

- Rossi-Ferrini P. Treatment of a delayed graft failure after allogeneic bone marrow transplantation with IL-3 and GM-CSF. *Haematologica* 1995; 80:341-3.
10. Davies SM, Weisdorf DJ, Haake RJ, et al. Second infusion of bone marrow for treatment of graft failure after allogeneic bone marrow transplantation. *Bone Marrow Transplant* 1994; 14:73-4.

Primary orbital lymphoma: contralateral relapse after six years in complete remission

TERESA OLAVE, GEMMA AZACETA, LUIS PALOMERA

Hematology Department, Hospital Clínico Universitario, Zaragoza, Spain

We report a patient diagnosed of an intermediate-grade primary orbital lymphoma with relapse in the other orbit after six years in complete remission (CR).

Primary orbital lymphoma (POL) comprises about 5-10% of all orbital neoplasms.¹ Most common symptoms are exophthalmus and diplopia.² POL is usually diagnosed at early stage, and shows low to intermediate-grade histology. Radiotherapy (36-40 Gy) is a successful treatment in most patients, so this entity has a favorable prognosis, with long free disease survival.³⁻⁵ However, we report a patient diagnosed of an intermediate-grade POL with relapse in the other orbit after six years in complete remission (CR).

A 35-year-old man with persistent right exophthalmus and visual impairment, was diagnosed of intermediate-grade POL after undergoing biopsy of a retrocular mass. The extension of disease was evaluated by computerized tomography (CT) scan and magnetic resonance (MR). No other lymphomatous locations were found. CR was achieved after systemic chemotherapy and local radiotherapy (40 Gy). After 6 years, left exophthalmus was noticed. A left orbital mass was detected by MR. The histological examination revealed the same intermediate-grade pattern. The imaging diagnosis showed no spread disease. Chemotherapy and radiotherapy were administered. Nowadays the patient remains in CR.

We have not found any other reference in the literature about contralateral relapse of POL. However, although POL usually shows indolent course and good prognosis, we suggest a long term follow up, in order to diagnose late relapse.

Key words

Orbital neoplasms, relapse, extranodal lymphoma

Correspondence

Teresa Olave Rubio, MD, Hematology Department, Hospital Clínico Universitario de Zaragoza, San Juan Bosco 15, 50009 Zaragoza, Spain. Phone: international +34-76-556400 • Fax: international +34-76-565995.

References

1. Lecompte M, Langeller R. A retrospective study of 93 cases of orbital and eye tumors using tomodensitometry. *Can Assoc Radiol J* 1994; 45:212-6.
2. Rodriguez JN, Canavate M, Amian A, Muniz R, Prados D. Linfoma de los anexos oculares. *Rev Clin Esp* 1994; 194:913-5.
3. Smitt MC, Donaldson SS. Radiotherapy is successful treatment for orbital lymphoma. *Int J Radiat Oncol Biol Phys* 1993; 26:59-66.
4. Liesegang TJ. Ocular adnexal lymphoproliferative lesions. *Mayo Clin Proc* 1993; 68:1003-10.
5. Galieni P, Polito E, Leccisotti A, et al. Localized orbital lymphoma. *Haematologica* 1997; 82:436-9.

Recent advances in myelodysplastic syndromes (MDS)

EDOARDO ASCARI

Medicina Interna ed Oncologia Medica, IRCCS Policlinico S. Matteo, Pavia, Italy

This year *Haematologica* reports a series of review articles on *Recent Advances in Myelodysplastic Syndromes*: the first one appeared in the January issue,¹ the second one is found in this issue.² Future articles will analyze prognostic factors, secondary MDS and therapy of these disorders. The basis for this series has been the *Fourth International Symposium on Myelodysplastic Syndromes* held in Barcelona, Spain, on April 24-27, 1997. The Meeting organizers – Guillermo F. Sanz, Miguel A. Sanz and Teresa Vallespi – have done a remarkable job as Guest Editors. In 1997 *Haematologica* published several articles on MDS³⁻¹² and is now proud of publishing this series, which will hopefully appear also as a separate print and electronic volume.

Key words

Myelodysplastic syndromes

Correspondence

Edoardo Ascari, Medicina Interna ed Oncologia Medica, IRCCS Policlinico S. Matteo, 27100 Pavia, Italy. E-mail: ascari@smatteo.pv.it

References

1. Aul C, Bowen DT, Yoshida Y. Pathogenesis, etiology and epidemiology of myelodysplastic syndromes. *Haematologica* 1998; 83:71-86.
2. Vallespi T, Imbert M, Mecucci C, Preudhomme C, Fenaux P. Diagnosis, classification, and cytogenetics of myelodysplastic syndromes. *Haematologica* 1998; 83:258-75.
3. Elghetany MT, Hudnall SD, Gardner FH. Peripheral blood picture in primary hypocellular refractory anemia and idiopathic acquired aplastic anemia: an additional tool for differential diagnosis. *Haematologica*