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DOI: 10.17235/reed.2021.8149/2021

Link: [PubMed \(Epub ahead of print\)](#)

Please cite this article as:

Garrido Isabel , Santos-Antunes João, Cardoso Hélder, Macedo Guilherme. Duodenal-type follicular lymphoma -a silent tumor. Rev Esp Enferm Dig 2021. doi: 10.17235/reed.2021.8149/2021.

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.

Duodenal-type follicular lymphoma -a silent tumor

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Keywords: Duodenal-type follicular lymphoma. Non-Hodgkin lymphoma. Small bowel capsule endoscopy.

Acknowledgements:

Conflict of interest statement: The authors have no disclosures to report.

Guarantor of the article: Isabel Garrido.

Author's contributions: Isabel Garrido drafted the manuscript. Isabel Garrido, João Santos-Antunes, Hélder Cardoso and Guilherme Macedo have critically revised and finalized the manuscript. All authors have approved the final version of the manuscript.

Statement of Ethics: All rules of the local ethics committee were followed, preserving patient identity and confidentiality.

A 79-year-old male, with a past medical history of hypertension, dyslipidemia and type 2 diabetes, underwent routine esophagogastroduodenoscopy and colonoscopy. The

patient was asymptomatic, with unremarkable blood tests. Upper gastrointestinal endoscopy showed multiple whitish nodular lesions in the first part of the duodenum (Figure 1). Histopathologic examination showed a tumor with a nodular pattern composed of small cleaved cells (centrocytes) and rare large noncleaved cells (centroblasts). Immunohistochemical analysis revealed positivity of the neoplastic cells for CD20, CD79a, Bcl-2, CD10 and Bcl-6. They did not express CD5 or CD23. Ileocolonoscopy revealed no abnormality. The patient also performed a capsule enteroscopy, which revealed several polypoid lesions with a whitish appearance scattered throughout the duodenum, jejunum (Figure 2) and ileum (Figure 3). Positron emission tomography with computed tomography scan excluded extraintestinal extension. Thus, a diagnosis of duodenal-type follicular lymphoma (grade 1) was made. After explaining the prognosis to the patient, a “watch and wait” strategy was chosen. He remains asymptomatic and without signs of disease progression. Esophagogastroduodenoscopy and capsule endoscopy reevaluation, performed 6 years after the initial diagnosis, showed stable disease with overlapping findings.

We present a rare case of a duodenal-type follicular lymphoma with classical endoscopic and histologic lesions^{1,2}. This is a newly recognized entity in the 2016 World Health Organization classification update³. We show that asymptomatic patient watchful waiting is justifiable, even because it is an indolent lymphoma with a fairly good prognosis.

References:

1. Marks E, Shi Y. Duodenal-Type Follicular Lymphoma: A Clinicopathologic Review. *Arch Pathol Lab Med*. 2018 Apr;142(4):542-547.
2. Junga Z, Stratton A, Laczek J. Primary Multifocal Small Bowel Follicular Lymphoma Discovered Incidentally on Diagnostic Endoscopy. *Clin Gastroenterol Hepatol*. 2017 Aug;15(8):A27-A28.

3. Swerdlow SH, Campo E, Pileri SA, et al. The 2016 revision of the World Health Organization classification of lymphoid neoplasms. *Blood*. 2016;127(20):2375-2390.

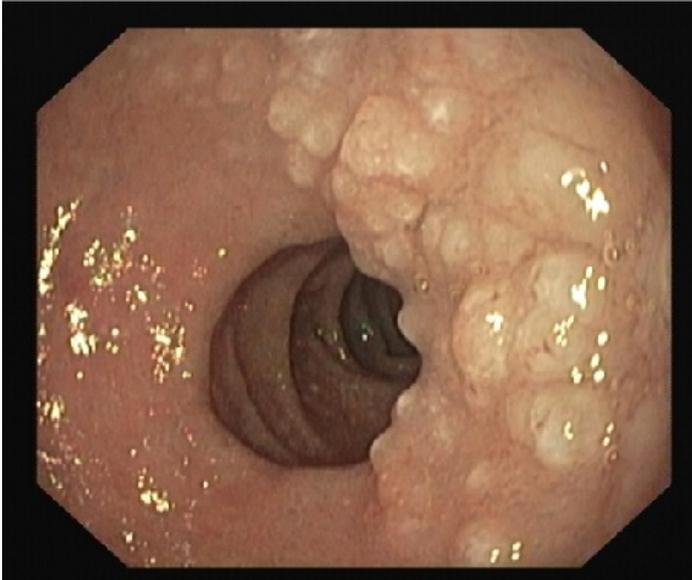


Figure 1 - Multiple whitish nodular lesions on the posterior and upper wall of the bulb.



Figure 2 - Polypoid lesion with a whitish appearance located in the jejunum.



Figure 3 – Multiple whitish nodular lesions scattered throughout the ileum.

Accepted