Clinical Profiles and Outcomes of Mature T-Cell Lymphomas in Adult Filipino Patients: *Insights from a Tertiary Hospital Experience*

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Introduction

Advancements in Non-Hodgkin lymphoma (NHL) therapy largely focuses on B-cell lymphomas, in contrast to T-cell Lymphoma, where progress have yet to attain the same degree of improvement due to its rarity and heterogeneity. T-cell Lymphomas represent 10-15% of NHL cases in Western populations, with higher incidence rates in Asia. In the Philippines, there is currently no data on mature T-cell lymphoma prevalence and outcome, further highlighting the need for localized research to guide practice and future studies. This knowledge gap underscores the need for local epidemiologic and clinical profiling studies. Establishing baseline data for mature T-cell lymphoma patients may help refine local standards of care, guide clinical decision-making, and inform future research directions.

Objectives

The aim of the study is to describe the clinical profile of Mature T-cell Lymphoma patients and their overall outcomes diagnosed in a private tertiary hospital in the Philippines.

Methods

This study is a single-center, retrospective chart review on patient from a private tertiary institution. Descriptive statistics were used to summarize the clinical characteristics, treatment modalities, and patient outcomes. Frequencies and percentages were calculated for categorical variables, while continuous variables were expressed as median and range. No inferential statistical analysis was performed due to the small sample size.

Results



N = 6

5 of 6 are Male
Age: 27-80; Median 43 y/o

NO Family History of Malignancy & Environmental Risk Factors

Comorbidities
- 2 Hypertension
- 1 Diabetes

Presentation
- 3 Lymphadenopathy
- 2 Localized mass
- 1 Back pain

Histopathology
- 3 PTCL, NOS
- 3 ALCL

PTCL, NOS: Peripheral T-cell Lymphoma, Not otherwise specified
ALCL: Anaplastic Large Cell Lymphoma

Immunohistochemistry
High Ki67 (50-90%)
Frequently Expressed: CD3, CD30, ALK, LCA/CD45
Negative: CD20

Chemotherapy
CHOP-based regimen, 83.3% response rate

Outcome
- 2 Relapsed
- 1 Expired due to disease progression
- 3 Lost to follow up

Summary

This preliminary study reveals significant clinical and therapeutic variability in mature T-cell lymphomas within a private tertiary hospital context. Given the small sample size, this study should be cautiously interpreted and not generalized beyond a similar setting. The findings offer essential insights, emphasizing the need for improved patient follow-up and larger, multi-center, prospective studies to enhance management of this rare malignancy.

References

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Patient ID	Age	Sex	Clinical Presentation	Comorbidities	Histopathology	Immunohistochemistry Findings	Chemotherapy Regimen	Response	Current Status
1	61	M	Left thigh mass	Hypertension, Diabetes	PTCL, NOS	**Positive:** CD3, Ki67 (50-60%), LCA, CD99, CD4, CD5 **Negative:** Synaptophysin, Chromogranin, Desmin, Cytokeratin, CD20, CD20, CD8, CD15, CD30, CD56, ALK, Bcl2, Bcl6	CHOP (Cycle 1-2) → COEP (Cycle 3-8) plus Radiotherapy	PR	Lost to Follow Up (2021)
2	27	M	Lymphadenopathy, left supraclavicular	None	ALCL	**Positive:** LCA, Ki67 (>90%) **Negative:** CD3, CK7, CD20, Pancytokeratin, Chromogranin, Synaptophysin	CHOP	CR	Still in remission (2024)
3	47	F	Lymphadenopathy, left cervical	None	Lennert's Lymphoma → PTCL	**Positive:** Ki67 60-80% **Negative:** CD20, CD3, Pax5, CD30, CD68	CHOP (6 cycles) → ESHAP (3 cycles)	CR	Still in remission (2015-2024)
4	39	M	Lymphadenopathy, Right Axillary and Supraclavicular	Hypertension	ALCL, ALK+	**Positive:** CD30, ALK, Ki-67 (>90%) **Negative:** CD2, CD20	CHOEP (6 Cycles)	CR (2018) → Relapse	New hypermetabolic nodule (2021), lost to follow up
5	80	M	Left Thigh Mass	None	ALCL, ALK+	**Positive:** CD3, CD4, CD30 **Negative:** CD20, ALK-1, EMA	ESHAP + Maintenance Brentuximab → COP (1 Cycle)	CR (2016-2020)→ Relapse (2023)	Expired
6	29	M	Back Pain	None	PTCL, NOS	**Positive:** LCA/CD45 (positive, strong, diffuse membranous expression), CD3 (strong, focal membranous), CD5 (strong, focal, membranous) **Negative:** CD20, PAX5, CD34, TDT, MPO, CD10, BCL6, MUM1, c-MYC, CD30	CHOEP (4 Cycles) → ICE (3 Cycles)	CR (2021)	Lost to follow up

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