

CLINICO-PATHOLOGICAL STUDY OF A CASE SERIES OF LENNERT'S LYMPHOMA.

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Introduction

Positive Nodal T-Cell Lymphomas/ Epstein-Barr virus (EBV) are highly aggressive, with an mean survival rate of 3.5 months. In this study, we present 8 cases from Ion Chiricuta Oncology Institute casuistry, Cluj-Napoca, with a similar phenotype, except EBV positivity.

Materials and methods

We performed 8 cases (2 women and 8 men) from Ion Chiricuta Oncology Institute casuistry, Cluj-Napoca samples collected between 1987 and 2014 through immunohistochemistry-parts of biopsy and clinical evolution of patients.

Anatomopathological samples were tested for CD3, CD4, CD8, PD1, TIA1, granzyme B, CD15, CD20, CD21, CD30 and Epstein-Barr virus latent membrane protein (EBV LMP-1) following the recommended protocols producers, assessing the percentage of small and large lymphoid cells, epithelioid histiocytes, nucleated cells Reed-Sternberg, plasmocytes and samples vascularity.

All patients received the standard CHOP treatment (cyclophosphamide, doxorubicin, vincristine and prednisolone), previously determining the International Prognostic Index (IPI) and Eastern Cooperative Oncology Group (ECOG) effectiveness status. The patients were called to receive biannual inspections in the first two years and then annually.

Results

Anatomopathologically, most of the cases presented cytotoxic T lymphocyte phenotype inactive (TIA + Granzyme B -) with most of the lymphocytes CD4 + and CD8 + and all cases being EBV LMP-1 negative. Considering the evolution and clinical status the samples vascularity was consistent with the description of Lymphoma T angioimmunoblastic. At seven patients from total of eight cases initially in stage III-IV was observed remission after treatment with CHOP mostly.

Conclusion

These results provide information that EBV infection is a variable for survival in this disease, future studies are mandatory for this purpose.