Gastric mucosa-associated lymphoid tissue lymphoma associated with pancreatic non-Hodgkin's lymphoma: A case report

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Mucosa-associated lymphoid tissue (MALT) lymphomas are extranodal lymphomas that arise from B lymphocytes located in the marginal zone of lymphoid follicles. Although, there is a substantial amount of lymphoid tissue in the gastrointestinal tract, MALT lymphomas usually arise in chronically inflamed sites that are normally devoid of lymphoid tissue. The best example is gastric MALT lymphoma that is almost always associated with Helicobacter pylori. Primary pancreatic lymphoma (PPL) is an extremely rare tumor (1% incidence) and is often confused with pancreatic adenocarcinoma. By suspecting PPL on clinical and imaging grounds, surgery and its associated complications can be avoided, since the mainstay of the treatment is non-surgical strategies including chemotherapy. We represent a case of a 45-year-old male presented with abdominal pain and vomiting. Upper endoscopy showed multiple gastric ulcers, biopsies revealed non-specific inflammatory ulcers. The patient was given 4-weeks course of proton pump inhibitor with no improvement. After few months, he complained of severe abdominal pain relieved by leaning forward and associated with repeated vomiting. Upper endoscopy revealed multiple umbilicated gastric masses, 10-20 mm in diameter. Biopsies were taken, histopathology and immunohistochemistry revealed MALT lymphoma. Endoscopic ultrasonography was done to the patient and it showed a pancreatic head mass, fine-needle aspiration was done, histopathology and immunohistochemistry revealed PPL. The patient received chemotherapy for MALT lymphoma with near total relief of symptoms and disappearance of gastric and pancreatic masses.

Conclusion: This is a rare case having MALT lymphoma associated with PPL.

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