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MRI-characteristics of Pediatric- and Young Adolescent Renal Cell Carcinoma

a single-center retrospective study and literature review

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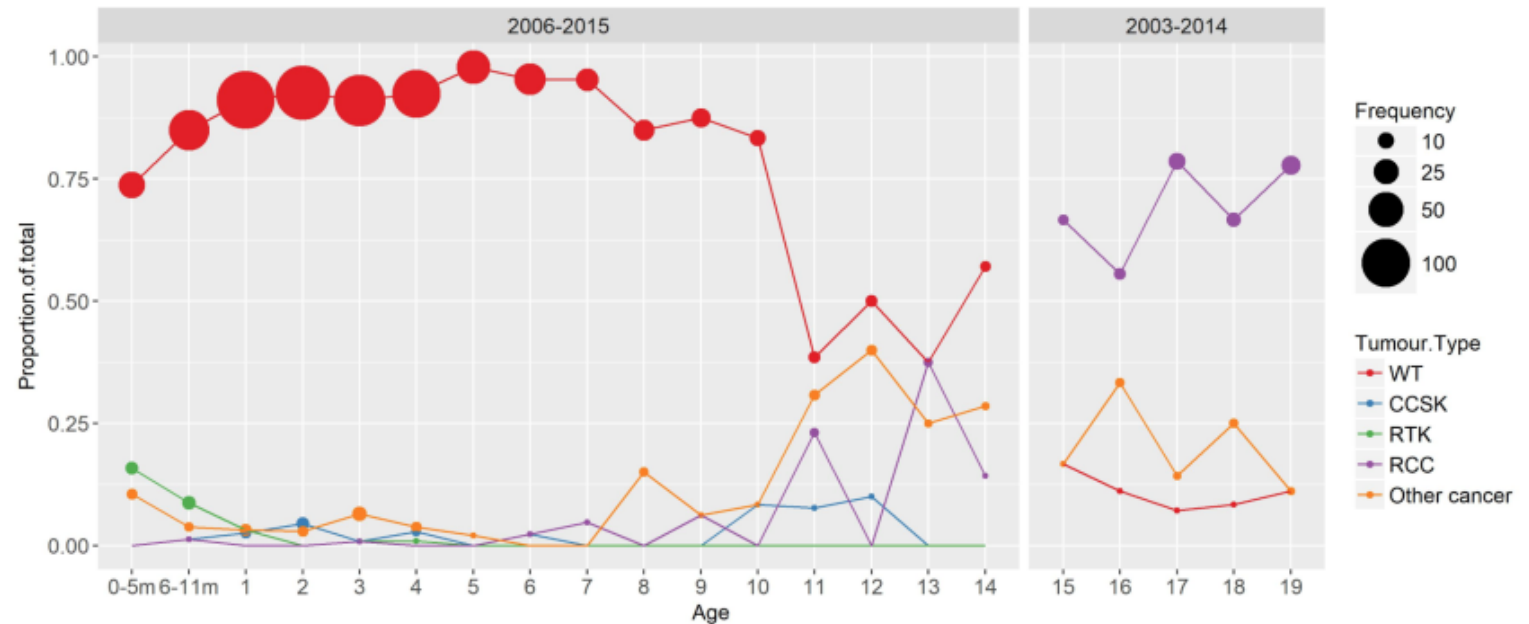


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No disclosures

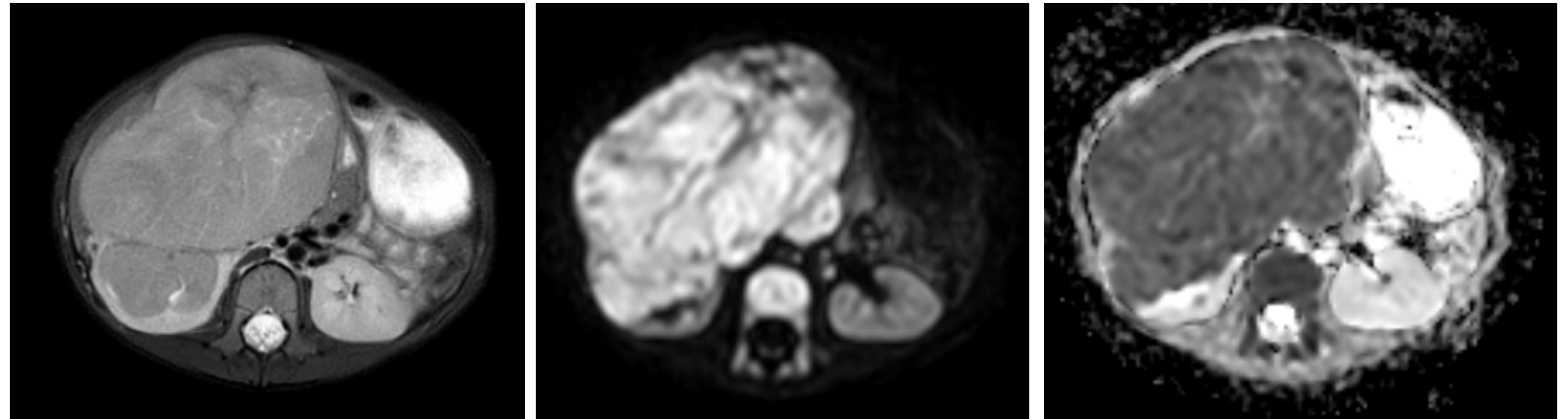
Introduction

- **Renal cell carcinoma (RCC)** → 2-6% of malignant pediatric renal tumors
- Rapidly rising incidences **second decade of life**
- **Pediatric RCC** → distinct entity



Histological subtypes

- **Histological subtypes** → predominantly translocation-type RCC (MiT-RCC)
 - MiT-family translocations (*TFE3*, *TFEB*)
- **Adults** → predominantly clear-cell type RCC



Clear-cell type RCC in 5-year old patient

Imaging



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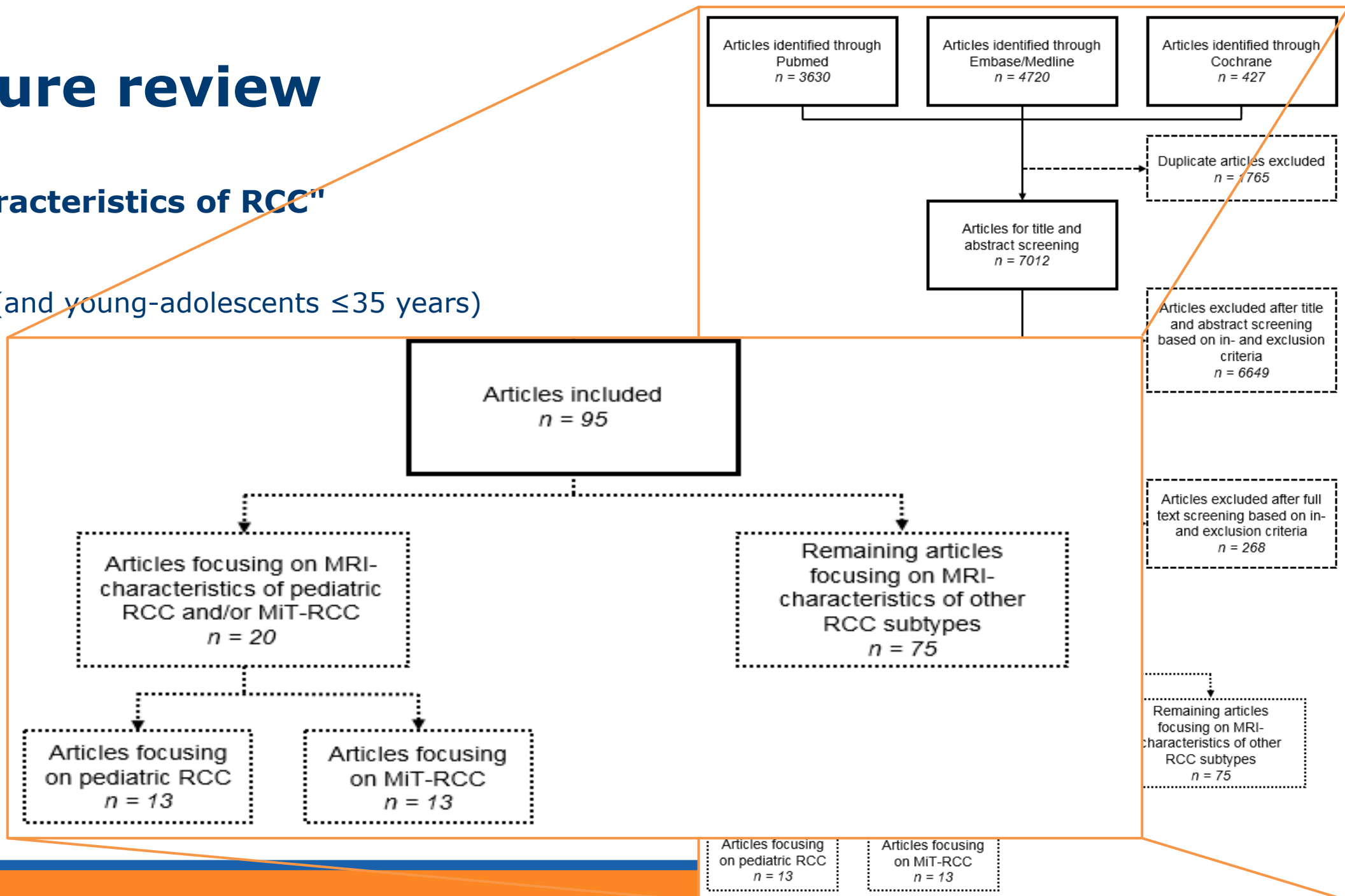


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- **MRI (+ DWI)** → SIOP-RTSG 2016 UMBRELLA protocol
- **MRI-characteristics** of pediatric (and young-adolescent) RCC →
 - No pathognomonic characteristics
 - Limited studies
 - Differences adults ↔ children
- **Aim** →
 - Retrospective case series focused on diagnostic MRI-characteristics
 - Literature review MRI-characteristics RCC

Literature review

- "MRI-characteristics of RCC"
 - MiT-RCC
 - Children (and young-adolescents ≤ 35 years)



Literature review

MRI-characteristics of MiT-RCC



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- **13** studies, **46** patients (**6** studies focusing on pediatric RCC)
- T1W **Hyper**-intensity ↔ T2W **Hypo**-intensity
- **Heterogeneous** enhancement
- Cysts, Hemorrhage, Necrosis → often not specified
- **Infiltrative / Irregular** growth pattern
- **Limited diffusion restriction**
- *Smaller size*

T2W hypo-intensity, Heterogeneous tumors, Relatively aggressive growth pattern

Case-series

Clinical characteristics



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- **n = 6 patients** → median 12 years (*5-16 years*)
- Range tumor volume **29-2191 cm³**
- **2/6** MiT-RCC – **2/6** clear-cell RCC – **1/6** FH-RCC – **1/6** NOS RCC

Case-series

Solid tumor characteristics



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- **Lobulated** tumors
- **Well-defined margins**
- Hemorrhage (**1/6**) – Necrosis (**1/6**) – Cysts (**2/6**)
- T1W **Iso**-intensity ↔ T2W **Hypo**-intensity
- **Homogeneous** enhancement

- No obvious correlation with histological subtype

But, mainly interested in MiT-RCC.. →

Case-series

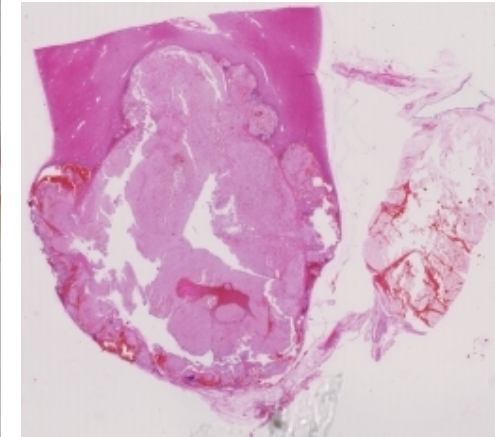
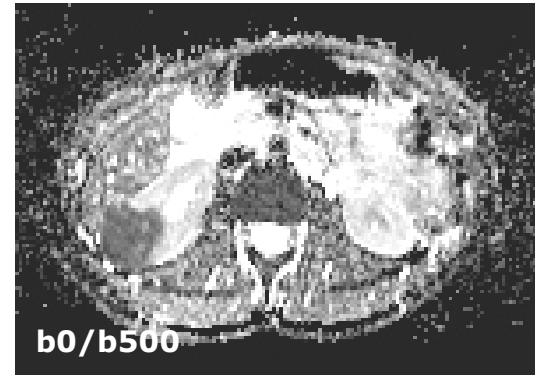
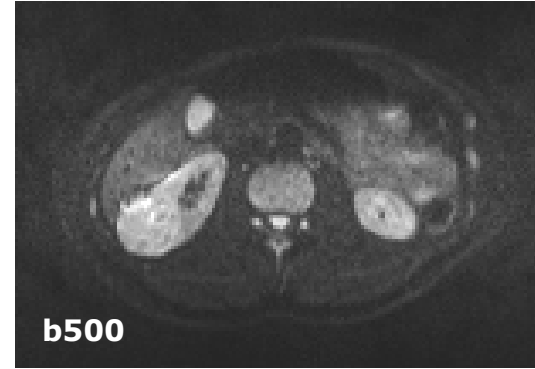
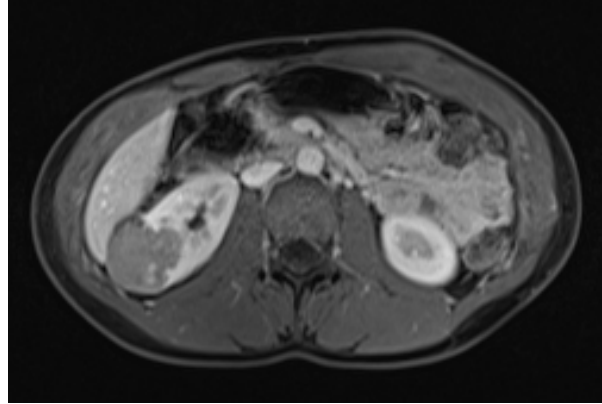
MiT-RCC (14-year-old girl with right-sided MiT-RCC)



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Case-series

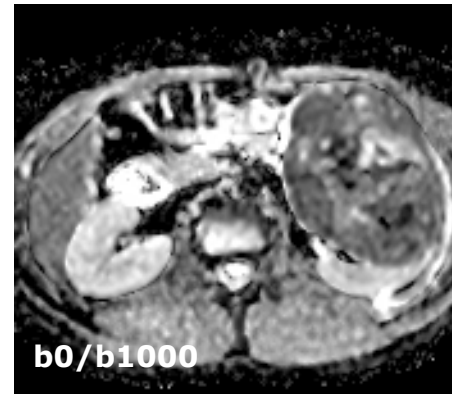
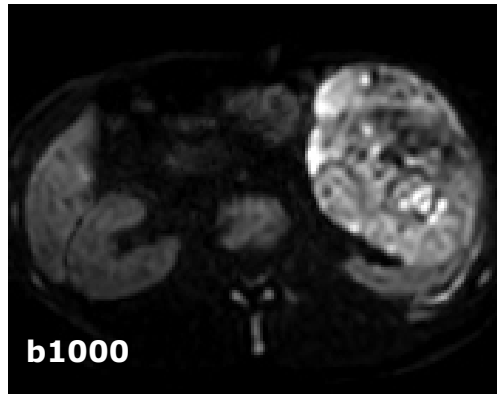
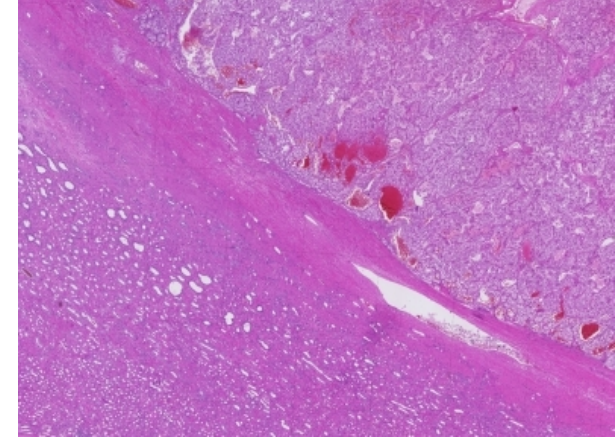
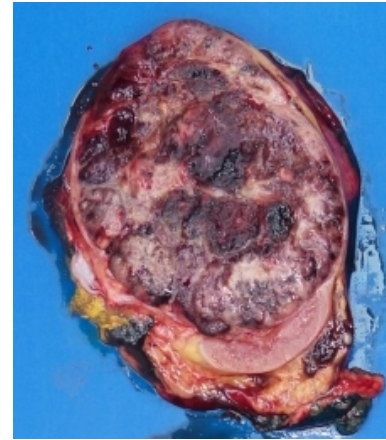
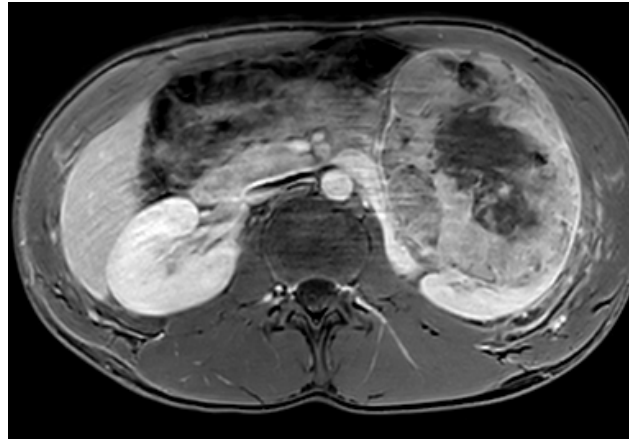
MiT-RCC (16-year-old male with left-sided MiT-RCC)



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Conclusions



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- **Varying presentation** in limited number of patients
- Specific MRI-characteristics pediatric RCC → remains **challenging**

- **T2-weighted hypo-intensity**

- Future aims →
 - **Discrimination** from other pediatric renal tumors
 - **Direct correlation** of MRI and histopathology

Acknowledgements

Collaborators

A.S. Littoij

M.M. van den Heuvel-Eibrink

R.R. de Krijger

R.A.J. Nievelstein

A. Bex





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(Extra slices with tables in case of questions)

Literature review

MRI-characteristics of pediatric- and young-adolescent RCC



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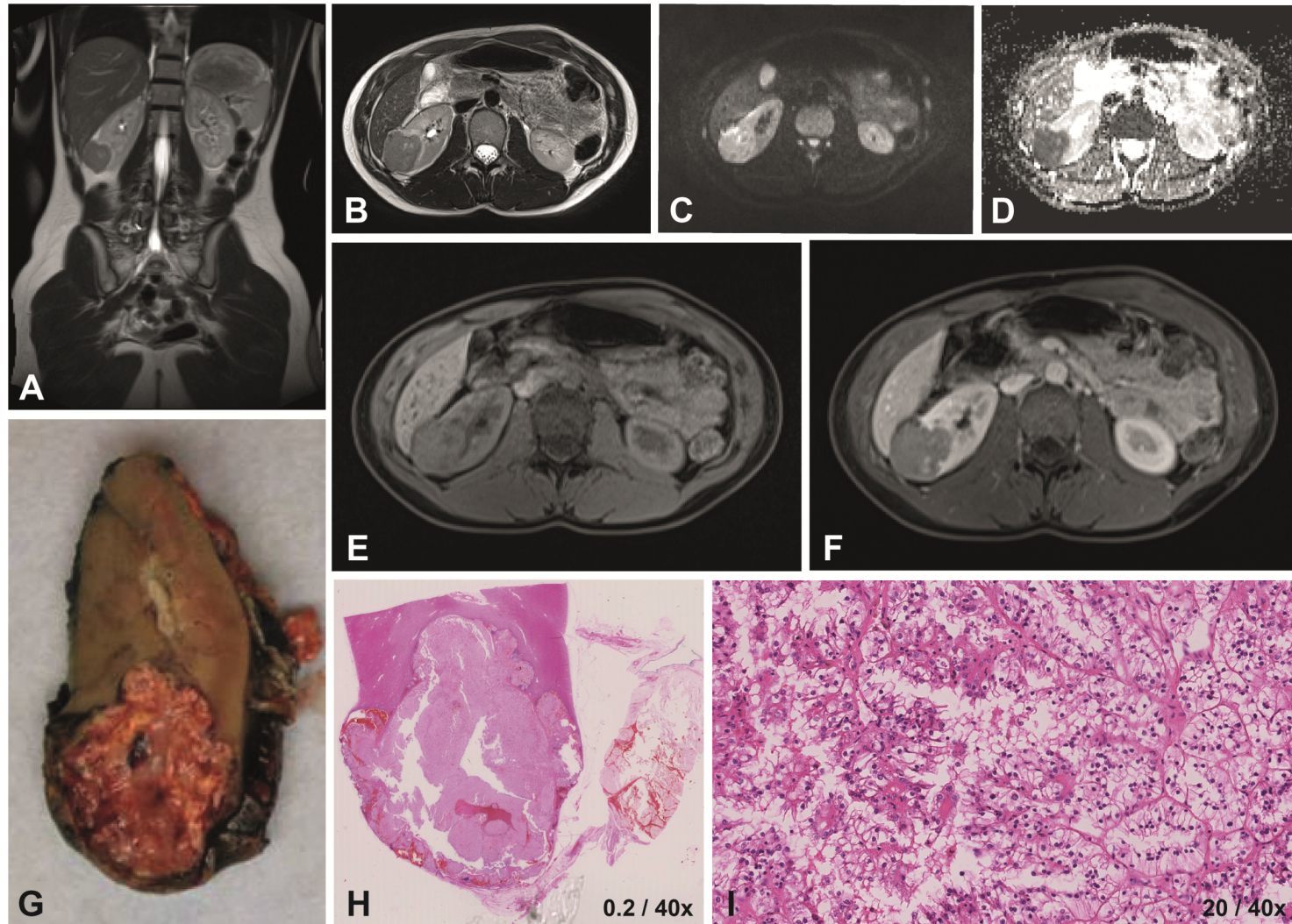
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- **13** studies, **25** patients (age 4-33 years)
- **Heterogeneous** on T1W/T2W imaging and after iv contrast
- **Cysts, Hemorrhage and/or Necrosis** → often not specified
- **Regional lymph node involvement**
- **DWI** → limited information

Limited number of patients, **Variety of histological subtypes**, No consistency in characteristics

Case-series

MiT-RCC (14-year-old girl with right-sided MiT-RCC)



Case-series

MiT-RCC (16-year-old male with left-sided MiT-RCC)



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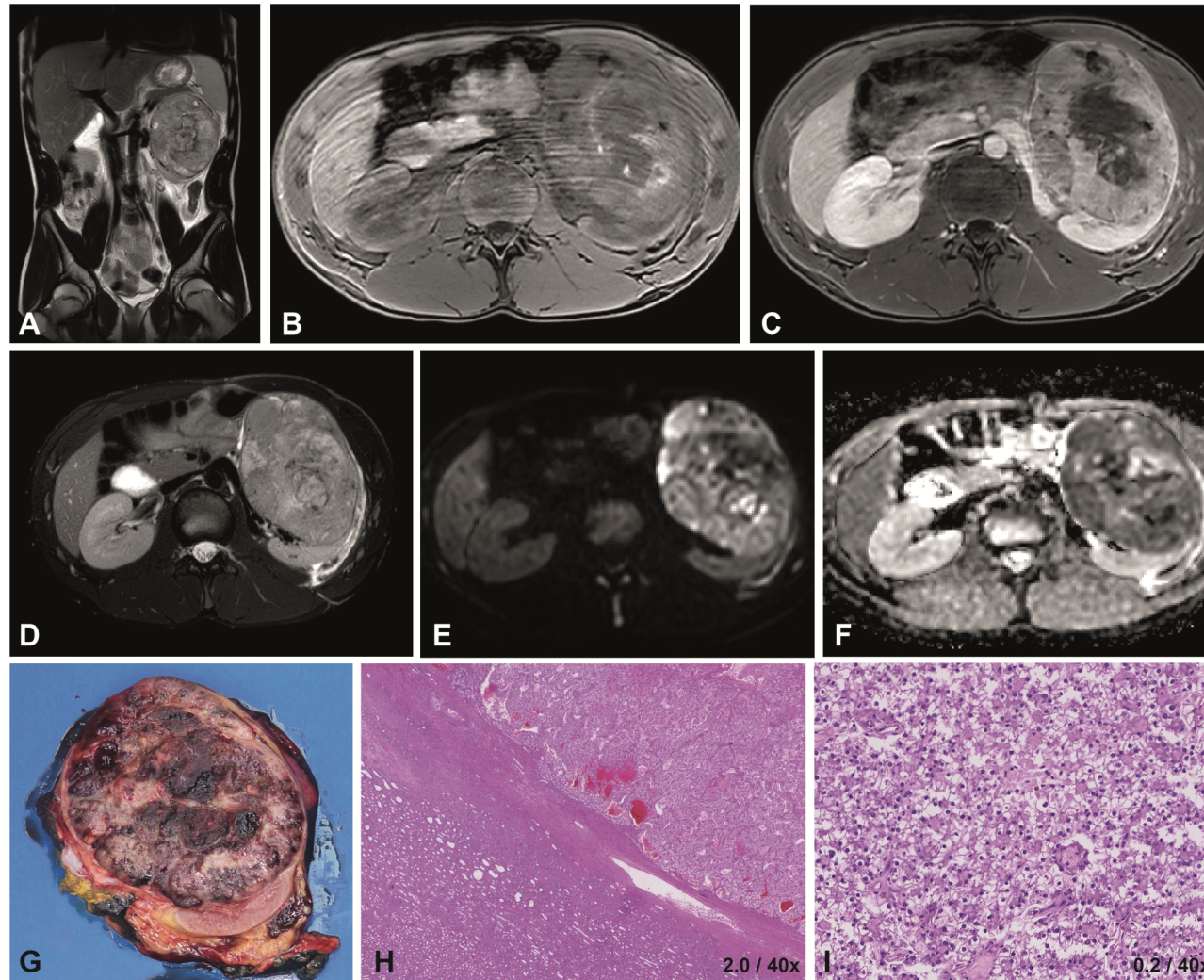


Table 1. Scan parameters at 1.5-T MRI of the scanned sequences

Patient nr.	1	2	3	4	5	6
T2-weighted imaging						
Repetition time (ms)	7500	447	1400	454	2457	2457
Echo time (ms)	123	90	92	90	100	100
Slice thickness (mm)	5.5	1.15	4	1.15	5	5
Echo train length	17	85	256	85	39	39
Slicing gap	6.5	1.15	4.4	1.15	5	5
Acquisition matrix	320 x 224	348 x 348	384 x 194	348 x 348	452 x 78	452 x 78
T1-weighted imaging						
Repetition time (ms)	6.3	5.5	4.7	5.4	5.5	5.5
Echo time (ms)	3.1	2.7	2.4	2.7	2.7	2.7
Slice thickness (mm)	5	3	3	3	3	3
Echo train length	1	60	1	60	60	60
Slicing gap	2.5	1.5	NS	1.5	1.5	1.5
Acquisition matrix	288 x 192	232 x 233	320 x 170	232 x 233	232 x 233	260 x 261
Diffusion weighted imaging						
Repetition time (ms)	13333	2084	5300	2084	2398	2398
Echo time (ms)	634	72	75	72	73	73
Slice thickness (mm)	6	5	6	5	5	5
Echo train length	1	35	1	35	35	35
Slicing gap	7.2	5	7.2	5	5	5
Acquisition matrix	NS	88 x 70	192 x 153	88 x 70	88 x 70	88 x 70
b-values	0/50/600/1000	0/50/200/400/800	0/500	0/50/200/400/800	0/100/1000	0/100/1000

ms = milliseconds; mm = millimeters; NS = not specified

Table 2. Characteristics of the included pediatric patients with RCC

		Patient nr.	1	2	3	4	5	6
Clinical characteristics	Age (months)		184	63	179	109	63	193
	Sex		Female	Female	Female	Male	Female	Male
	Tumor side		Right	Left	Right	Left	Right	Left
	Pre-operative chemotherapy		No	Yes	No	No	Yes	No
	Surgical approach		TN	TN	TN	TN	TN	TN
	Tumor stage		1	1	2	3	1	3
	Biopsy performed		No	No	Yes	No	No	No
Pathology findings	Weight of the specimen (gram)		2100	NS	210	610	753	820
	Tested for MiT-RCC (test)		No	Yes (FISH)	Yes (FISH)	Yes (FISH)	Yes (FISH, RNA-seq)	Yes (RNA-seq)
	Histopathological subtype		FH-RCC	ccRCC	MiT-RCC	NOS	ccRCC	MiT-RCC
	Genetic analysis		FH-mutation ^d	NS	NS	NS	None	NS
General tumor characteristics on MRI	Tumor volume (cm ³)		2191	110	29	353	433	554
	Location of the tumor		Indist	Central	Peripheral	Peripheral	Central	Indist
	Regional lymph nodes		No	No	No	No	No	No
	Shape		Lobulated	Round	Lobulated	Lobulated	Lobulated	Round
	Margins		Well-def	Well-def	Ill-def	Ill-def	Well-def	Well-def
	Pseudocapsule		Yes	Yes	No	No	Yes	Yes
Growth pattern on MRI	Capsule rupture / invasion		No	No	Yes	Yes	No	No
	Infiltrative growth pattern		No	No	Yes	No	No	No
	Venous invasion / Tumor thrombus		No	No	No	No	No	No
MRI characteristics of solid components of the tumor	T2W imaging	Pattern	Hetero	Homo	Homo	Homo	Homo	Hetero
		Intensity	Hypo, Iso	Iso	Hypo	Hypo	Hypo	Hypo
	T1W imaging	Pattern	Hetero	Homo	Homo	Homo	Homo	Hetero
		Intensity	Iso	Iso	Iso	Hypo	Iso	Hypo
	Enhancement, degree and pattern		Strong, homo	Mild, homo	Strong, homo	Strong, homo	NA ^a	Mild, hetero
	Hemorrhage, degree		No	Yes, ext ^b	No	Yes, minimal	No	Yes, min ^c
	Necrosis		No	No	No	No	No	Yes
	Cysts		Yes	Yes ^b	No	No	No	Yes
	Septation		No	No	No	No	No	No
	Fatty tissue		No	No	No	No	No	No
	Subcapsular fluid		No	No	No	No	No	Yes ^c
Increased vascularity		No	No	Yes	Yes	No	Yes	
Median surface ROIs (cm ²)		4.29	0.45	2.66	9.06	18.14	2.61	
Median ADC-value ^d (*10 ⁻³ mm ² /s)		1.20	1.05	0.98	1.20	0.70	0.80	

TN = total nephrectomy; NS = not specified; FISH = fluorescence in situ hybridization; RNA-seq = RNA-sequencing; RCC = renal cell carcinoma; FH-RCC = fumarate-hydratase deficient RCC; ccRCC = clear cell type RCC; MiT-RCC = translocation-type RCC; NOS = not otherwise specified; Indist = indistinguishable; def = defined; Hetero = heterogeneous; Homo = homogeneous; ext = extensive; min = minimal.

^a No contrast-enhanced diagnostic MRI-scan available; ^b Hemorrhage off/in the cystic lesion; ^c Subcapsular fluid suspected of hemorrhage; ^d Hereditary Leiomyomatosis and Renal Cell Cancer

Table 3. Review of literature focusing on MRI-characteristics of pediatric- and young adolescent renal cell carcinoma

Author (Year)	Country	Nr. of patients	Age (years)	sex (M:F)	Histological subtype	study design	Tumor side (L/R)	Tumor size (largest diameter, in cm)	Tumor location	T1 weighted imaging appearance	T2 weighted imaging appearance	Contrast-enhanced imaging appearance	Tumor composition and growth pattern	Necrosis (nr of total)	Hemorrhage (nr of total)	Vascular involvement (nr of total)	Intra-tumoral fat	Regional lymph node involvement / Lymph node metastases (nr of total)	(Distant) metastases other than lymph nodes
Noreña-Bengito (2021)	Col	1	12	1:0	RMC	CR	1:0	NS	central	inter	hetero, hypo	hypovascular	solid, infiltrative	1	NS	absent	absent	renal hilum, para-aortic	absent
Koetter (2020)	USA	1	16	0:1	P1	CR	1:0	17.3	exophytic	NS	NS	hetero	cystic-solid	1	NS	absent	NS	peri-aortic, pericaval	absent
Schaefer (2017)	USA	1	14	1:0	MIT	CR	0:1	5.2	upper pole	homo	hetero	NS	solid	NS	NS	absent	NS	absent	absent
Okabe (2016)	Japan	1	4	1:0	CHR	CR	0:1	2.5	NS	hypo	hetero, hyper	NS	well-defined	1	NS	NS	NS	NS	NS
Zhou (2016)	China	1	17	1:0	CC	CR	B	0.2-2.0*	B	hypo	hypo	strong	multiple B*	NS	NS	absent	NS	absent	synchronous CNS hemangioblastoma and pancreatic neuroendocrine tumor
Liu (2014)	China	3	15-33	1:2	MIT	CR	1:2	18; 6; 11	cortical	hyper	hetero, hypo	hetero hypo	solid (2); cystic (1); infiltrative (3)	focal (2), central (1)	inter-tumor (3)	absent	NS	regional (2)	absent
Wang (2014)	USA	7*	13-33	3:4	MIT	RS	4:3	3.5-22	medullary (2); medullary cortical (4); exophytic (1)	iso (1); hyper (1); hetero (5)	hypo (1); hyper (1); hetero (5)	hetero: mild (1); moderate (4); marked rim/capsule (2)	irregular (6); not well-defined (4); ill-defined (3)	7	6	3	NS	regional (4), cervical (1)	absent
Koo (2013)	South Korea	1	28	0:1	MIT	RS	0:1	2.7	NS	NS	hetero, hyper	NS	well-defined	NS	NS	NS	absent	NS	absent
Dang (2012)	USA	2	18; 31	1:1	MIT	RS	0:1 B	8.9; 4.9	NS	hetero, hyper	NS	limited, hetero (1); NS (1)	NS	1	2	absent	NS	absent	absent
Downey (2012)	USA	2*	NS	NS	NS	RS	NS	NS	NS	hetero, hyper (1); NS (1)	NS	hetero	NS	NS	intratumoral (1)	NS	NS	NS	NS
Kato (2011)	Japan	1	18	1:0	MIT	CR	0:1	4.1	peripheral	NS	hetero, hypo (on central); hyper	delayed peripheral hyper, rim hyper	well-demarcated	NS	NS	NS	absent (hemol derin)	NS	NS
Blitman (2005)	USA	6 (3) [†]	15-27	3:3	RMC	RS	0:6	NS	central	NS	NS	hetero	infiltrative-ill-defined margins	4	intra-tumoral (4); sub-capsular (1)	ipsilateral renal vein (2); encasement vascular pedicle (3)	NS	cervical (6); retroperitoneal (5)*	liver (2); lung (3)
Adachi (2003)	Japan	1	4	1:0	CCP	CR	1:0	NS	NS	NS	NS	hyper walls	complicated cyst	NS	cystic (1)	NS	NS	absent	absent

* Multiple (cystic and) bilateral lesions in patient with von Hippel-Lindau disease; [†] MRI findings were not specified for each patient separately, so two adult patients (36 and 46 years old) could not be excluded from the overall MRI-data, but were not included in the clinical characteristics data; [‡] Total of nine children but only 2 with MRI-scan and no specific details for separate patients (5:4 sex, mean age 12.9 years with a range of 7-17 years, mean maximum diameter 6.2cm (1.5-12.6)); [§] Imaging characteristics were not reported separately per patient, leaving no opportunity to extract MRI-specific information. Information displayed is for all 6 patients, based on CT and MRI; * Retroperitoneal adenopathy was heterogeneous and ranging in volume from small (n=1) or moderate (n=2) to extensive (n=2); Col = Colombia; RMC = renal medullary carcinoma; CHR = chromophobe RCC; CC = clear-cell RCC; P1 = papillary type 1 RCC; CCP = clear-cell papillary type RCC; CS = case report; RS = retrospective cohort study; B = bilateral; homo = homogeneous; hetero = heterogeneous; hypo = hypo-intense; iso = iso-intense; hyper = hyper-intense; inter = intermediate; incr = increase; CNS = central nervous system; NS = not specified.

Table 4. Review of literature focusing on MRI-characteristics of translocation-type renal cell carcinoma (MiT-RCC)

Author (Year)	Country	Nr. of patients	Age (median years, range)	sex (M/F)	Study design	Tumor side (L/R)	Tumor size (largest diameter in cm)	Tumor location	T1 weighted imaging appearance	T2 weighted imaging appearance	Contrast-enhanced imaging appearance	Diffusion restriction (ADC-value $\times 10^{-3} \text{ mm}^2/\text{s}$)	Tumor composition and growth pattern	Necrosis (n of total)	Hemorrhage (n of total)	Vascular involvement (n of total)	Intra-tumoral fat	Regional lymph node involvement / Lymph node metastases (n of total)	(Distant) metastases other than lymph nodes
Tohji (2021)	Japan	1	78	1:0	CR	R	2.0	posterior	iso	hypo	NS	no restriction ^a	well circumscribed, no capsule	NS	NS	NS	absent	absent	absent
Dai (2019)	China	16	47.4 (20-76)	9:7	RS	9:7	1.7-14.6	endophytic, epicenter (14)	hypo (2), iso (5), hyper (9)	hetero (14); hypo (13), iso (6), hyper (2)	hetero (7)	hyper on DWI (b0/500) ((16)	irregular (9), regular (7); complete capsule (11), incomplete capsule (5); solid (11), cystic (2), mixed (3)	NS	5	2	absent	3	retroperitoneal space & liver (1); lung (1)
Gong (2018)	China	2	50; 45	1:1	CR	1:1	10.6; 5.2	upper pole (1); lower pole (1)	iso (1), hypo (1)	hypo (2)	hetero (1)	NS	irregular (1)	1	NS	absent	NS	1	absent
Chen (2017)	China	2	46; 30	0:2	RS	0:2	7.8; NS	NS	hetero iso (2)	hetero (2); hyper (1), hypo (1)	hetero (2)	Relatively high signal on DWI (b0/800) (1)	oval (17), irregular (4); solid (4), cystic (1), mixed (16) ^b	NS	NS	v. recalls (1)	NS	1	liver (1)
Schaefer (2017)	USA	1	14	1:0	CR	0:1	5.2	upper pole	homo	hetero	NS	NS	solid	NS	NS	absent	NS	absent	absent
Yu (2016)	China	1	40	1:0	CR	0:1	12	NS	iso	hetero hypo-hyper	NS	NS	well-defined, irregular	1	patchy (1)	absent	NS	1	absent
D'Antonio (2016)	Italy	1	71	0:1	CR	B ^c	12.0	NS	hetero	hyper	NS	NS	poorly circumscribed (1)	1	1	NS	NS	NS	NS
Liu (2014)	China	4	15-45	1:3	RS	1:3	4-18	cortical (4)	hyper (4)	hypo (3), hyper (1)	Hypo	NS	infiltrative (4); solid (3), cystic (1)	focal (3), center (1)	inter-tumor (4)	absent	absent	lymphadenopathy (3)	absent
Wang (2014)	USA	9	13-46	3:6	RS	4:5	2-22	medullary (3), medullary cortical (4), exophytic (1), pelvis (1)	iso (1), hyper (3), hetero (5)	hypo (1), hyper (2), hetero (6)	hetero: mild (1), moderate (6), marked rim/capsule (2)	NS	capsule (3); irregular (6), oval (1); well-defined (5), ill-defined (4)	8	7	4	NS	regional (5), cervical (1)	absent
Koo (2013)	South Korea	2	28; 71	0:2	RS	0:2	2.7; 4.6	NS	NS	hetero, hypo (2)	NS	NS	well-defined (2)	NS	intra-tumoral (1)	NS	absent	NS	absent
Dang (2012)	USA	2	18; 31		RS	0:1 B	8.9; 4.9	NS	hetero, hyper	NS	limited hetero (1); NS (1)	NS	NS	1	2	absent	NS	absent	absent
Razek (2011)	Egypt	4	5-67 ^d	NS	PS	NS	NS	NS	NS	NS	NS	mean 1.50 ± 0.97 (1.37-1.62) (b0/800)	NS	NS	NS	NS	NS	NS	NS
Kato (2011)	Japan	1	18	1:0	CR	0:1	4.1	peripheral	NS	hetero, hypo (n. central hyper)	delayed peripheral hyper, rim hyper	NS	well-demarcated	NS	NS	NS	absent (hemosiderin)	NS	NS

^a Tumor showed no restricted diffusion with a low signal; a fat-poor angiosarcoma was in the differential diagnosis; ^b Total study existed of 21 patients, of which only for 2 patients MRI-characteristics were reported. The tumor composition, shape and growth pattern are therefore reported for the total population, mainly based on CT; ^c Bilateral tumor, with a right conventional RCC, and a left MiT-RCC. Therefore the characteristics of the MiT-RCC are presented in the table; ^d Study with 55 patients, of which 4 had an MiT-RCC. Age, was presented for all patients.