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CMHD Pathology Report

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ReportID: Report Date: February 05, 2013 Pathologist: H. Adissu



Mouse Genetics Project

Wellcome Trust Sanger Institute Wellcome Trust Genome Campus Hinxton, Cambridge CB10 1SA UK email: MGPenguiries@sanger.ac.uk

<u>Mouse Portal</u> <u>Europhenome</u>

CMHD LabID: N12-1503

Relevant History:

Phenotypes: decreased B cell number preweaning lethality embryonic lethality increased red blood cell distribution width decreased circulating glucose level improved glucose tolerance decreased circulating alanine transaminase level decreased lactate dehydrogenase level decreased lactate dehydrogenase level decreased circulating aspartate transaminase level

AnimalID: M00166730 (Male)

Histopathology Findings:

kidney (MA:0000368)

Morphological Diagnosis: Duration: chronic; Distribution: multifocal;

Definitive Diagnosis: Perivascular mononuclear inflammatory aggregates

Organ/Tissue Analyzed:

Histopathology examination included the following organs and tissues: brain, trigeminal ganglion, eyes, salivary glands, trachea, lungs, heart, thymus, thyroid gland, parathyroid gland, exocrine and endocrine pancreas, oesophagus, stomach, small intestine, large intestine, liver, gall bladder, spleen, kidneys, adrenal gland, lymph nodes, spinal cord, bone marrow, sternum, femur and tibia with associated skeletal muscles, brown fat, pinna, skin, testis, epididymis, seminal vesicle, and prostate.

AnimalID: M00166686 (Male) Histopathology Findings: liver (MA:0000358) Morphological Diagnosis: MPATH Diagnosis: steatosis MPATH:622

Definitive Diagnosis: Minimal or absent hepatic lipidosis



www.cmhd.ca/pathology/reports/histopathology_report_wtsi.asp?ID=50012861

spleen (MA:0000141)

Histopath Description:

There is marked erythropoiesis and moderate megakaryopoiesis in the red pulp

Morphological Diagnosis:

Distribution: multifocal to coalescing; **MPATH Diagnosis:** extramedullary hemopoiesis MPATH:595

Definitive Diagnosis:

extramedullary erythropoiesis, marked

Histopathology Comments:

This change suggests increased RBC production, hence may explains increased red blood cell distribution width (immature RBC have increased size)



extramedullary erythropoiesis, marked

Organ/Tissue Analyzed:

Histopathology examination included the following organs and tissues: brain, trigeminal ganglion, eyes, salivary glands, trachea, lungs, heart, thymus, thyroid gland, parathyroid gland, exocrine and endocrine pancreas, oesophagus, stomach, small intestine, large intestine, liver, gall bladder, spleen, kidneys, adrenal gland, lymph nodes, spinal cord, bone marrow, sternum, femur and tibia with associated skeletal muscles, brown fat, pinna, skin, testis, epididymis, seminal vesicle, and prostate.

AnimalID: M00166689 (Female)

Histopathology Findings:

mesenteric lymph node (MA:0002829) Morphological Diagnosis: MPATH Diagnosis: lymphoid neoplasms MPATH:513

Definitive Diagnosis: Lymphoma, early



Lymphoma, early

liver (MA:0000358)

Histopath Description:

Periportal and midzonal prominently macrovesicular lipid deposition (some as large as 50 um in diameter)

Morphological Diagnosis:

Distribution: multifocal; MPATH Diagnosis: steatosis MPATH:622

Definitive Diagnosis:

Moderate hepatic lipidosis



hepatic lipidosis, moderate

spleen (MA:0000141) Histopath Description: There is marked erythropoiesis in the red pulp

Morphological Diagnosis:

Distribution: multifocal to coalescing; MPATH Diagnosis: extramedullary hemopoiesis MPATH: 595

Definitive Diagnosis:

extramedullary erythropoiesis, marked

Histopathology Comments:

This change suggests increased RBC production, hence may explains increased red blood cell distribution width (immature RBC have increased size)



erythropoiesis

small intestine (MA:0000337)

Histopath Description:

There is marked and diffuse macrovesicular lipidosis of the duodnal lamina propria.

Morphological Diagnosis:

Distribution: multifocal; MPATH Diagnosis: steatosis MPATH:622

Definitive Diagnosis:

Intestinal steatosis, extreme



Intestinal steatosis Intestinal steatosis

Small intestine, normal



Small intestine, normal

sternal manubrium (MA:0001332)

Histopath Description:

There is a complete sternal fracture. The chondroid tissue along the fracture is markedly degenerate. There is a a nodular cartilagenous proliferation at the perichondrial margins (reactive reparative chondroid hyperplasia)

Morphological Diagnosis:

Duration: chronic; Distribution: focally extensive;

Definitive Diagnosis:

Sternal osteochondritis with fracture and reactive and reparative chondroid hyperplasia ('calus')



Sternal Sternal osteochondritis with osteochondritis with fracture and fracture and reactive and reactive and reparative reparative chondroid chondroid hyperplasia hyperplasia

Organ/Tissue Analyzed:

Histopathology examination included the following organs and tissues: brain, trigeminal ganglion, eyes, salivary glands, trachea, lungs, heart, thymus, thyroid gland, parathyroid gland, exocrine and endocrine pancreas, esophagus, stomach, small intestine, large intestine, liver, gall bladder, spleen, kidneys, adrenal gland, lymph nodes, spinal cord, sternum, femur and tibia with associated skeletal muscles, brown fat, pinna, skin, uterus, oviduct, ovary, and mammary gland.

AnimalID: M00166733 (Female) **Histopathology Findings:** mesenteric lymph node (MA:0002829)

Morphological Diagnosis: Distribution: multifocal to coalescing;

Definitive Diagnosis: Lymphoid follicular hyperplasia



hyperplasia

liver (MA:0000358)

Histopath Description:

Periportal and midzonal prominently macrovesicular lipid deposition (some as large as 50 um in diameter)

Morphological Diagnosis:

Distribution: multifocal; MPATH Diagnosis: steatosis MPATH:622

Definitive Diagnosis:

Moderate hepatic lipidosis



moderate

spleen (MA:0000141)

Histopath Description:

There is mild erythropoiesis in the red pulp

Morphological Diagnosis:

Distribution: multifocal to coalescing; MPATH Diagnosis: extramedullary hemopoiesis MPATH: 595

Definitive Diagnosis:

extramedullary erythropoiesis

Histopathology Comments:

This change suggests increased RBC production, hence may explains increased red blood cell distribution width (immature RBC have increased size)



extramedullary erythropoiesis

sternal manubrium (MA:0001332)

Histopath Description:

There is a complete sternal fracture. The chondroid tissue along the fracture is markedly degenerate. There is a a nodular cartilagenous proliferation at the perichondrial margins (reactive reparative chondroid hyperplasia)

Morphological Diagnosis:

Duration: chronic; Distribution: focally extensive;

Definitive Diagnosis:

Sternal osteochondritis with fracture and reactive and reparative chondroid hyperplasia ('calus')



Sternal

osteochondritis with osteochondritis with fracture and fracture and reactive and reactive and reparative reparative chondroid chondroid hyperplasia hyperplasia

Organ/Tissue Analyzed:

Histopathology examination included the following organs and tissues: brain, trigeminal ganglion, eyes, salivary glands, trachea, lungs, heart, thymus, thyroid gland, parathyroid gland, exocrine and endocrine pancreas, esophagus, stomach, small intestine, large intestine, liver, gall bladder, spleen, kidneys, adrenal gland, lymph nodes, spinal cord, sternum, femur and tibia with associated skeletal muscles, brown fat, pinna, skin, uterus, oviduct, ovary, and mammary gland.

Report Summary and Recommendation:

Three lesions are notable in this line: 1. Sternal fracture in the two female mice (M00166689 and M00166733). 2. marked splenic erythropoiesis (2/4, M00166686 and M00166689). 3. Lymphoid hyperplasia/Lymphoma of mesenteric lymph node in two females (M00166689 and M00166733). Enhanced splenic erythropoiesis explains increased red blood cell distribution width a feature of release of immature red blood cells associated with erythropoiesis.

The presence of remarkably similar sternal fractures with degenerative joint lesion suggests an underlying predisposing factor/s that has weakened the bone (consistent with a pathologic fracture). There is minimal hepatic lipidosis in the two female mice (M00166730; M00166686).