



NILDE

Network Inter-Library Document Exchange

Il presente documento viene fornito attraverso il servizio NILDE dalla Biblioteca fornitrice, nel rispetto della vigente normativa sul Diritto d'Autore (Legge n.633 del 22/4/1941 e successive modifiche e integrazioni) e delle clausole contrattuali in essere con il titolare dei diritti di proprietà intellettuale.

La Biblioteca fornitrice garantisce di aver effettuato copia del presente documento assolvendo direttamente ogni e qualsiasi onere correlato alla realizzazione di detta copia.

La Biblioteca richiedente garantisce che il documento richiesto è destinato ad un suo utente, che ne farà uso esclusivamente personale per scopi di studio o di ricerca, ed è tenuta ad informare adeguatamente i propri utenti circa i limiti di utilizzazione dei documenti forniti mediante il servizio NILDE.

La Biblioteca richiedente è tenuta al rispetto della vigente normativa sul Diritto d'Autore e in particolare, ma non solo, a consegnare al richiedente un'unica copia cartacea del presente documento, distruggendo ogni eventuale copia digitale ricevuta.

Biblioteca richiedente: Biblioteca IRCCS Centro di Riferimento Oncologico di Basilicata CROB

Data richiesta: 04/04/2019 09:15:08

Biblioteca fornitrice: Biblioteca Federata di Medicina - Polo San Luigi - Università di Torino

Data evasione: 04/04/2019 09:19:46

Titolo rivista/libro: Indian journal of hematology and blood transfusion (online)

Titolo articolo/sezione: Leg Type Primary Cutaneous Diffuse Large B-Cell Lymphoma

Autore/i: Giovanni D'Arena,Giovanna GaldoVittoria LalingaAntonella MiragliaGiuseppe PietrantuonoPellegrino MustoGiulia Vita

ISSN: 0974-0449

DOI:

Anno: 2019

Volume: 35

Fascicolo: 2

Editore:

Pag. iniziale: 378

Pag. finale: 379

Leg Type Primary Cutaneous Diffuse Large B-Cell Lymphoma

Giovanni D'Arena¹ · Giovanna Galdo² · Vittoria Lalinga³ · Antonella Miraglia⁴ ·
Giuseppe Pietrantuono¹ · Pellegrino Musto¹ · Giulia Vita³

Received: 28 September 2018 / Accepted: 24 October 2018 / Published online: 29 October 2018
© Indian Society of Hematology and Blood Transfusion 2018

A 78-year old woman presented with a 3-months history of gradually and rapidly expanding slightly tender, erythematous, focally indurated plaques with irregular borders on the posterior aspect of her right lower leg (Fig. 1). No palpable enlarged lymph node was also found.

A dense infiltrate of large atypical lymphoid cells within the dermis and subcutaneous fat, without capillary involvement, was showed by skin biopsy (Fig. 2a). Most cells were large non-cleaved centroblasts and



Fig. 1 Three violaceous nodules on the right lower leg

✉ Giovanni D'Arena
giovannidarena@libero.it

¹ Hematology and Stem Cell Transplantation Unit, IRCCS Referral Cancer Center of Basilicata, Rionero in Vulture, PZ, Italy

² Oncological Dermatology Service, IRCCS Referral Cancer Center of Basilicata, Rionero in Vulture, Italy

³ Pathology Unit, IRCCS Referral Cancer Center of Basilicata, Rionero in Vulture, Italy

⁴ Pathology Unit, "Gaetano Rummo" Hospital, Benevento, Italy

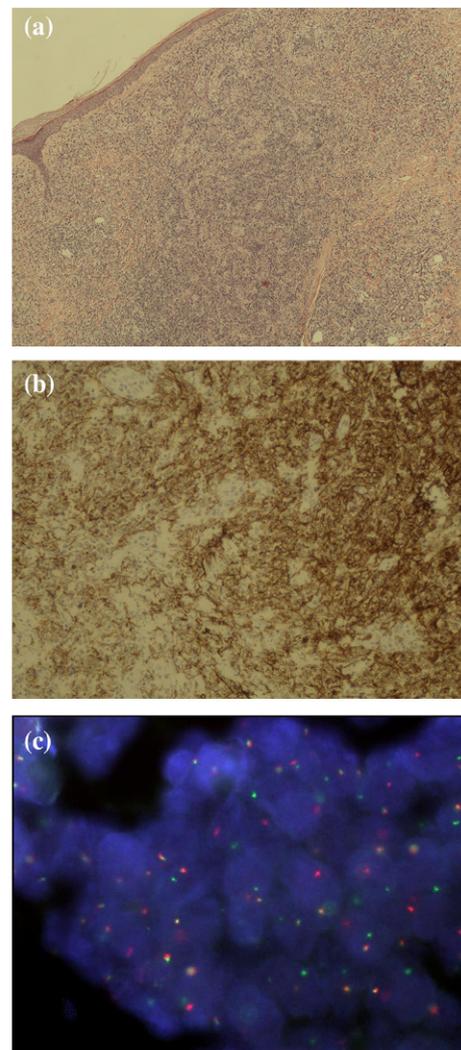


Fig. 2 **a** Dense infiltrate of large atypical lymphoid cells within the dermis and subcutaneous fat (H&E stain, × 4). **b** Dense infiltrate, strongly positive for CD20 (CD20, × 10). **c** MYC rearrangement (8q24), detected by fluorescence in situ hybridization (FISH)

immunoblasts with oval to round nuclei and prominent nucleoli. Proliferative index (Ki67) was 90%. Infiltrating cells were found strongly positive for CD20 (Fig. 2b), CD79a, and bcl-2, confirming the B-cell phenotype. MUM-1 and bcl-6 were found focally positive, while CD30, CD68, cyclin D1, myeloperoxidase, TdT, CD23, CD138, CD43, CD10, and CD21 were negative. MYC rearrangement (8q24) (Fig. 2c), but not bcl-2 rearrangement (18q21), was also detected by FISH. All these data were consistent with the diagnosis of primary cutaneous diffuse large B-cell lymphoma, leg type (PCDLBCL-LT), a rare cutaneous B-cell lymphoma of intermediate grade, mostly affecting elderly patients [1, 2]. Usually, PCDLBCL-LT is treated as a systemic diffuse large B-cell lymphoma. In this case, rituximab, gemcitabine and oxaliplatin based regimen was given and a complete and durable remission obtained.

Compliance with Ethical Standards

Conflict of interest The authors declare that they have no conflict of interest.

Ethical Approval All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

Informed Consent Informed consent was obtained from the patient.

References

1. Maijer CJLM, Vergier B, Duncan LM, Willemze R (2008) Primary cutaneous DLBCL, leg type. In: Swerdlow SH, Campo E, Harril NL, et al. (eds) WHO classification of tumours of hematopoietic and lymphoid tissue. Lyon, p 242
2. Wilcox RA (2015) Cutaneous B-cell lymphomas: 2015 update on diagnosis, risk-stratification, and management. *Am J Hematol* 90:74–76