PRIMARY MEDIASTINAL (THYMIC) LARGEB-CELLLYMPHOMA

Bogdan Fetica¹, Patriciu Achimas-Cadariu^{1,2}, Cucuianu Andrei^{1,2}, Anca Popa¹, Delia Dima¹, Ljubomir Petrov^{1,2}

- 1. Oncological Institute "Ion Chiricuta" Cluj Napoca.
- University of Medicine and Pharmacy "Iuliu Haţieganu" Cluj Napoca

Primary mediastinal (thymic) large B-cell lymphoma (PMLBCL) is relative new type of lymphoma.

It was first describe using clinical and morphological criteria, a distinct immunophenotype and relative constant genotypic features.

It accounts 2-4% of non-Hodgkin lymphomas with predilection for young (median age 35) females (M:F;1:2).

Initials studies find a worse prognosis then Diffuse large B cell lymphoma NOS (DLBCL) but along with association of Rituximab to chemotherapy and radiotherapy, the prognostic became similar or even better.

Pathologic diagnosis in this malignancy became important usually because the small amount of tissue available for morphologic examination, for immunophenotyping and for genetic analysis. The therapeutic implication of recognition is even bigger because of resemblance in some cases both morphologically and immunophenotypically with Nodular Sclerosis Hodgkin Lymphoma.

This presentation emphasizes the difficulties of pathologic diagnosis and some criteria use for defining the "gray zone" lymphoma between PMLBCL and Hodgkin Lymphoma.