FROM EMERGENCY SURGERY TO AN UNEXPECTED DIAGNOSIS: PERFORATED DIVERTICULITIS AND HODGKIN LYMPHOMA

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Background: Primary colorectal lymphoma is a rare malignancy, accounting for less than 1% of total colorectal cancers and 10-20% of gastrointestinal lymphomas.

Colorectal lymphoma presents with nonspecific symptoms such as abdominal pain, weight loss, and changes in bowel habits. The diagnosis of colorectal lymphoma can be challenging. The following case is unusual in that the patient's initial presentation was an acute surgical emergency, and the lymphoma was found incidentally after surgery.

Case Presentation: A 74-year-old male was admitted to the hospital with progressive right lower extremity weakness and significant weight loss over four weeks with a history of multiple falls recently. The patient had no significant past medical history. Recently, the patient also complained of abdominal pain but had left the emergency department against medical advice before being evaluated. Upon arrival, he was confused and debilitated with a reducible left inguinal hernia, mild leukopenia, and microcytic anemia. An abdominal CT showed early sigmoid diverticulitis.

As his condition continued to progress by the worsening of abdominal pain, a repeat CT showed subdiaphragmatic free air, suggestive of a perforated viscus. An urgent exploratory laparotomy revealed a 2-cm perforation in the anterior sigmoid colon, and a Hartmann's procedure was performed. The pathologic examination of the resected colon confirmed perforated diverticulitis but incidentally also showed Hodgkin lymphoma in one of the regional lymph nodes. Immunohistochemical staining for positivity was done for CD30, CD15, MUM1, and Epstein-Barr Virus. In the postoperative period, she developed ARDS and significant thrombocytopenia requiring platelet transfusion.

Conclusion: The case represents the importance of a detailed postoperative pathology evaluation, especially in the elderly presenting with nonspecific symptoms. Recognition of surgical emergencies, as well as incidentally diagnosed malignancies, are intertwined with early diagnosis for improving outcomes.



Figure 1: Computed Tomography of abdomen and pelvis showing diverticulitis