



Case no. 2921/10:

**DLBCL in an immune reconstituted
patient treated for KS.**

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History



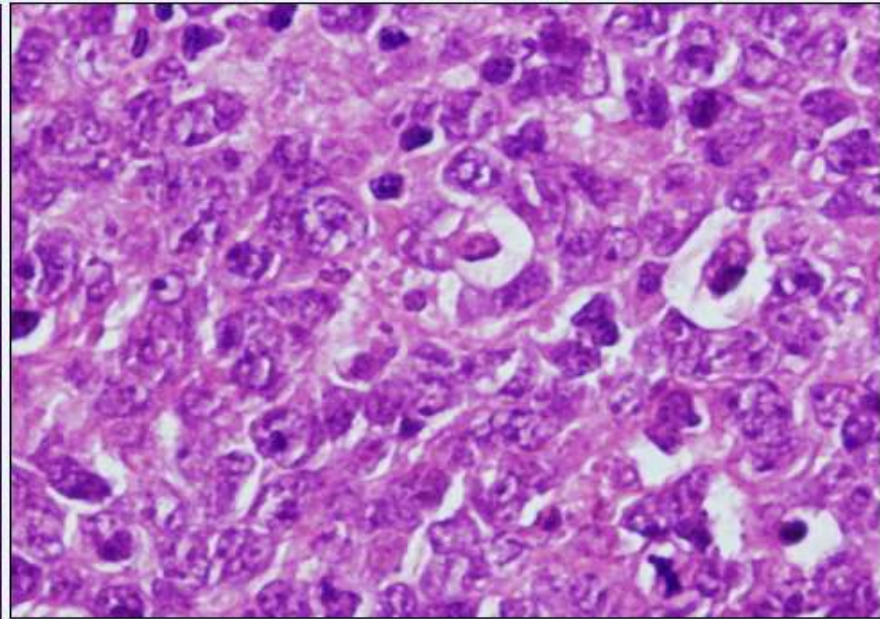
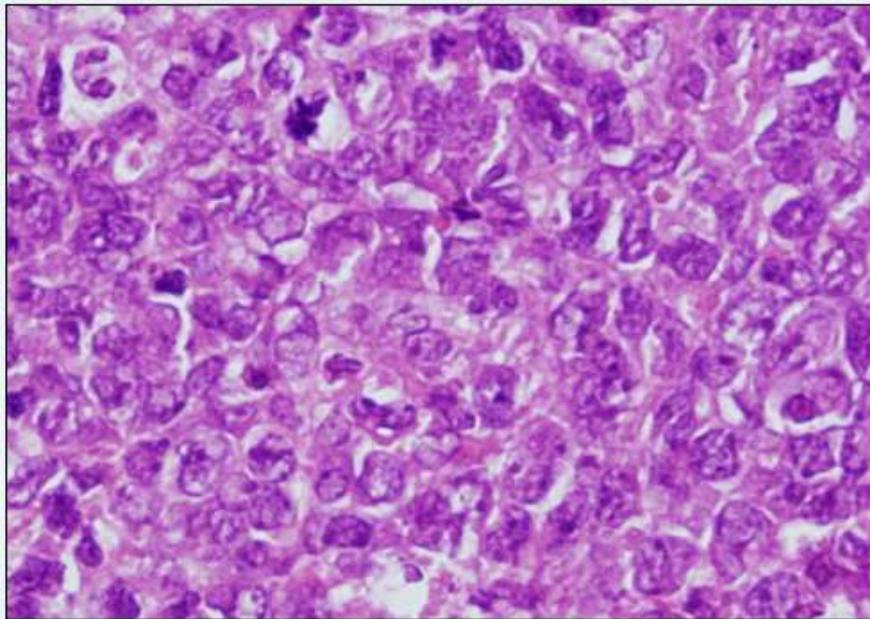
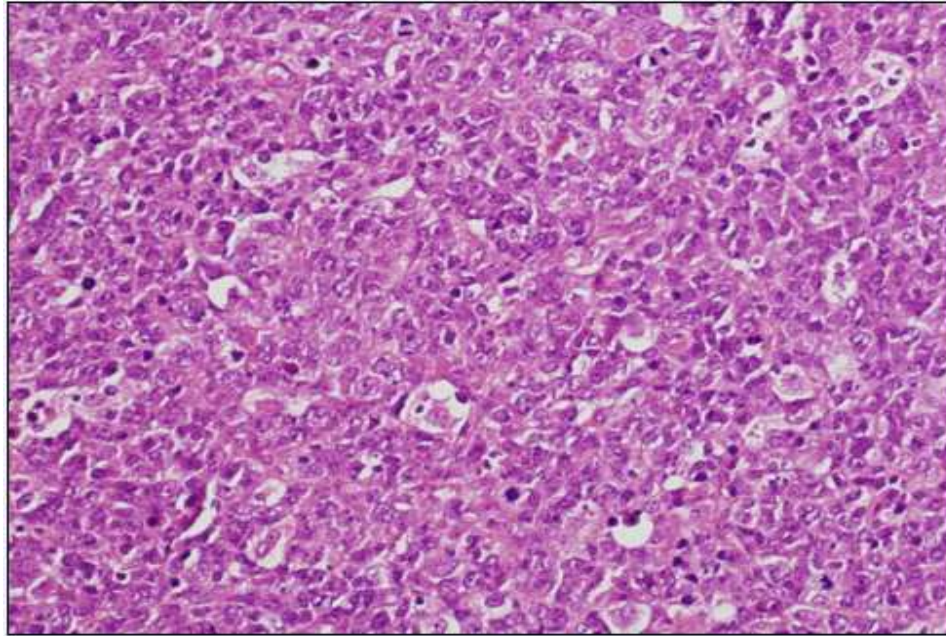
- 54 yr old female patient admitted on 28/06/10.
- RVD and on treatment for KS
- On HAART and Bleomycin plus Vincristine for KS (confirmed at KNH 10/6/10).
- Pt presented with weakness for 1/52 wk.
- And swelling of lower limb plus stiffness for 5/12 months.
- Later developed generalized lymphadenopathy and a lobulated pelvic mass.

Lab and radiological findings

Test	Results
CD4	88c/mm ³
Sputum AAFBs.	negative
WBCs	4.83 X 10 ⁹ /L (3-11X 10 ⁹ /L)
Neutrophils	41.6 % (25-50 %)
Hb	5-8.5 g/dl
Platelets	79.8X 10 ⁹ /L
U/S- abdomen	mysenteric lyphadenopathy
CT Scan -abdomen	Abdominal masses

Axillary lymphnode biopsy done on 08/07/10.



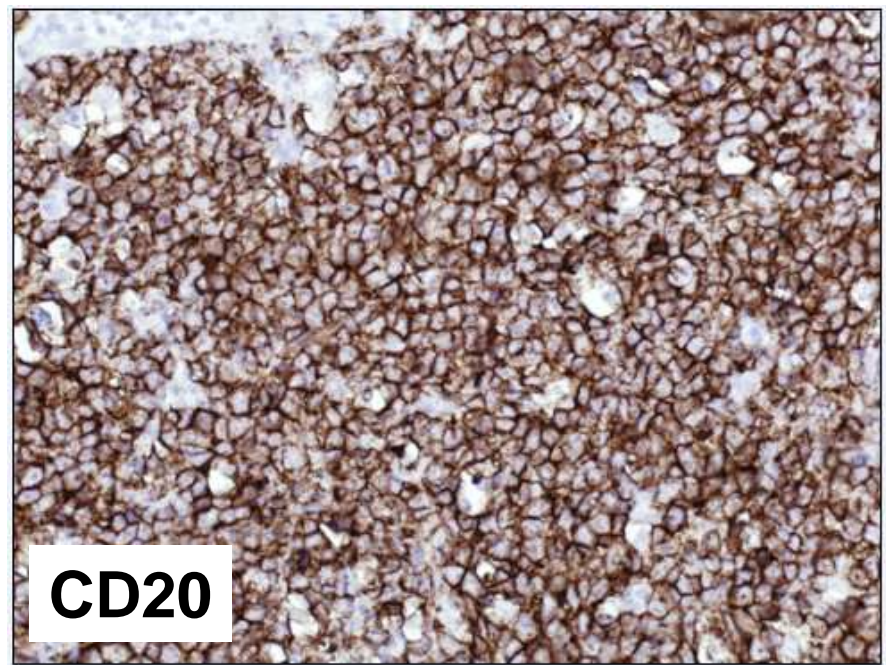
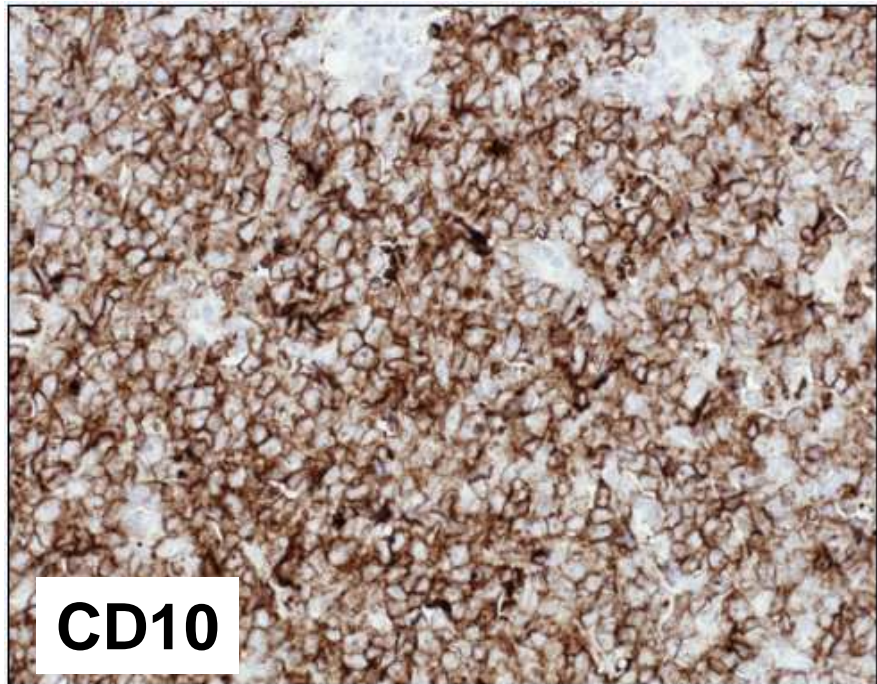
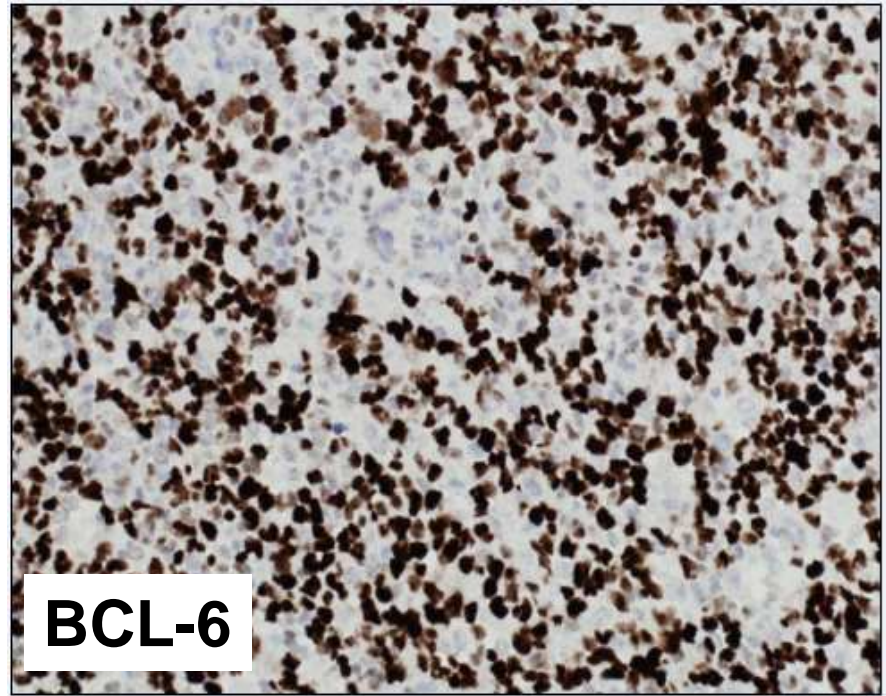
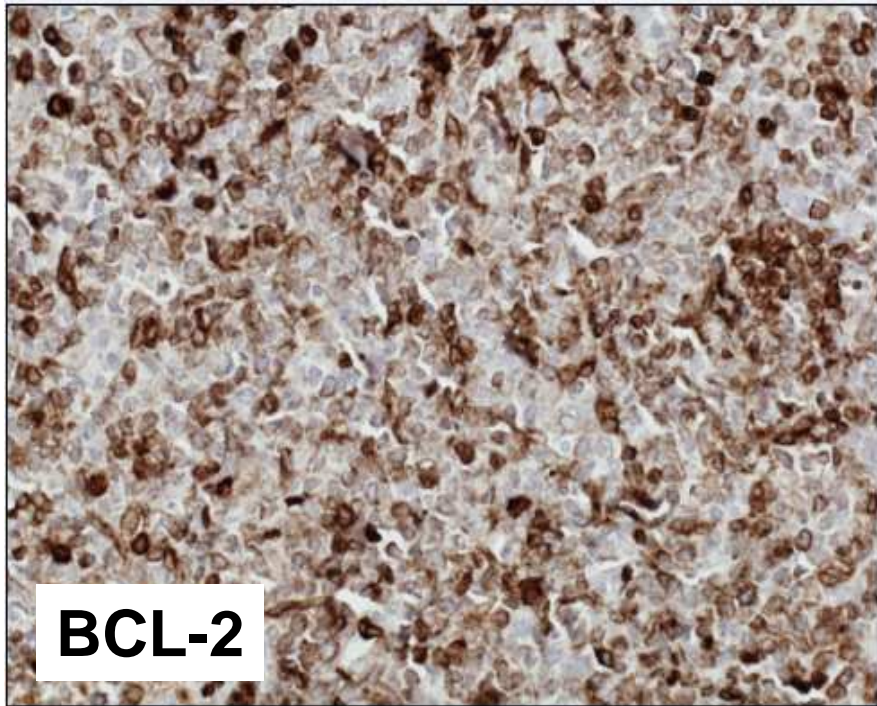


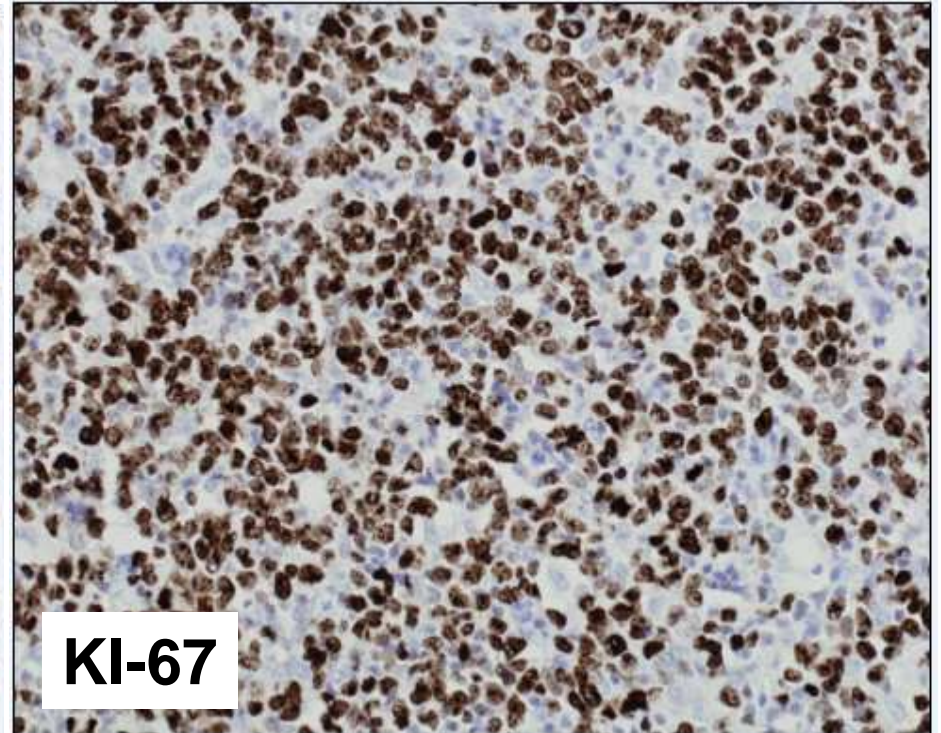
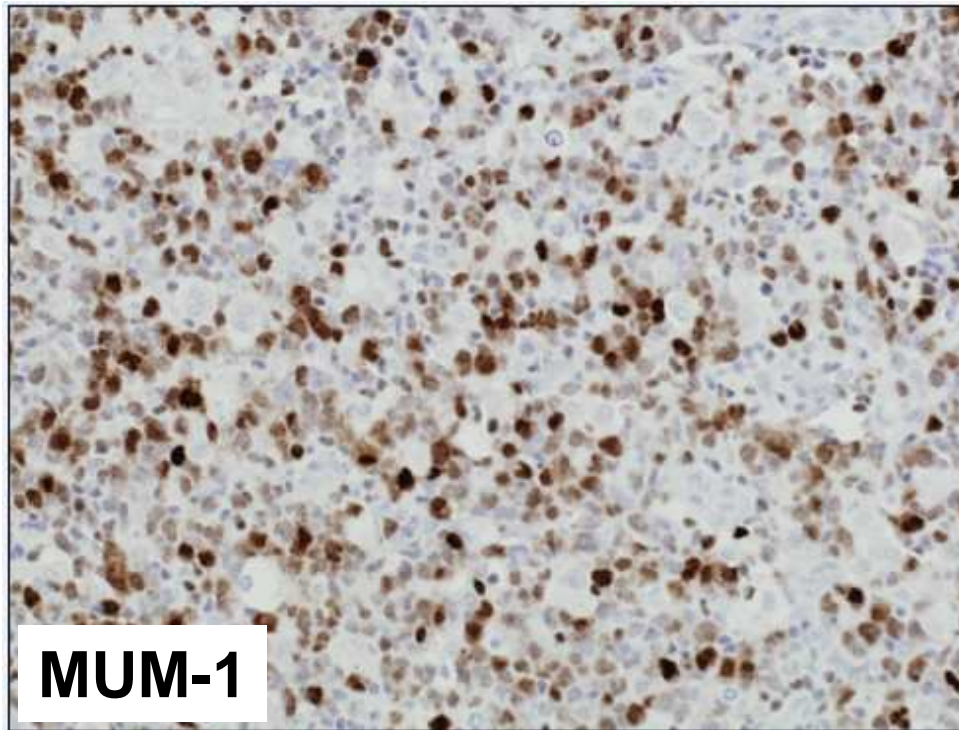
Diffuse starry-sky pattern, high mitotic rate, mild pleomorphism, centroblastic

Differential Dx



- Differential diagnosis: *BL, BL with features intermediate between DLBCL.*
- Immunohistochemistry and molecular analyses were recommended for further typing





- **Ki-67 >90%**
- **Positive : IgM;**
- **Negative for: CD3, CD38, CD44, IgD, HHV-8, LANA1 and EBER**

Final Diagnosis.

- DLBCL, germinal centre subtype (HIV associated).



Discussion and conclusion.

- Development of NHL in HIV positive patients following initiation of HAART has been documented and is thought to follow IRIS and EBER
- A negative EBER in this case suggests that other mechanisms may underlie the development of DLBCL in patients on HAART.

1. *Gregory D Huhn et al. 2010*
2. *Brygida K et al 2006*

Acknowledgments.

- AMCC-INCTR team
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