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EYELID FOLLICULAR LYMPHOMA TREATED WITH RITUXIMAB – BENDAMUSTINE: CASE PRESENTATION

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INTRODUCTION

Ocular adnexal lymphomas (ie, lymphomas of the orbit, eyelids, conjunctiva, lacrimal gland, and lacrimal sac) constitute 2% of all extranodal lymphomas and are the most common malignant tumors of the orbit. The vast majority of orbital lymphomas are of B-cell origin (97%), of which extranodal marginal zone B-cell lymphoma (EMZL) (59%) is the most common subtype, followed by diffuse large B-cell lymphoma (23%), follicular lymphoma (9%), and mantle cell lymphoma (5%). Orbital lymphoma is primarily a disease of the elderly. Gender distribution varies according to lymphoma subtype. However, extranodal marginal zone B-cell lymphoma (53%) and follicular lymphoma (75%) show a female predominance, whereas diffuse large B-cell lymphoma shows an even gender distribution[12] . Eyelid follicular lymphoma is a rare malignancy that presents with unique diagnostic and treatment challenges.

AIM

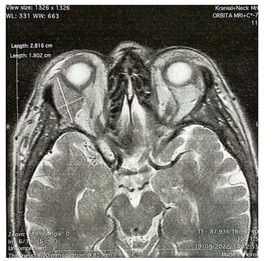
Presenting a Case Report of Eyelid Follicular Lymphoma treated with Rituximab Bendamustine

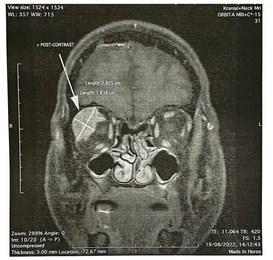
DESIGN

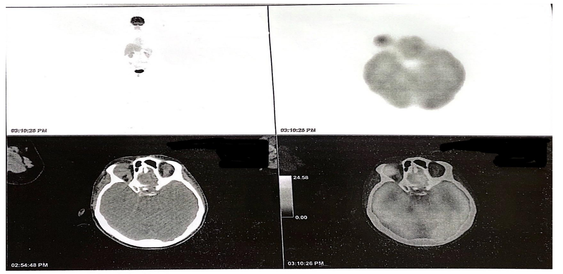
Retrospective, case report.

CASE STUDY

A 63-year-old female with a history of treated squamous carcinoma of tongue and arterial hypertension presented with a blurred vision and proptosis of the right eye. She was admitted to our clinic after undergoing surgery and lacrimal gland biopsy because of progressive swelling and proptosis of the right eye. The histopathological findings revealed follicular lymphoma gr.I-II, characterized by positive expression of CD20, CD10, Bcl6, Bcl2, and negative CD23. Blood count and biochemistry results were within normal range. Further imaging studies, including abdominal and pelvic CT, demonstrated the presence of retroperitoneal lymph nodes measuring 18x22x24 mm. PET CT revealed FDG accumulation with SUVmax 14,54 mm, a nodular lesion of 18 mm in the upper part of the right eye and FDG accumulation in the retroperitoneal lymph nodes. The patient was subsequently treated with Rituximab-Bendamustine protocol. Following the fourth cycle of treatment, a head MRI revealed a solid mass on the right eye measuring 23x8mm. However, PET CT demonstrated complete metabolic regression of the right orbital lesion, with a Deauville score of 1. Due to the favorable response to therapy, R-Benda treatment was continued for an additional two cycles. Esthetically, patient has minor, almost undetectable changes on the right eye.







CONCLUSIONS

FL is a biologically and clinically heterogeneous disease with wide variation in the outcomes of individual patients. The results of FL treatment have improved significantly. Staging of lymphomas is extremely important for therapeutic and prognostic reasons, for which the ANN ARBOR classification is the most widely followed. According to this, any single extranodal site such as the orbit is categorized as stage IE disease. Treatment options include surgery, radiotherapy and chemotherapy. Role of surgery is limited to biopsy in majority of cases. Surgery alone is associated with a high relapse rate, however, Esik O et al., reported 0% local relapse-free survival at 10 years in patients treated with surgery alone[3]. Incorporation of R-Benda therapy in this indolent form of lymphoma has proven to be an appropriate choice, given its tendency to become refractory or relapse. Clinics lacking precise radiotherapy treatment, as in this case, could use this example of tailored treatment strategies and the potential for improved outcomes.

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