

Unusual presentation of hodgkin lymphoma

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A 43-year old woman was admitted to our hospital because of sighing dyspnoea and rhinitis. On admission, a rhinoscopy revealed a soft tissue mass on posterior wall of nasopharynx; at physical examination neither epato-splenomegaly nor lymphadenopathy were present. All laboratory data were within normal range. A cranial CT scan showed a large mass (> 2,5-3 cm) with polypoid aspect on posterior wall of rhinopharynx without maxillary osteolysis (Figure 1). CT scans of chest and abdomen were normal as well as the bone marrow biopsy. A diagnosis of Hodgkin disease, subtype lymphocyte predominance, was made after an agobiopsy of the rhinopharynx's mass: within a background of small lymphocytes and histiocytes, the high magnification showed variant lymphocytic and histiocytic cells with *popcorn* nuclei (Figure 2a,b). The patient was successfully treated with chemotherapy (4 cycles according to ABVD regimen) and radiotherapy.

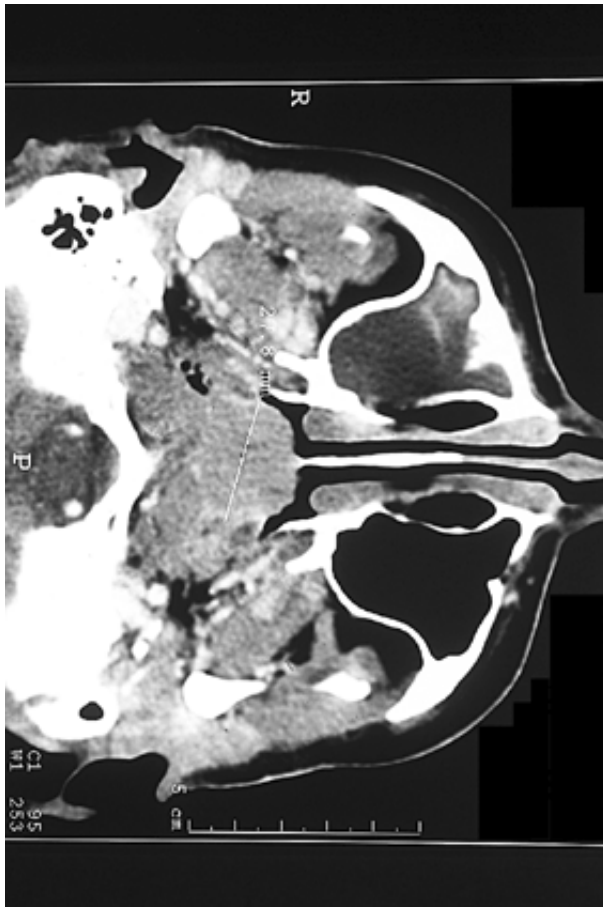


Figure 1. a cranial CT scan showed a large mass with polypoid aspect on posterior wall of rhinopharynx without maxillary osteolysis

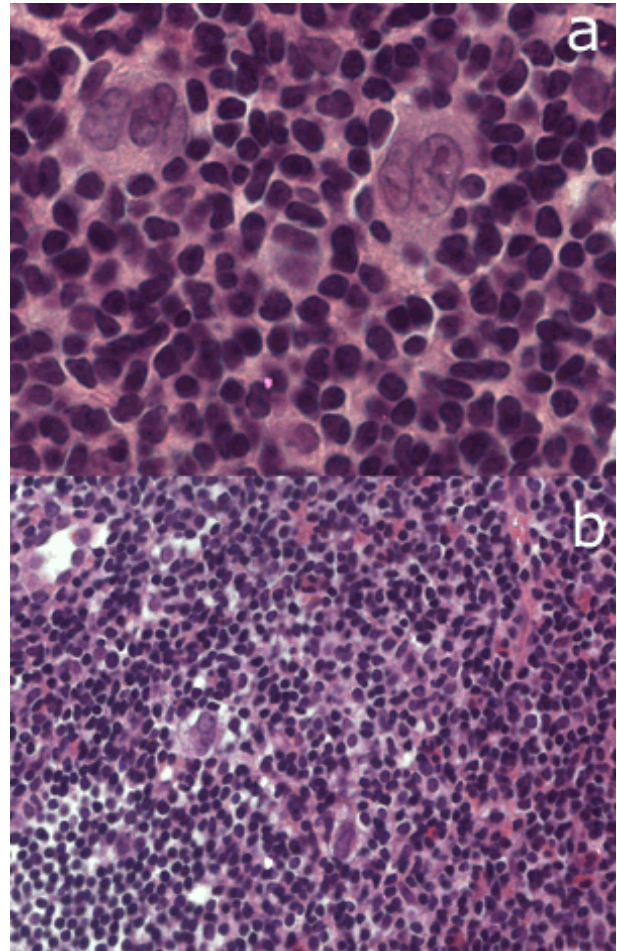


Figure 2. Hodgkin disease, subtype lymphocyte predominance: within a back-ground of small lymphocytes and histiocytes (a), the high magnification showed variant lymphocytic and histiocytic cells which have popcorn nuclei (b).

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