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Small renal tumors: An enlarging group of confusing neoplasms pending classification

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 ${f R}$ enal cancer ranks within the top-ten list of more common neoplasms in males and females in Western countries and remain a problem of major concern for urologists and health authorities worldwide. Traditionally resistant to radio- and chemotherapy, only surgery has proven to be effective in these patients. Success depends largely on early diagnosis, a clinical situation that is not always achieved. To improve therapeutic results huge amounts of money are being invested worldwide to discover new targeted therapies based on histopathologic analysis and molecular profiling. More and more renal neoplasms are been discovered incidentally as asymptomatic and organ-confined diseases as a result of routine studies for other causes. Radiologists and urologists are temptated to underestimate these small tumors thinking erroneously that small size means histological simplicity and indolent clinical behavior. Actually, many of them are treated with diverse estrategies of local ablation sometimes performed without previous histopathologic diagnosis. Current WHO classification of renal tumors in adults recognizes a varied spectrum of histological entities linked some of them to a molecular signature and represents notable advance in the knowledge of this family of tumors. But this promising classification is not solving the growing complexity of renal tumors, as many supposedly new entities are being published in the specialized literature. These new tumors are awaiting for a place in the new edition of WHO classification and are frequently small and incidentally discovered. Typically small renal tumors like tubulocystic renal cell carcinoma, follicular thyroid-like renal cell carcinoma, clear cell papillary renal cell carcinoma, biphasic alveolo-squamoid renal cell carcinoma, the broad histologic spectrum of CK7-negative papillary renal cell carcinomas, microcystic and pigmented chromophobe renal cell carcinoma, among other epithelial neoplasms, as well as sclerosing PEComas and other mesenchymal neoplasms, will be reviewed in the presentation.

Biography

José I López, MD, PhD, is Head and Professor of Pathology in Cruces University Hospital affiliated to the University of the Basque Country (in Barakaldo, Spain. His professional interest is uropathology, with more than 100 peer-reviewed international publications in the field and a h-index=18.

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