcoma; Tumor; Chondroblastoma; Bone; Neoplasm

It is a lobulated, translucent, bluish whitish cartilaginous mass with in medullary cavity. Endosteal aspect of cortex appears eroded and scalloped. Tumor spreads widely through medullary cavity, its extent is greater than it appears on X-rays. As tumor penetrates the cortex it is temporarily delimited by periosteum. New reactive new bone is formed at the periphery of sub periosteal mass there by thickening the cortex. This is seen in slow growing and less malignant tumors.

In rapidly growing tumors periosteum is penetrated easily, so no reactive new bone formation. When a firm greyish tanned tissue without lobular configuration is found, it represents most malignant type. On removing the closely investing periosteum, the tumor appears lobulated, bluish white, shiny, opalescent or semitranslucent mass of firm texture or rubbery consistency.

The cut surface exhibits specks of calcification that impart a gritty

Prognosis Tumor arising in osteochondromas have excellent prognosis. Secondary chondrosarcomas arising in enchondromatosis have same prognosis as that of conventional chondrosarcomas [1-6].

Grade