

Systemic Xanthogranuloma or Erdheim-Chester Disease: Time to Revisit the Nomenclature?

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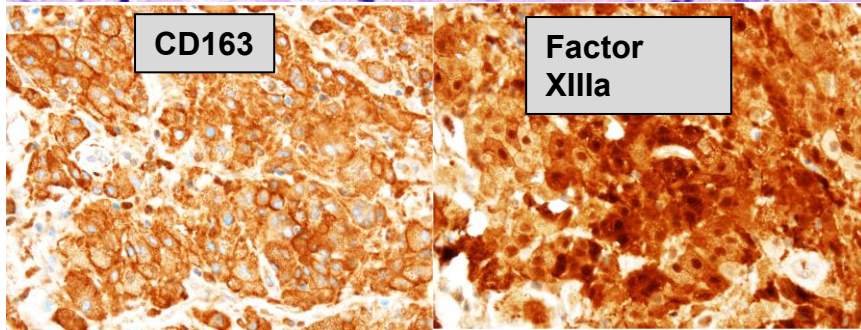
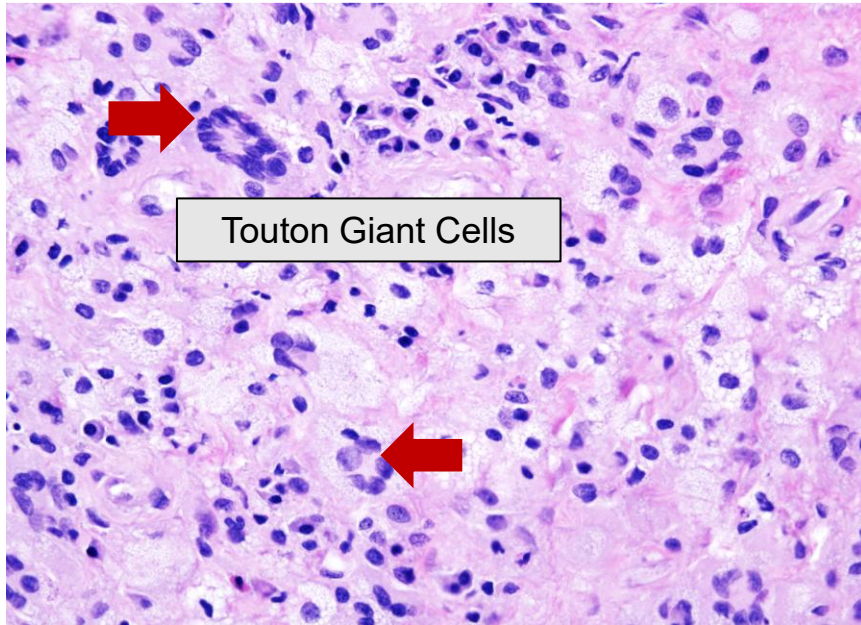
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Disclosures

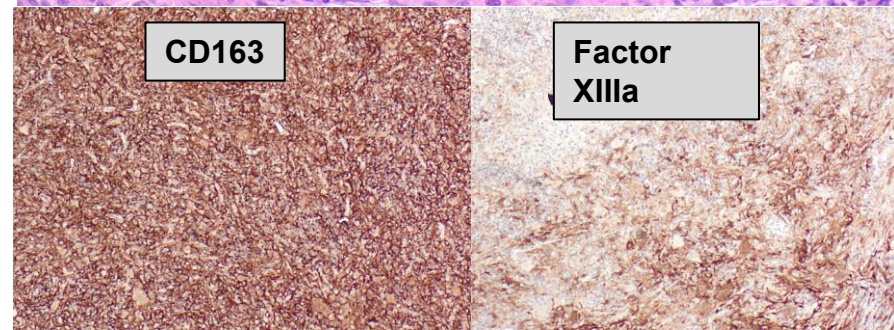
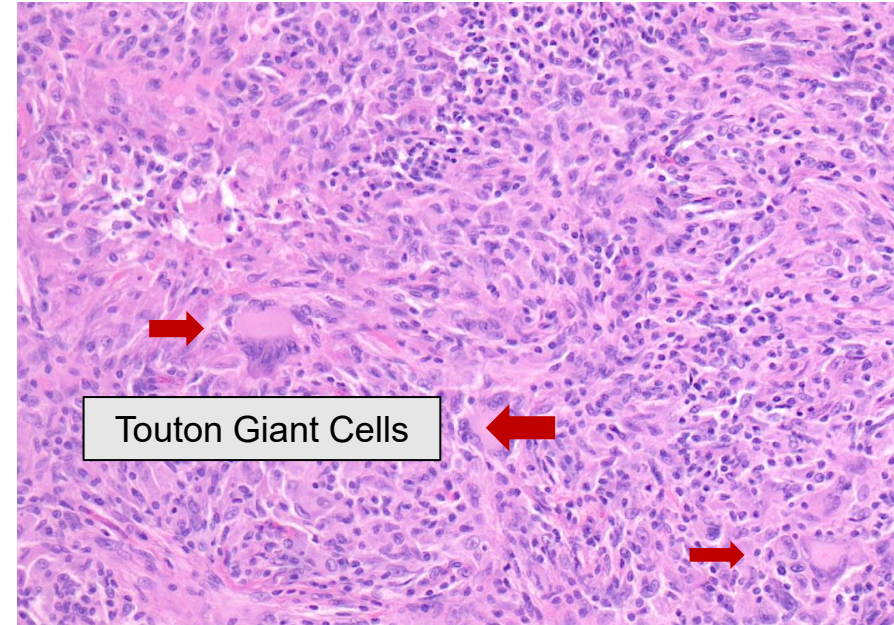
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- No conflicts of interest

Is There a Morphological Distinction between ECD and Xanthogranuloma?

Erdheim Chester Disease (ECD)



Xanthogranuloma Family (XG)



ECD: First Description

Über Lipoidgranulomatose¹.

Von

Dr. William Chester, New-York.

Mit 9 Abbildungen im Text.

(Eingegangen am 29. Mai 1930.)

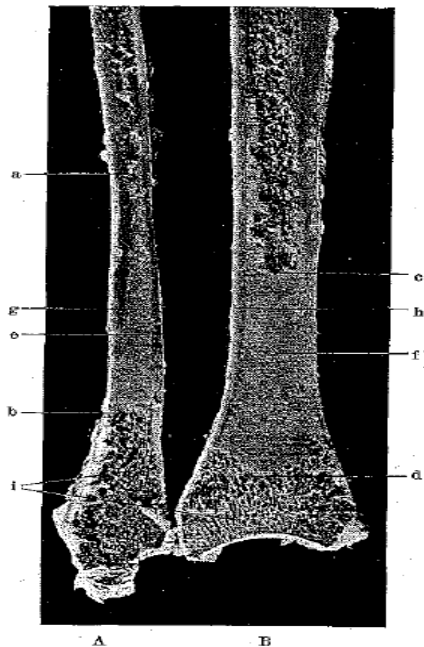
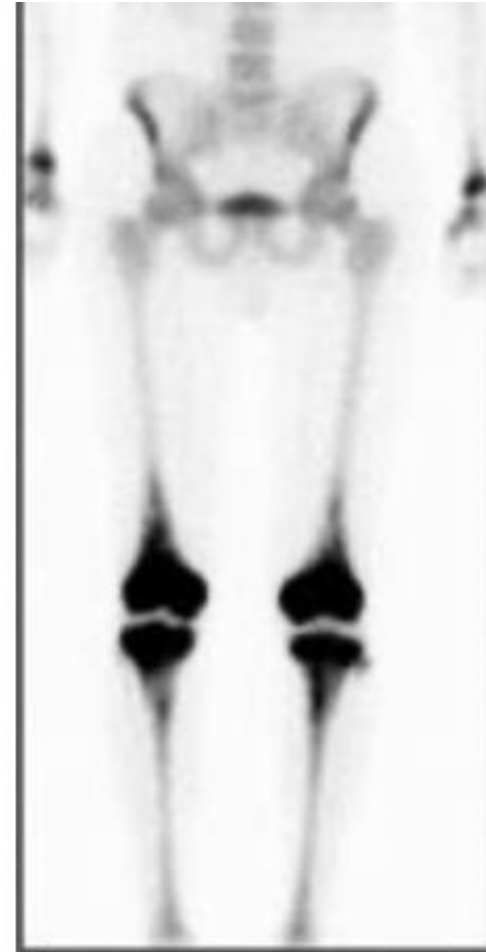
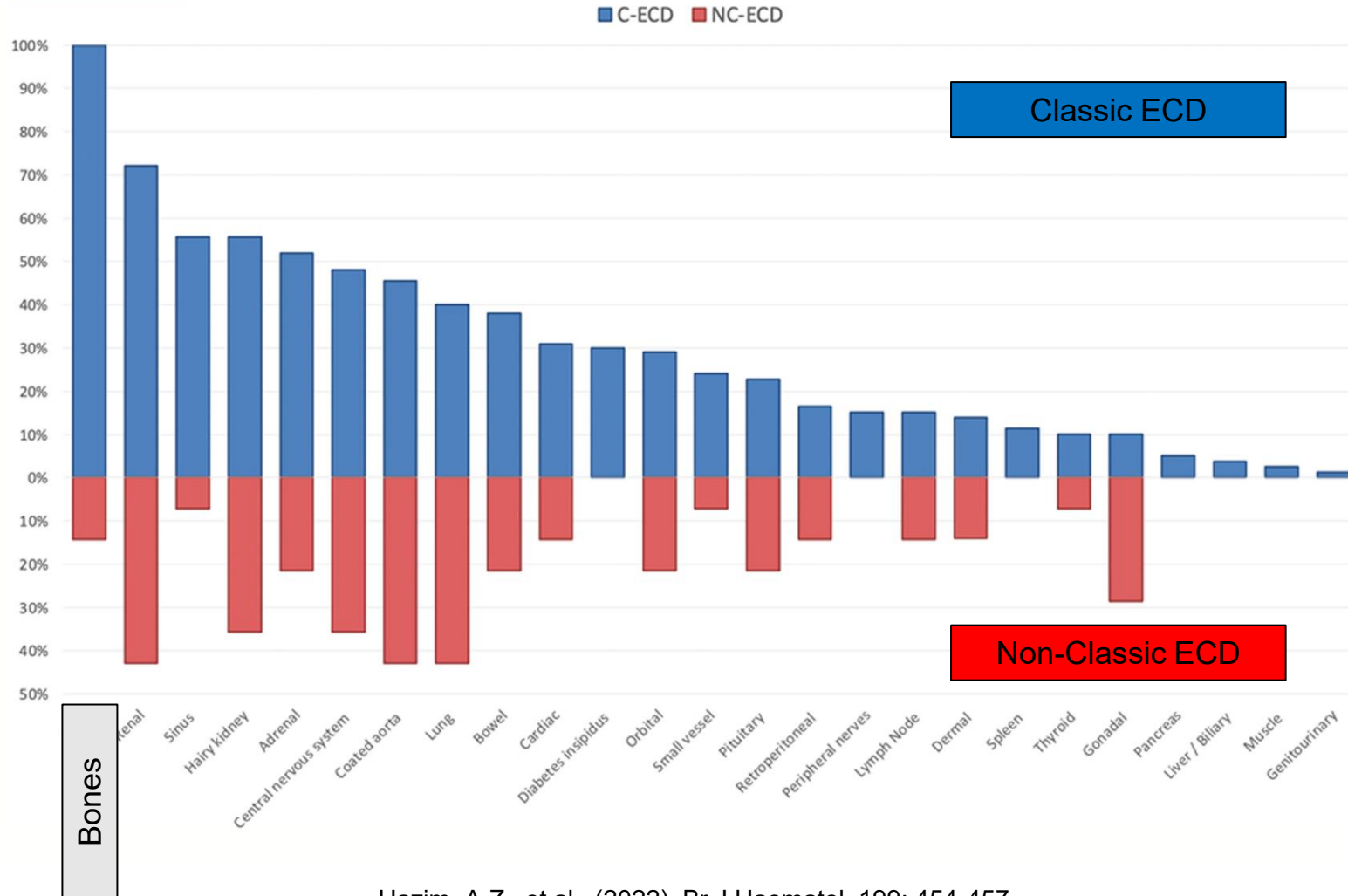


Abb. 1. Osteosklerotische Lipoidgranulomherde der Tibia und Fibula. In der rechten Fibula A und der rechten Tibia B je ein großer osteoplastischer Lipoidgranulomherd a-b, c-d, deren dichtes Knochengewebe e, f, sich gegen die dicke Knochenrinde g h deutlich abhebt. Normale Spongiosa.



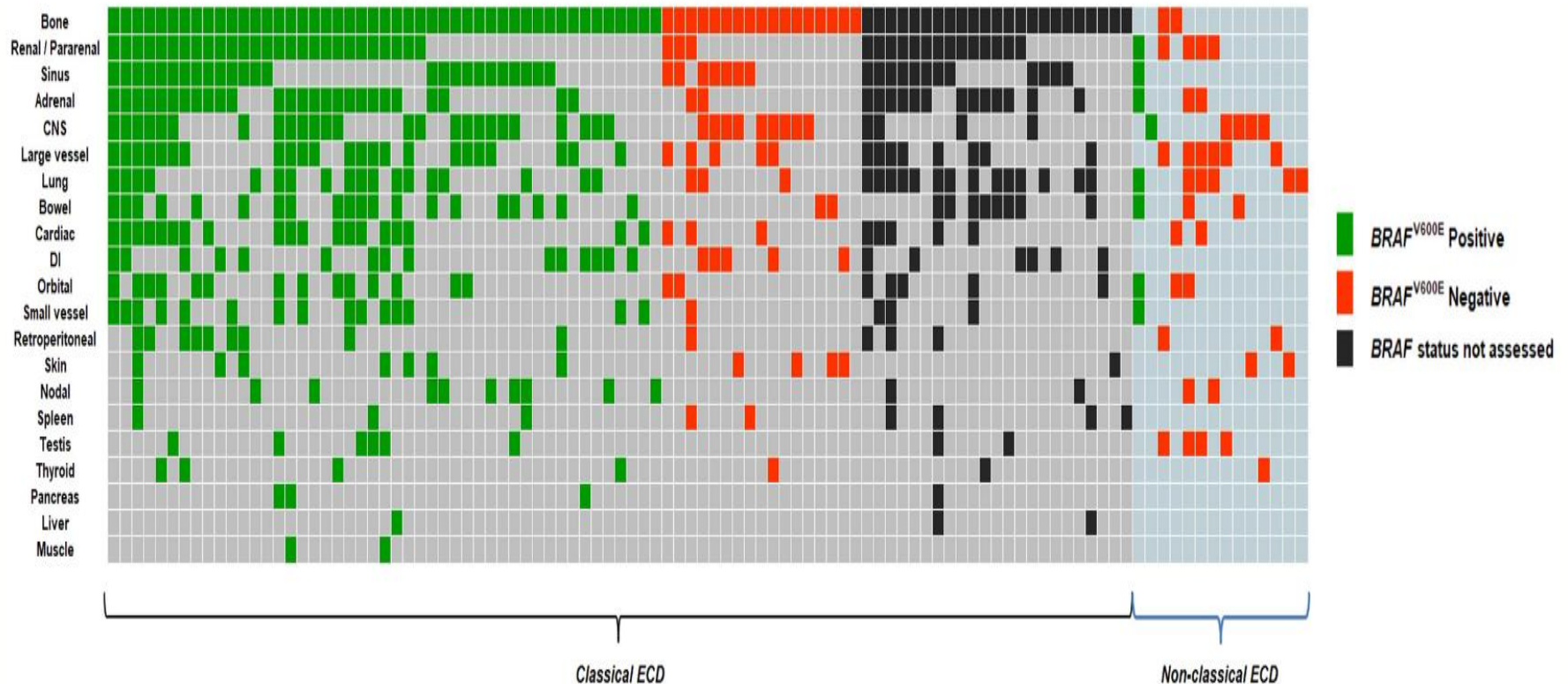
Chester W. Virchows Arch Pathol Anat 1930;279:41

Classical vs. Non-classical ECD



Hazim, A.Z., et al., (2022). Br J Haematol, 199: 454-457.

Classical vs. Non-classical ECD



Hazim, A.Z., et al., (2022). Br J Haematol, 199: 454-457.

Histiocyte Society Classification (2016)

L-group

- Langerhans cell histiocytosis (LCH)
- Erdheim-Chester disease (ECD)
- Classical ECD
- Nonclassical ECD
- Mixed LCH/ECD
- Indeterminate cell histiocytosis
- ALK-positive histiocytosis

C group

- Cutaneous (skin) non-LCH
 - Xanthogranuloma family (JXG, AXG)
 - Non-xanthogranuloma family (Rosai-Dorfman, Necrobiotic xanthogranuloma)
- Cutaneous non-LCH with systemic component
 - XG family- XD
 - Non-XG family - MRH

Emile JF et al, Blood. 2016 Jun 2;127(22):2672-81

World Health Organization, 5th ed. (2022)

Histiocytic neoplasms

- Juvenile xanthogranuloma (JXG)
- Erdheim-Chester disease
- Rosai-Dorfman disease
- ALK-positive histiocytosis
- Histiocytic sarcoma

Khoury JD et al. Leukemia (2022).
<https://doi.org/10.1038/s41375-022-01613-1>

Methods

- Comprehensive review of published cases of adult xanthogranuloma (AXG) (age ≥ 18 y) with extracutaneous involvement from 2013-2024 through PubMed and Embase
- Search terms included “adult AND xanthogranuloma” with additional searches including the terms “systemic,” “extracutaneous,” “multiple,” “multifocal,” “multicentric,” and “visceral”

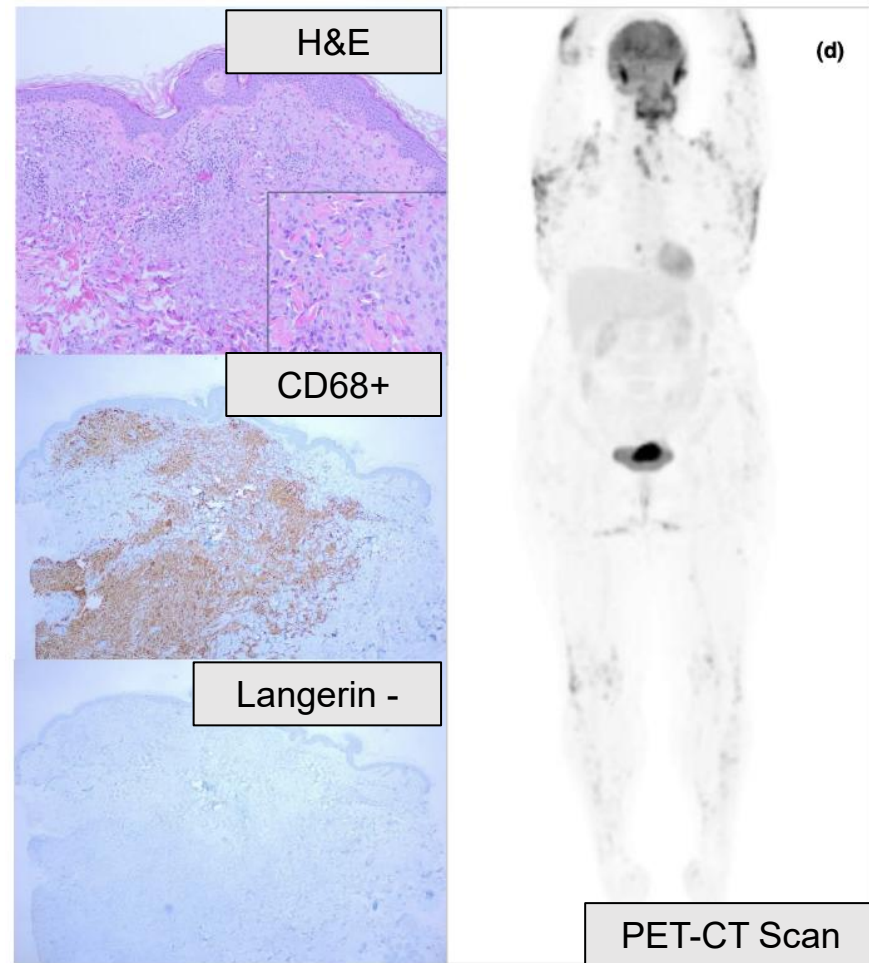
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Cases from the Literature

1) AXG w/ upper airway involvement

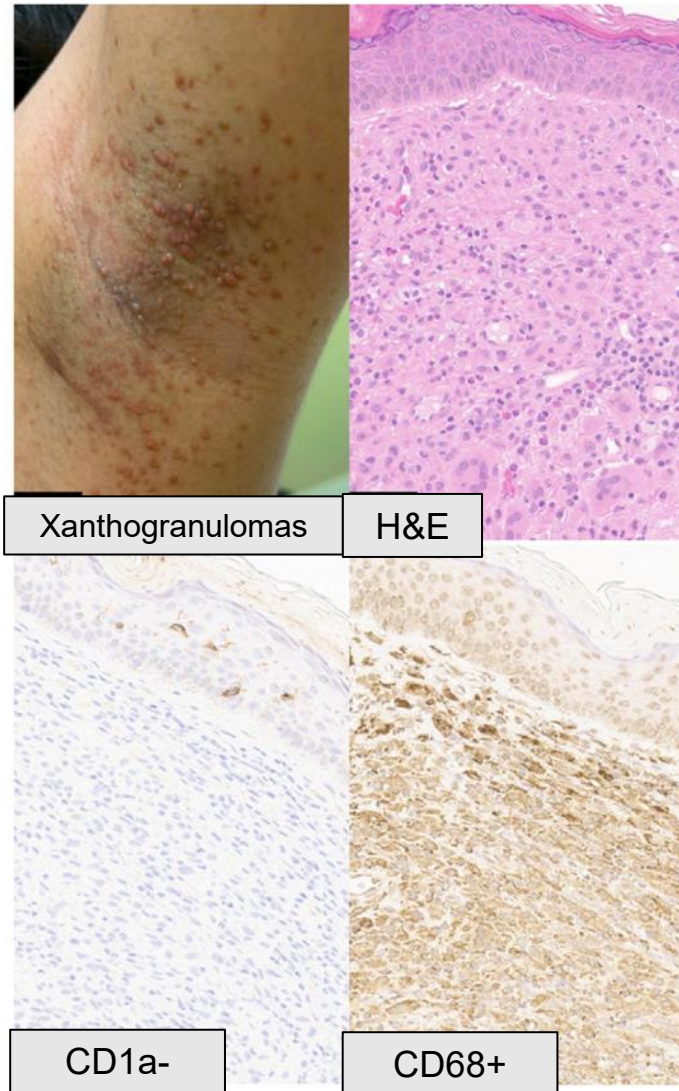
- 57 y/o female
- Skin lesions involving axilla, trunk, perioral, and periocular areas
- Oropharynx and glottic involvement
- BRAFV600E neg
- Full body PET/CT shown
- Spontaneous regression of all lesions in 24 months



Sampedro-Ruiz, et al., (2021). Int J Dermatol, 60: e317-e319.

2) AXG w/ brain/pituitary involvement

- 22 y/o female
- Cutaneous lesions: face, axilla, groin
- Extracutaneous sites: brain and pituitary
- PET-CT scan performed
- GAB2-BRAF fusion
- Partial response to prednisone treatment



Wu B, et al. Cutan Pathol. 2022;49(8):727-730

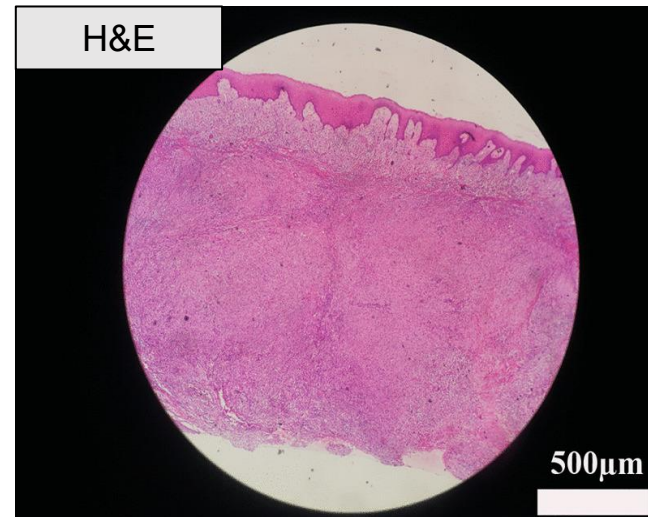
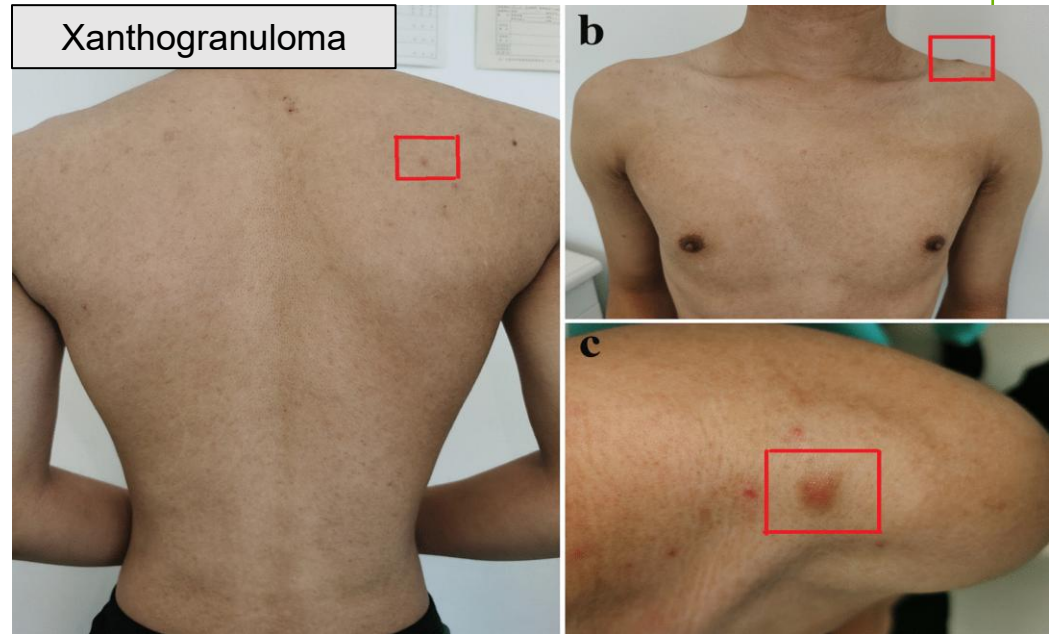
3) AXG w/ lung & scleral involvement

- 60 y/o female with numerous skin lesions and lung and scleral involvement
- UBR2-BRAF fusion
- Treatment and outcome not specified

Zanwar, S., et al., (2022). Blood cancer journal, 12(6), 97. (Reference Table 1- Pt #: MC-6)

4) AXG w/ gingival involvement

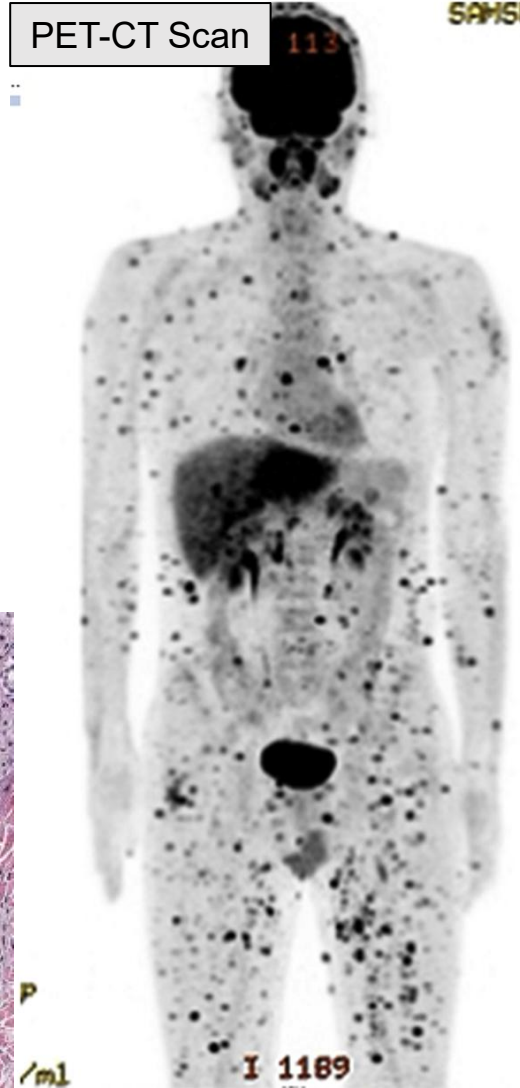
- 21 y/o male
- Cutaneous lesion on shoulder
- Extracutaneous site: mandibular gingiva
- No baseline imaging or mutational testing
- Patient declined treatment



Chen, L., et al., (2022). BMC oral health, 22(1), 618.

5) AXG w/ multisystem involvement

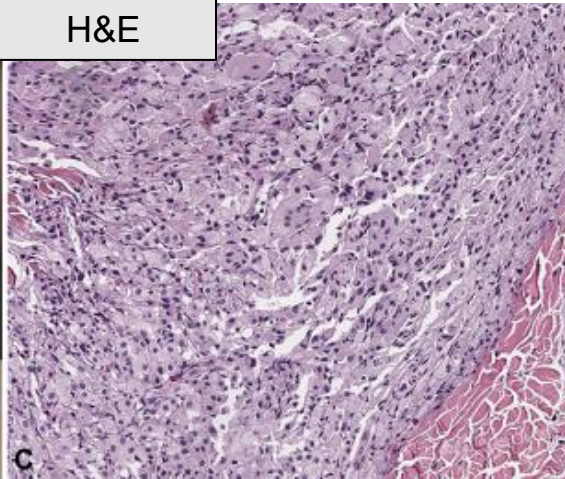
- 31 y/o male
- Cutaneous lesions: face, trunk, legs
- Extracutaneous lesions: liver, pancreas, lungs, bones
- PET-CT performed
- No mutational testing performed
- Observation of lesions w/ no outcome specified



Xanthogranulomas



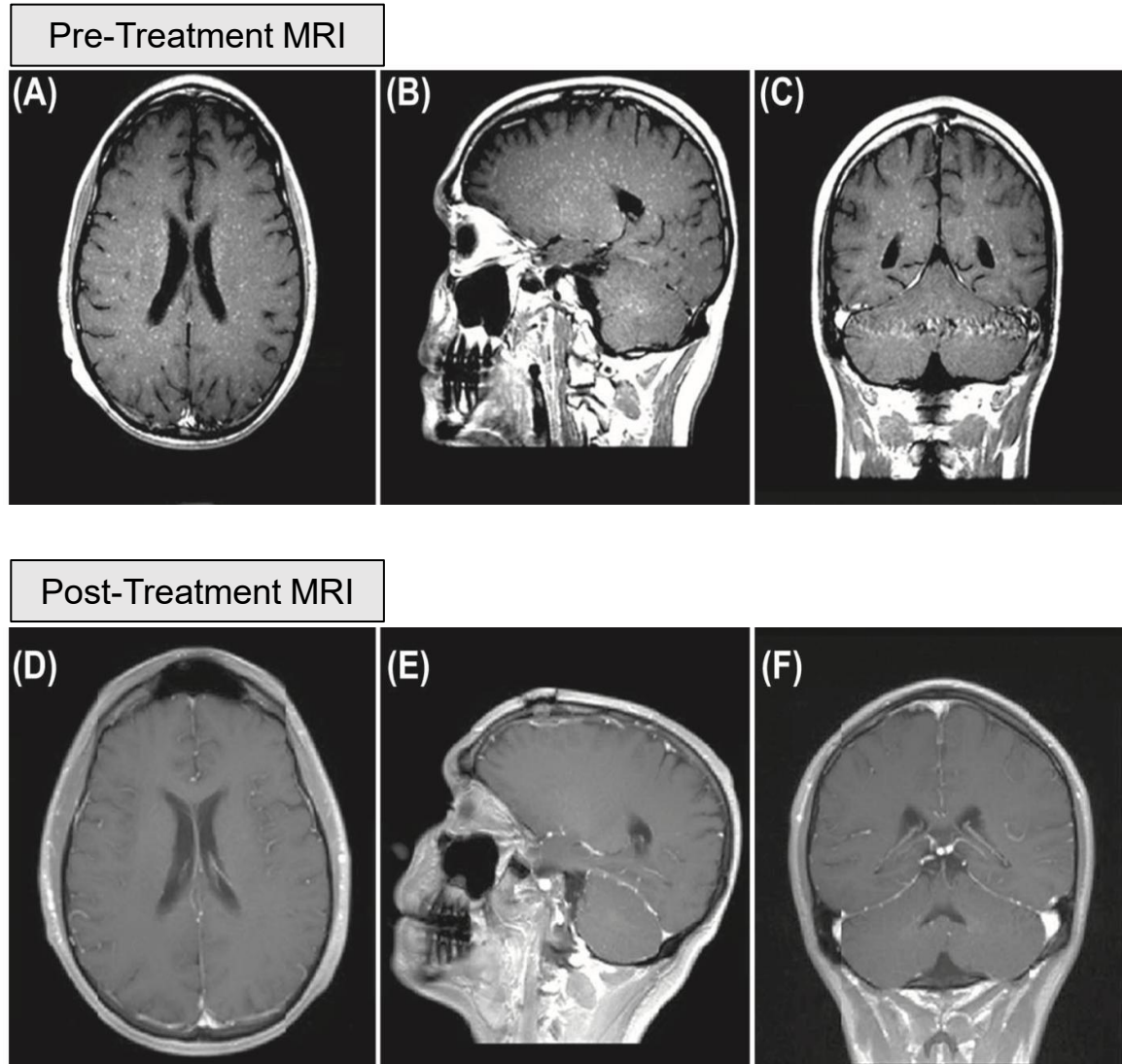
H&E



Yoon, D., et al., (2019). JAAD case reports, 5(12), 1097–1100.

6) AXG w/ brain involvement

- 23 y/o male
- One skin lesion-resolved spontaneously
- Multiple intracranial xanthogranulomas
- No PET-CT scan performed
- No mutational testing performed
- Intracranial lesions resolved w/ steroids and chemotherapy



Lee A. Tan, et al., (2014). British Journal of Neurosurgery, 28:6, 817-818

Summary

Case	PMID	Age/Gender	Skin lesion location(s)	Other organs involved	Knee bone osteosclerosis	Baseline full body imaging	Mutational testing	Treatment and outcome
1	33560521	57/F	Axilla, trunk, perioral, periocular	Oropharynx, glottis	-	PET-CT	BRAF V600E neg	Spontaneous regression
2	35332933	22/F	Face, oral mucosa, axilla, groin	Brain, pituitary	-	PET-CT	GAB2-BRAF	Prednisone-partial response
3	35764604	60/F	Not specified	Lung, sclera	-	None	UBR2-BRAF	Not specified
4	36529720	21/M	Shoulder	Gingiva	-	None	None	None-declined treatment
5	31828195	31/M	Face, trunk, legs	Liver, pancreas, lungs, muscles, bones	-	PET-CT	None	Observation-not specified
6	24827069	23/M	Not specified	Brain	-	None	None	Steroids/Chemotherapy-complete resolution

Conclusions

- Non-classical ECD and systemic involvement of XG in adults are morphologically indistinguishable from each other.
- Half of the cases did not undergo baseline PET-CT scan or mutational testing.
- Systematic evaluation may be needed for adults with XG lesions.
- There is a need to better define non-classic ECD to differentiate it from systemic AXG.

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Patients and Families

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Questions?