

NTP Nonneoplastic Lesion Atlas

Clitoral Gland – Fibrosis

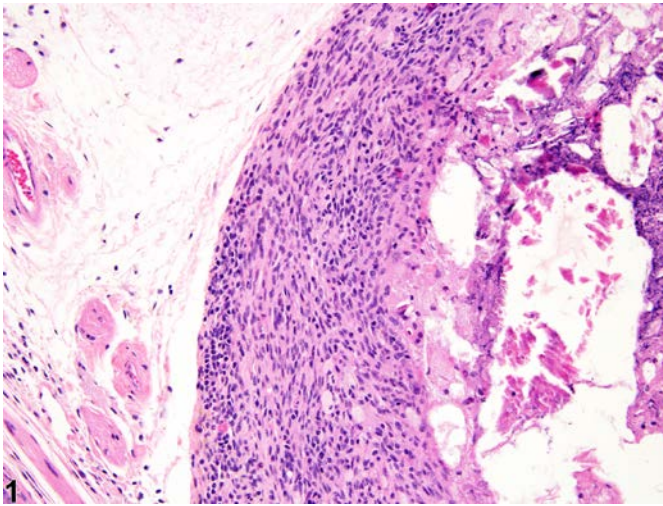


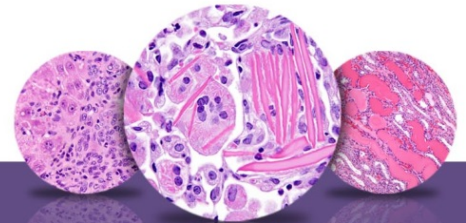
Figure Legend: **Figure 1** Clitoral gland - Fibrosis in a female B6C3F1/N mouse from a chronic study. Immature fibrous tissue effaces the clitoral gland stroma.

Comment: Stromal fibrosis of the clitoral gland (Figure 1) often accompanies common spontaneous degenerative lesions (e.g., atrophy, duct dilatation). It may also be associated with chronic or chronic active inflammation. Early fibrosis presents a more densely cellular appearance than the mature collagen of chronic fibrosis.

Recommendation: Clitoral gland fibrosis should be diagnosed and assigned a severity grade whenever it occurs in the absence of other lesions. Fibrosis that is present as a component of an inflammatory lesion should be diagnosed only when the degree of inflammation is not commensurate to that of fibrosis (i.e., the fibrosis is more severe than would be expected given the severity of the inflammation). If fibrosis is not diagnosed separately, it should be described in the pathology narrative. Whenever it is diagnosed, fibrosis should be assigned a severity grade.

References:

Copeland-Haines D, Eustis SL. 1990. Specialized sebaceous glands. In: Pathology of the Fischer Rat: Reference and Atlas (Boorman GA, Eustis SL, Elwell MR, Montgomery CA, MacKenzie WF, eds). Academic Press, San Diego, CA, 279-293.



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References:

National Toxicology Program. 2010. NTP TR-558. Toxicology and Carcinogenesis Studies of 3,3',4,4'-Tetrachloroazobenzene (TCAB) (CAS No. 14047-09-7) in Harlan Sprague-Dawley Rats and B6C3F1 Mice (Gavage Studies). NTP, Research Triangle Park, NC.

Abstract: <http://ntp.niehs.nih.gov/go/33564>

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