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CASE REPORT

Duodenal-Type Follicular Lymphoma

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This case report presents the clinical findings, diagnostic evaluation, and treatment options for a 71-year-old female patient with a medical history of hypertension, dyslipidemia, and recurrent urinary tract infections. The patient presented with chronic abdominal pain as the sole symptom. Despite normal laboratory investigations, esophagogastroduodenoscopy and ileocolonoscopy were performed. Biopsies were obtained from the duodenum and histopathological analysis confirmed a diagnosis of duodenal-type follicular lymphoma. This rare condition typically presents with minimal clinical symptoms and has a favorable prognosis. Treatment options for duodenal-type follicular lymphoma include a watch-and-wait strategy, rituximab monotherapy, and radiotherapy.

Keywords: Case Report; Duodenal-type; Esophagogastroduodenoscopy; Follicular Lymphoma

Introduction

Duodenal-type follicular lymphoma (DFTL) is an uncommon variant of follicular lymphoma, distinguished by its predominantly localized presence in the small intestine, specifically the second portion of the duodenum. In this case study, we present a 71-year-old female patient with a medical history of hypertension, dyslipidemia, and recurrent urinary tract infections, who presented with chronic abdominal pain as the primary symptom. Subsequent investigations involving esophagogastroduodenoscopy and ileocolonoscopy, along with histopathological analysis of the biopsy samples, confirmed the diagnosis of DFTL. This report aims to provide a comprehensive overview of the clinical features, diagnostic approach, and available treatment options for DFTL.

Case report

A 71-year-old female patient with a past medical history of hypertension, dyslipidemia, and recurrent urinary tract infections presented with chronic abdominal pain as the sole symptom. Initial laboratory investigations, including a complete blood count, did not reveal any abnormalities. However, esophagogastroduodenoscopy performed as an outpatient procedure detected diffuse erythematous gastric mucosa and white duodenal spots in the D2 region (Figure 1). Subsequently, duodenal biopsy was obtained to further evaluate the patient's condition.

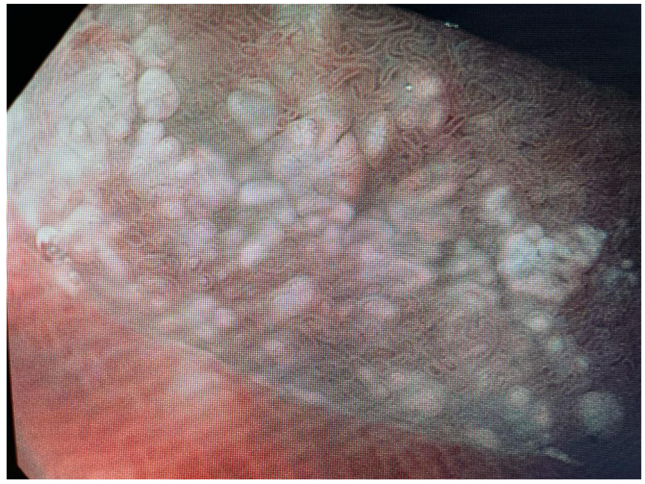

Figure 1. Upper endoscopy showing whitish duodenal spots in D2.

Histopathological findings

Histopathological examination of the duodenal biopsy revealed an atypical lymphoproliferative lesion that stained positive for CD20, CD10, bcl-6, and bcl-2, while being negative for CD3. These immunophenotypic features were consistent with a diagnosis of DFTL. The microscopic examination, as shown in Figures 2–4, confirmed the presence of DFTL in the biopsied tissue.

Discussion

DFTL is a recently recognized variant of follicular lymphoma, categorized in the 2016 World Health Organization classification update.[1] DFTL is characterized by its unique immunophenotype, similar to other types of follicular lymphoma, but typically localized to the second portion of the duodenum. Patients with DFTL often exhibit few or no clinical symptoms, and the prognosis is generally favorable, with an overall survival rate ranging from 92% to 100%.[2]

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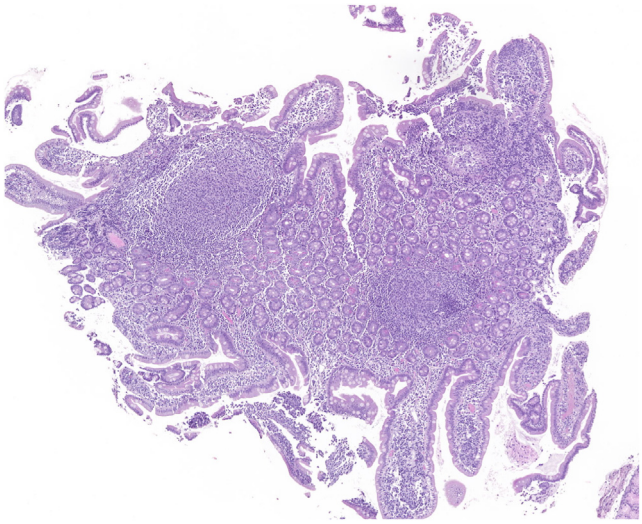

Figure 2. Duodenal biopsy: showing atypical lymphoid follicles.

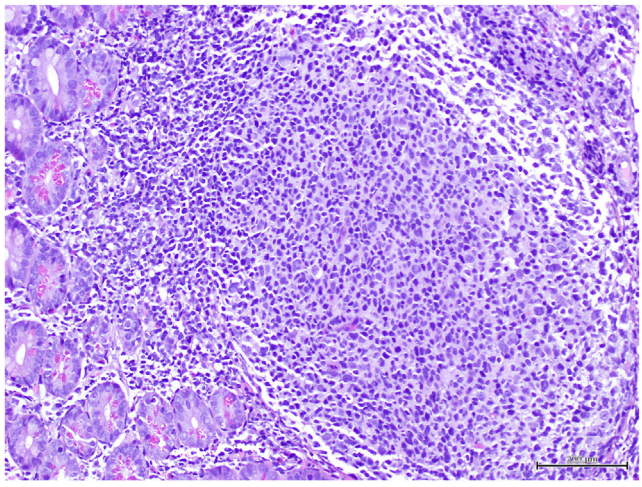

Figure 3. The follicles lack mantle zone and tangible-body macrophages (H&E x 200).

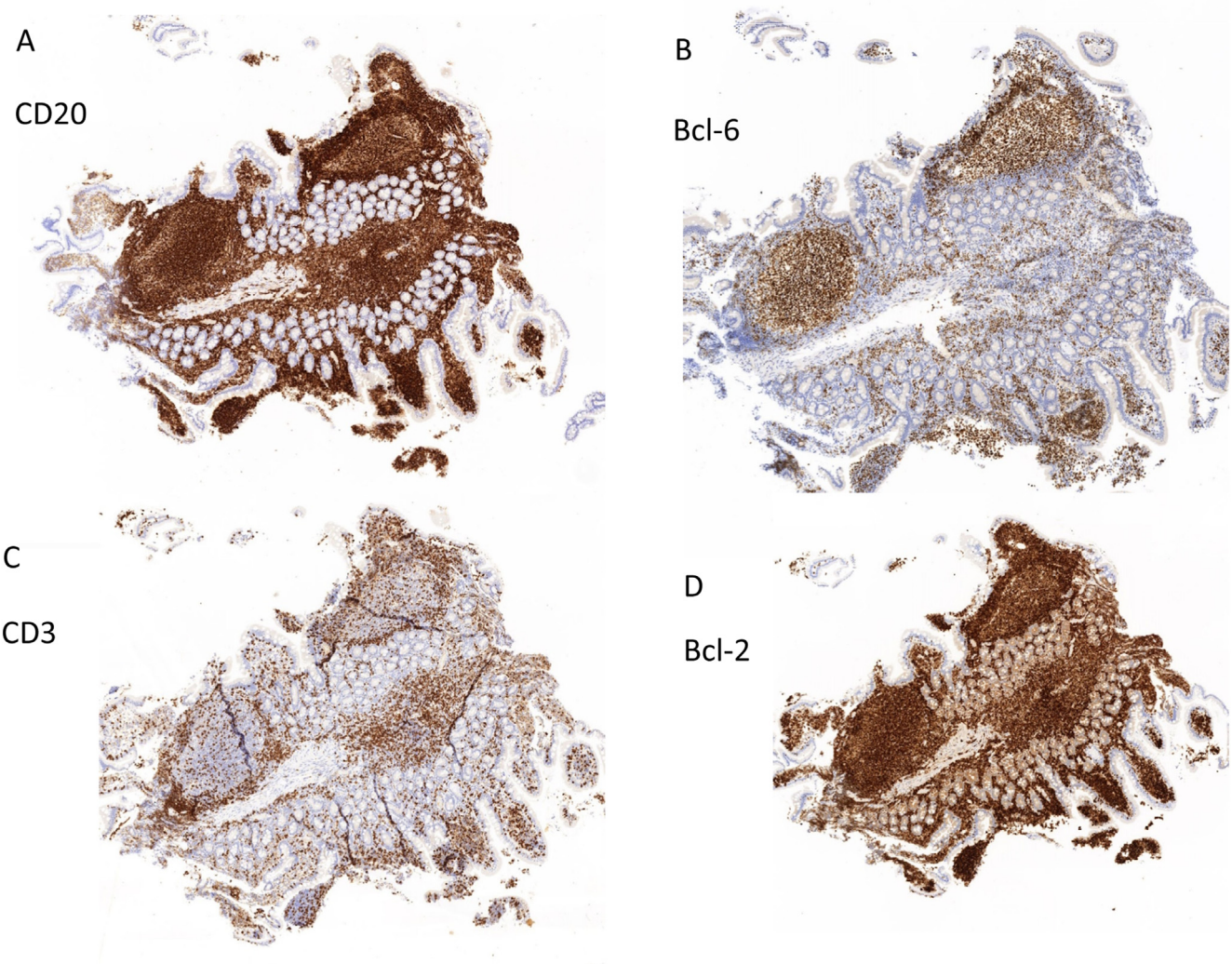

Figure 4. (A–D) The follicles are positive for CD20, bcl-2, and bcl-6, while negative for CD3.

Treatment options

The management of DFTL primarily depends on the patient's individual characteristics and preferences. Currently, treatment options include a watch-and-wait strategy, rituximab monotherapy, and radiotherapy. The watch-and-wait approach is considered for asymptomatic patients or those with indolent disease, as close monitoring for disease progression is necessary. Rituximab and radiotherapy can be considered in severely symptomatic cases.

References

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Ethical Statement:
The corresponding author, on behalf of all authors, jointly and severally, certifies that their institution has approved the protocol for any investigation involving humans or animals and that all experimentation was conducted in conformity with ethical and humane principles of research.

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