

CHRONIC LYMPHOCYTIC LEUKEMIA IN A BETA THALASSEMIA MAJOR ADULT FEMALE “ RARE COMBINATION” : A CASE REPORT

Fatima Alqassab , Maged Saafan , Ahmed Elazzab

1. Manchester Program, Faculty of Medicine, Mansoura University, Egypt.

2. Clinical Hematology Unit, Internal Medicine Department, Oncology Center, Mansoura University, Mansoura, Egypt.



INTRODUCTION

Thalassemia and chronic lymphocytic leukemia (CLL) are recognized as two separate diseases, and the coexistence of thalassemia and CLL is not reported before. Thalassemia represents a diverse group of inherited hematological disorders characterized by defective globin chain synthesis [1]. CLL is characterized by the clonal proliferation and accumulation of mature, typically CD5-positive B-cells within the blood, bone marrow, lymph nodes, and spleen. According to incidence of malignancies in B - thalassemia major patients it is not uncommon mainly due to iron overload affecting organs . Cases of malignancy like hepatocellular carcinoma recorded [2], but no known cases of Chronic lymphocytic leukemia development in B thalassemia major patients.

RESULTS

Patient started RB protocol (Rituximab + Bendamustine) . After three cycles, a CT scan showed a regressive disease course with reduction in lymph node size, including cervical lymph nodes with the largest measuring 7 mm , axillary lymph nodes with the largest measuring 9 mm on the left side, and abdominal lymph nodes becoming subcentimetric. After completion of a total of six cycles, a CT scan showed a stationary disease course, and the patient clinically had no indication for treatment. The patient is currently on regular follow-up every 3months . Regarding her underlying β -thalassemia she is on transfusion support every 2 months and Deferasirox.

CONCLUSIONS

This case illustrates the complex interplay between β -thalassemia major and chronic lymphocytic leukemia in a young adult female, emphasizing the importance of a multidisciplinary approach to diagnosis and management. Further research is needed to elucidate the underlying mechanisms linking these two conditions and optimize therapeutic strategies to improve outcomes in affected individuals.

AIM

To report the first documented case of β -thalassemia major developing chronic lymphocytic leukemia and to highlight the diagnostic and therapeutic challenges in this unique coexistence.

METHOD

- Clinical, radiological and laboratory data obtained from the patient's medical records
- Physical examination performed in the Hematology outpatient clinic

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CONTACT INFORMATION

Fatima Alqassab

fatimaalqassab26@gmail.com

Maged Saafan

maged90@mans.edu.eg

REFERENCES

1. Sadiq IZ, Abubakar FS, Usman HS, Abdullahi AD, Ibrahim B, Kastayal BS, Ibrahim M, Hassan HA. Thalassemia: Pathophysiology, Diagnosis, and Advances in Treatment. *Thalassemia Reports*. 2024;14(4):81–102. <https://doi.org/10.3390/thalassrep14040010>
2. Adisuhanto, M., Prasetya, A., Cahyadi, A., & Oehadian, A. (2025). Incidence of hepatocellular carcinoma in beta thalassemia: A systematic review and meta-analysis. *Hematology, Transfusion and Cell Therapy*, 47(3), 103934. <https://doi.org/10.1016/j.htct.2025.103934>