soho2023
ELEVENTH ANNUAL MEETING

Diffuse Large B Cell Lymphoma in a Child with Epidermodysplasia Verruciformis, Case Report

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INTRODUCTION

Epidermodysplasia verruciformis (EV) is a rare skin disorder inherited as an autosomal recessive disorder. It is usually associated with genetic alteration and immunodeficiency. Patients are susceptible to human papillomavirus (HPV) infection. There are very few reports about its association with hematological malignancies, and those were reported only in adults.

PATIENT

We reviewed the records of an eleven-year-old child who presented to the National Cancer Institute, Cairo University, in August 2021.

RESULTS

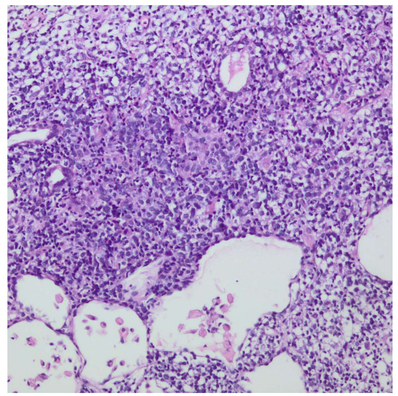
The patient came to the outpatient clinic with a history of being treated for skin disease since he was 5 years old. He had lesions affecting his face, trunk, and both upper limbs in the form of brown and red papules and plaques. He sought medical advice, and a skin biopsy revealed he had EV. He was treated with topicals, oral antihistaminics, and antibiotics

RESULTS, CONT.

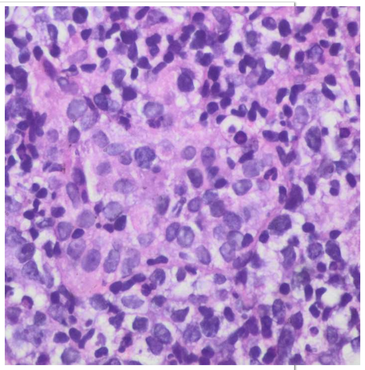
He presented with complaints of fever, dry cough, and weight loss of 4 months, for which he received nonspecific medications without improvement. Chest X-ray revealed right-sided pleural effusion with lung collapse. He was admitted and did CT, which revealed right ill-defined hypodense lesions involving the whole lower lobe and, to a lesser extent, upper and middle lobe with mild pleural effusion associated with multiple mediastinal lymph nodes and left lung pulmonary nodules.

A biopsy was done, and pathology revealed diffuse large B cell lymphoma. Bone marrow aspirate and biopsy were free. Other investigations were normal. The patient decided to start chemotherapy on LMB protocol. He received pre-phase chemotherapy (COP) with more than a 20% reduction in the previously described lesions.

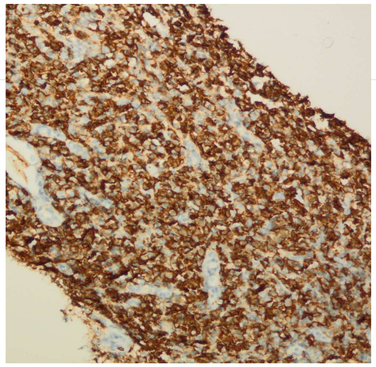
He then received 2 cycles of COPADM3 and one CYM with almost complete resolution of the lesions. He received the last Cycle CYM and is now following up.



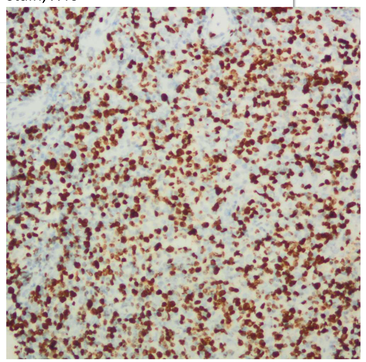
Lung tissue infiltrated by the diffuse lymphomatous cell infiltrate (H&E stain, X20).



Large Malignant lymphocytes with hyperchromatic, sometimes vesicular, nuclei showing dense chromatin and distinct nucleoli. Apoptotic bodies are seen. H&E stain, X40



Immunostaining for CD20 revealed diffuse positive reaction in tumor cells (CD20 IHC stain, X20).



High Ki-67 proliferation index in tumor cells about 50% at hot spot areas (Ki-67 IHC stain, X20).

CONCLUSIONS

EV may predispose to lymphomagenesis due to its association with immunosuppression and with HPV infection that has lymphoma oncogenesis.

ACKNOWLEDGEMENTS

To prof. **Dr Hany Abdelrahman** professor of pediatric oncology and PI of NHL study team for his scientific guidance and support

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