

中文題目：瀰漫性大 B 細胞淋巴瘤以子宮頸巨大腫塊表現

英文題目：Diffuse large B cell lymphoma presenting as huge cervical cancer

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Background

Diffuse large B cell lymphoma(DLBCL) was rarely reported with extra-nodular mass manifestation over gynecology organ. Demyelinating pattern of electrophysiological study was seen in lymphoma with paraneoplastic neuropathy or neurolymphomatosis, which may misdiagnosis as chronic inflammatory demyelinating polyneuropathy(CIDP).

Case Presentation

A 85-year-woman suffered from numbness of bilateral lower extremities for 3 months and was associated with body weight loss. She had been admitted to neurosurgical and neurological ward where serial neurological examination showed CIDP. Shortness of breath and abdominal fullness developed after discharge. Patient was then sent to emergency department where non-contrast abdominal CT revealed huge cervical mass with local lymph node involvement. First cervical biopsy did not showed any significant finding except atypical cells. Intermittent night fever and sweating developed during admission. Repeated cervical mass biopsy finally showed diffuse Large B cell lymphoma(DLBCL).

Discussion

Only 4% DLBCL had been reported with uterine and ovarian involvement¹. B symptoms(Body weight loss, night fever, sweating) are rarely presented in cervical non hodgkin's lymphoma². CIDP with sensory type, ataxia, distal/upper limb predominance had been reported to be associated with malignancy. Hematological malignancy was most commonly related to CIDP, following by melanoma according to epidemiology study³. Overall survival rate was lower with DLBCL involved in uterine and ovarian⁴.

Conclusion

In clinical practice, B symptom showed raised suspicious of lymphoid malignancy and repeated tissue proof will contribute to final diagnosis.

References

1. Hematol Oncol 2015;33:209-10.
2. Medicine: May 2017 - Volume 96 - Issue 19 - p e6846
3. Muscle Nerve. 2018 Jun;57(6):875-883
4. Hematol Oncol 2015;33:209-10.