

MEETING ABSTRACTS

Open Access

AIDS-related lymphomas in Nigeria an emerging phenomenon

L Salawu^{1*}, RA Bolarinwa¹, OO Lawal², AA Oyekunle¹, O Adeodu³, EA Adejuyigbe³, KA Adelusola⁴, NO Akinola¹, MA Ndakotsu¹, MA Durosinmi¹

From 12th International Conference on Malignancies in AIDS and Other Acquired Immunodeficiencies (ICMAOI)
Bethesda, MD, USA. 26-27 April, 2010

Background

In comparison to the western world, aggressive non-Hodgkin's lymphoma (NHL) including primary central nervous system (CNS) lymphoma, as AIDS-defining disease, is less common in sub-Saharan Africa even with its high HIV/AIDS prevalence. We studied the occurrence of HIV/AIDS-related lymphomas in Nigerian patients with a view toward highlighting the incidence.

Patients and method

Consecutive cases of histologically and/or cytologically confirmed lymphoma screened for HIV (after appropriate counseling) and seen between January 2003 and December 2009 were the subjects. Types and treatment outcome of lymphoma in the HIV-positive group were further studied. Data were analyzed using appropriate descriptive and inferential statistics.

Results

There were 161 cases comprising NHL, 42 (25.5%); HL, 15 (9.3%), and BL, 104, (64.6%). Seven (4.3%), aged 2-49 (median = 41) years were retroviral positive. Of these, 4 (3 males, 1 female, aged 28-49 (median = 38.5) years) had NHL, 2 (both females) HL, and 1 case, a 2-year-old boy with HIV since birth, had Burkitt's and an HIV-positive mother. All, except one female with stage 1 HL, presented late (at least clinical stage IIIb). Three patients with NHL and 1 with late-stage HL succumbed to their disease within 1-3 weeks of hospital admission. The remaining 3 patients had been responding satisfactorily

to chemotherapy (CHOP for NHL, ABVD for HL, and COM for Burkitt's lymphoma.)

Conclusion

Compared to earlier reports from Nigeria, the AIDS-related lymphomas rate of 4.3% in the series indicated rising incidence. AIDS-associated BL of 0.1%, in spite of high background prevalence of Burkitt's lymphoma (>60% of lymphomas), supported its relative rarity. With longer survival and longer immunosuppression, closely following up AIDS patients on HAART would be justified, as more cases of AIDS-related lymphomas may possibly emerge in the future.

Acknowledgements

AIDS-Associated Malignancies Management Team, OAUTHC ILE-IFE Nigeria. This article has been published as part of *Infectious Agents and Cancer* Volume 5 Supplement 1, 2010: Proceedings of the 12th International Conference on Malignancies in AIDS and Other Acquired Immunodeficiencies (ICMAOI). The full contents of the supplement are available online at <http://www.biomedcentral.com/1750-9378/5?issue=S1>.

Author details

¹Department of Haematology, Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife, Nigeria. ²Department of Surgery, Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife, Nigeria. ³Department of Paediatrics, Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife, Nigeria. ⁴Department of Morbid Anatomy, Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife, Nigeria.

Published: 11 October 2010

doi:10.1186/1750-9378-5-S1-A3

Cite this article as: Salawu et al.: AIDS-related lymphomas in Nigeria an emerging phenomenon. *Infectious Agents and Cancer* 2010 **5**(Suppl 1):A3.

*Correspondence: lsalawu2002@yahoo.co.uk

¹Department of Haematology, Obafemi Awolowo University Teaching Hospitals Complex, Ile-Ife, Nigeria

Full list of author information is available at the end of the article