



NTP Nonneoplastic Lesion Atlas

Ovary – Mineral

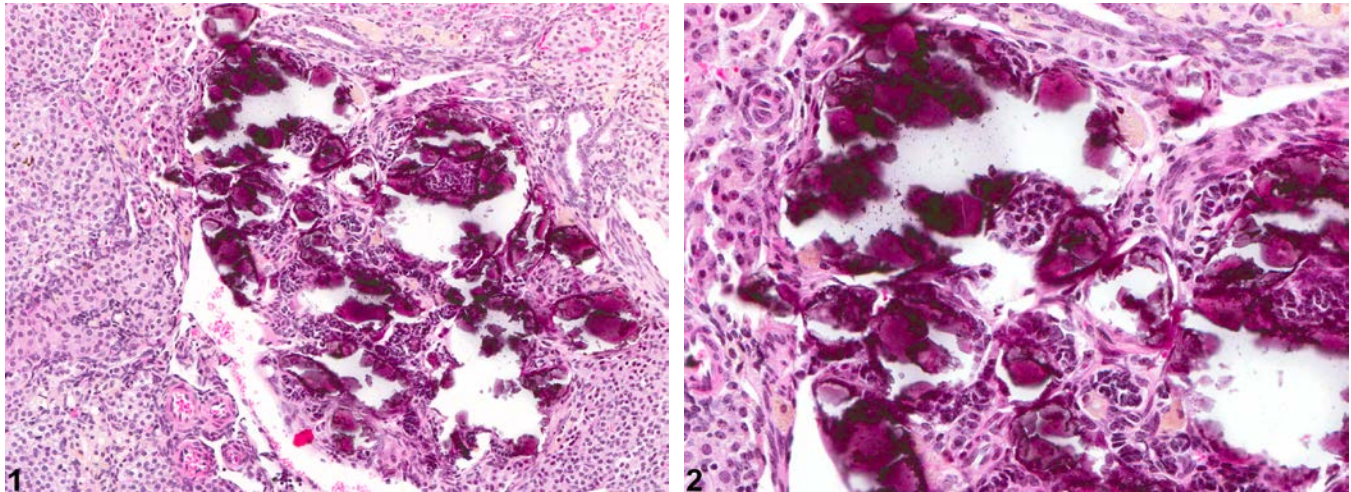


Figure Legend: **Figure 1** Ovary - Mineral in a female B6C3F1/N mouse from a chronic study. Mineral deposition is present in the ovarian parenchyma. **Figure 2** Ovary - Mineral in a female B6C3F1/N mouse from a chronic study (higher magnification of Figure 1). Foci of dystrophic mineralization are present in the ovarian parenchyma.

Comment: Ovarian mineralization (Figure 1 and Figure 2) is usually secondary to cell damage or necrosis (i.e., dystrophic mineralization). Dystrophic mineralization of the ovary has been reported in rats and mice. Ovarian mineralization can be seen in corpora lutea as part of normal atresia; however, it has also been reported in association with chemically induced ovarian follicular or corpora lutea atresia. Metastatic mineralization is uncommon in the ovaries of mice and rats.

Recommendation: Ovary - Mineral should be diagnosed and graded when there is no evidence of necrosis or inflammation. If it is secondary to necrosis or inflammation, and is unusually severe, it may be diagnosed concurrently with the necrosis or inflammation if the pathologist feels it is warranted. The study pathologist should attempt to identify the underlying cause of the lesion if mineral is treatment related. Mineralization should not be diagnosed if it occurs in a thrombus.

References:

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Authors:

Gabrielle Willson, BVMS, DipRCPPath, FRCPath, MRCVS
Senior Pathologist
Experimental Pathology Laboratories, Inc.
Research Triangle Park, NC

Karen Y. Cimon, DVM, MS
Senior Pathologist
Experimental Pathology Laboratories, Inc.
Research Triangle Park, NC