

Original Research Paper

Medical Science

A Case Primary Extra – Nodal Non-Hodgkin's Lymphoma of Testis a Case Of Extra Nodal Non Hodgkins Lymphoma of **Testis**

* Dr. Rishu Vidhatri	JR, Department of pathology, Rajendra institute of Medical, Sciences, Ranchi-834009, Post graduate student, Department of pathology, RIMS,Ranchi-834009
Dr.A.K.Sinha	Associate Professor, Department of pathology, Rajendra institute of Medical Sciences, Ranchi-834009
Dr.Ratna Choudhary	Professor, Department of pathology, Rajendra institute of Medical Sciences, Ranchi-834009
Dr.Trilochan Singh	Head of Department, Department of pathology, Rajendra institute of Medical Sciences, Ranchi-834009
Dr.M.A. Ansari	Assist Prof, Department of pathology, Rajendra institute of Medical Sciences, Ranchi-834009
Dr.Alok Kumar	JR, Department of pathology, Rajendra institute of Medical Sciences, Ranchi-834009

ABSTRACT

Non Hodakin lymphoma of testis is an uncommon extra nodal presentation and accounts for 1% of all NHLs and 5% of all testicular tumors. Right and left sided testicular involvement is equal in frequency and approximately 20% of testicular lymphoma will have bilateral involvement. We report a case of 54 year old male patient presenting with

complain of left testicular swelling.

Case Presentation

A 54 year old patient presented with chief complain of right sided testicular swelling and multiple inquinal lymph node for 3 months which was progressively increasing in size. There was no history of trauma or fever with chills.

Gross pathology showed tumor mass arising from right testis. The cut surface revealed uniform homogenous grayish white material.

Microscopic finding showed sheets of atypical lymphoid cells. Individual tumor cells were round to oval with scanty cytoplasm, exhibiting nuclear atypia and pleomorphism with proliferating blood vessels in between. Normal testis parenchyma was not seen. Diagnosis on Non Hodgkins lymphoma was given.

KEYWORDS: - Testis, extra nodal, non hodgkins lymphoma, gross pathology, histopathology.

INTRODUCTION:-

Primary malignant lymphoma of testis is rare and involves patient over 60 years of age. Ninety percent of lymphoma are of B-cell lineage and predominant histology is diffuse large B cell lymphoma(DLBCL).

Propensity exists for testicular lymphoma to be associated with skin ,central nervous system, and Waldeyer ring .The incidence of bilaterality is around 20%

DISCUSSION

Testicular lymphomas are chiefly of 2 types: childhood lymphomas and adult variety. Pediatric tumors are mainly follicular lymphoma and have better prognosis when compared with adults. Grading is done as low-grade ,intermediate grade and high grade. Prognosis is worst in high-grade tumors with overall survival rate of 15% to 30% at 2 years.

Upto 50% of these tumors spread to spermatic cord or epididymis. The typical growth pattern of lymphoma is interstitial infilteration of neoplastic cells with relative sparing of seminiferous tubules, although the seminiferous tubules may be filled up or effaced by tumor cells.Vascular invasion is seen upto two-third of cases. Necrosis is uncommon

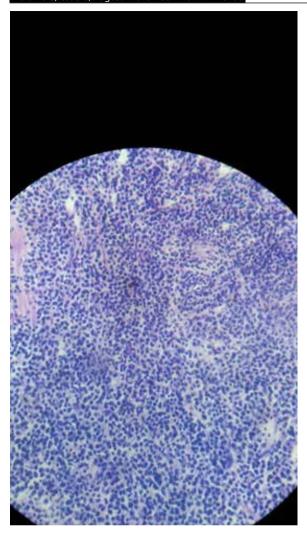
Treatment for testicular NHL include removal of the tumor and post operative chemotherapy regime of cisplatin, vincristine and cyclophosphamide..

High rates of central nervous system relapses in historical series have led to a recommendation for routine CNS prophylaxis with at least intrathecal methotrexate

But its role in prophylaxis remains controversial as CNS relapses have been observed after intrathecal therapy.

CONCLUSION-Primary testicular NHL is an uncoomon entity and with current combined modality treatment and CNS prophylaxis, the outcome may be as good as nodal NHL.





References

- Freeman C, Berg JW, Cutler SJ: Occurrence and prognosis of extranodal lymphomas. Cancer: 1972: 29: 252-60.
- Pingali S, Go RS, Gundrum JD, Wright L, Gay G: Adult testicular lymphoma in the United States (1985-2004): Analysis of 3,669 cases from the National Cancer Data Base (NCDB). J Clin Oncol; 2008; 26: 19503.
- Duncan PR, Checa F, Gowing NF, McElwain TJ, Peckham MJ: Extranodal non-Hodgkin's lymphoma presenting in the testicle: A clinical and pathologic study of 24 cases. Cancer 1980; 45: 1578-84.
- Pectasides D, Economopoulos T, Kouvatseas G, Antoniou A, Zoumbos Z, Aravantinos G, et al.: Anthracycline-based chemotherapy of primary non-Hodgkin's lymphoma of the testis: The Hellenic cooperative oncology group experience. Oncology; 2000; 58: 286-03
- Niitsu N, Umeda M: Clinical features of testicular non-Hodgkin lymphoma: Focus on treatment strategy. Acta Oncol; 1998; 37: 677-80.
- Darby S, Hancock BW: Localised non-Hodgkin lymphoma of the testis: The Sheffield Lymphoma Group experience. Int J Oncol: 2005: 26: 1093-9.
- Linassier C, Desablens B, Lefrancq T, Le Prise PY, Harousseau JL, Jacob C, et al.: Stage I-IIE primary non- Hodgkin's lymphoma of the testis: Results of a prospective trial by the GOELAMS Study Group. Clin Lymphoma; 2002; 3: 167-72.
- Diagnostic histopathology of tumor. Fourth edition Christopher D.M. Fletcher, MD, FRC-Path
- 9. Surgical pathology ,Rosai and Ackerman's tenth edition.