

The spread of melanoma to the pericardium: Brief history of cellular interest

Wilson I. B. Onuigbo*

Department of Pathology, Medical Foundation and Clinic, 8 Nsukka Lane, Enugu 400001, Nigeria

Abstract

Search of the far famed monograph of Willis for the pericardium revealed scanty materials, including the lack of specific mention of melanoma. However, although he usually cited historical materials especially from the Transactions of the Pathological Society of London, none was traceable concerning pericardial melanoma. Accordingly, this paper collates interesting cases from the tangible Transactions.

Introduction

Rupert Willis [1] published a landmark monograph titled “The Spread of Tumours in the Human Body.” Since his exemplary use of the *Transactions of the Pathological Society of London* was to cite historical information, I deem it worthwhile to extract from the *Transactions* the data for this brief history of melanoma of the pericardium. Meanwhile, it suffices to mention his general statements as metastasis being “an infrequent event” and one that probably follows “permeation of the basal pericardium.” Accordingly, let me collate some historical cases chronologically hereunder:

Historical texts

1856-Ogle [2] was expansive as follows

“Both the pericardium and endocardium, and the substance of the walls, were the seat of deposit, though it was rare in the latter part. Externally, it seemed chiefly to follow the course of the large blood-vessels and lymphatics.

1878-Legg [3] was descriptive thus

The pericardium shows many new growths, both outside and inside; the surface covering the left ventricle shows these nodules most abundantly; there are but few on the right side.

1891- Machenzie [4] was persuasive thus

“The pericardium contains about a teaspoonful of yellow-stained fluid. It is adherent to the left ventricle near the apex by a loose band of fibrous tissue. Under the endothelial covering of the sac, on its inner surface, there is here and there a firm, flattened, circumscribed greyish-black nodule, larger than a split pea.”

1894-Beadles [5] were almost secretive thus

“There was another small growth beneath the pericardial covering.”

1898-Calvert and Pigg [6] were negative as follows

“The pericardium was everywhere adhesive by membranous adhesions, which easily broke down.” Perhaps, this was added because the heart itself was involved concerning the walls of the auricles, and

many from the ventricle, especially near the auriculo-ventricular groove, where some of them were as large as walnut.”

Discussion

We go to the emphasis of the great German Pathologist, Julius Cohnheim, [7] who vouched that Nature’s footsteps are traceable with autopsy. Therefore, it is fitting that all the cited cases were from autopsied patients. Perhaps, it is sufficient to add the conclusions arrived at by Godlee [8] as follows:

“In conclusion, I would say that these pigmented tumours, when they fall in our way, are worthy of very careful observation. We are able to detect the first appearance of a new growth in any part, and it is evidently these very minute ones which afford the best opportunity of studying the method of development of this particular disease, and probably of throwing light on the origin and progress of sarcomata in general.

These recommendations turn out to be good omens. This is in terms of the ongoing progress being made in the microscopy of melanoma [9].

References

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Correspondence to: Wilson I. B. Onuigbo, Department of Pathology, Medical Foundation and Clinic, 8 Nsukka Lane, Enugu 400001, Nigeria, Tel: +2348037208680, **E-mail:** wilson.onuigbo@gmail.com

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