

[PICTURES IN CLINICAL MEDICINE]

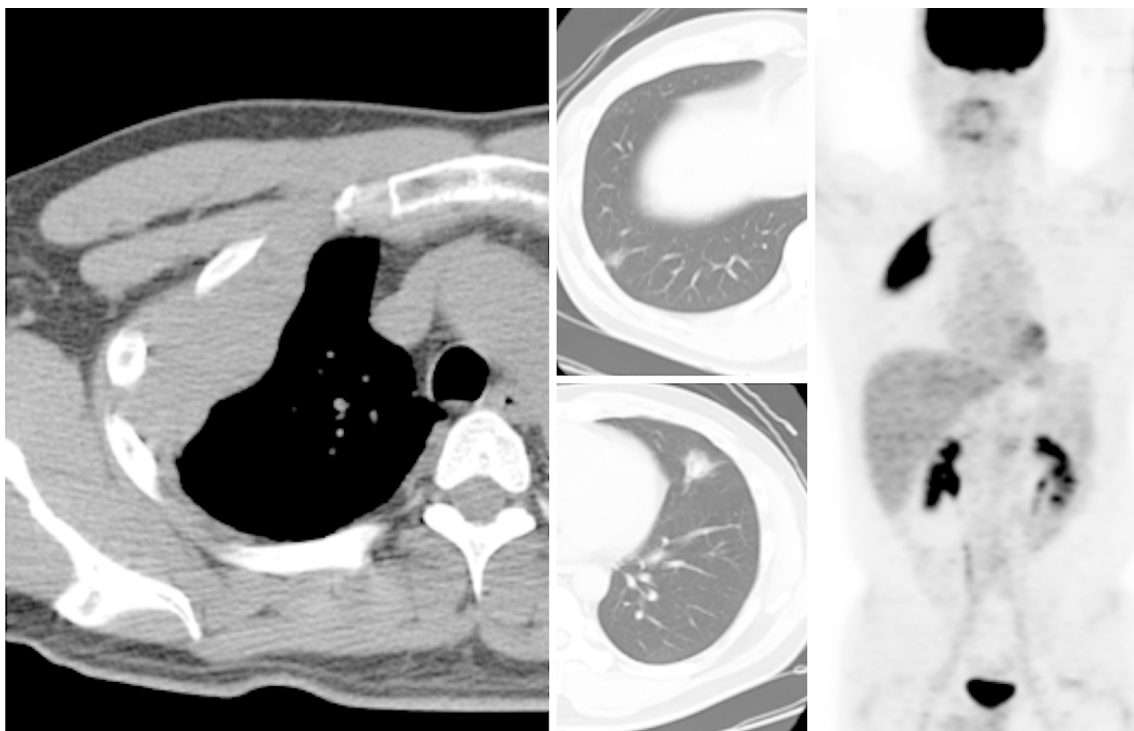
Pleural Mucosa-associated Lymphoid Tissue Lymphoma with Trisomy 18

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Key words: MALT lymphoma, pleural tumor, trisomy 18

(Intern Med 58: 891-892, 2019)

(DOI: 10.2169/internalmedicine.1780-18)



Picture 1.

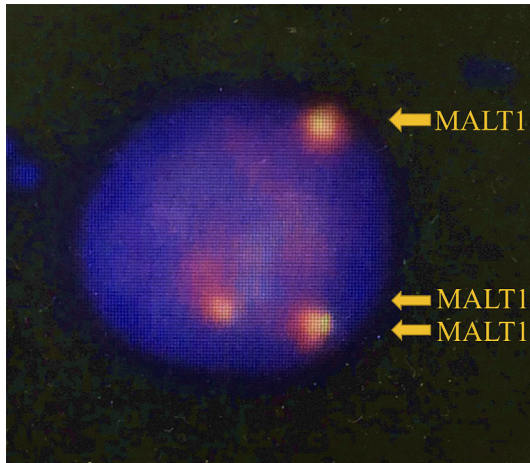
A 39-year-old man was referred to our hospital due to a chest radiograph abnormality. Fluorine-18-fluorodeoxyglucose positron emission tomography/computed tomography revealed a hypermetabolic pleural mass in the right upper hemithorax without pleural effusion and small infiltrates in the right lower and left upper lobe of the lung without any uptake of fluorodeoxyglucose (Picture 1). Immunohistochemical studies of the pleural biopsy specimens showed diffuse infiltration of lymphocytes expressing CD20, CD79a, and Bcl-2. A fluorescence *in situ* hybridization assay using

the probe of *API2-MALT1* detected three *MALT1* signals, suggesting trisomy 18 (Picture 2). Immunohistochemical studies of the pulmonary biopsy specimens showed nodular lymphoid hyperplasia. A bone marrow biopsy did not show any lymphoma involvement. These findings suggested pleural-based mucosa-associated lymphoid tissue (MALT) lymphoma. This was a unique case of pleural MALT lymphoma without pleural effusion and with trisomy 18 (1). Trisomy 18 leads to the overexpression of *MALT1* and activation of NF- κ B, contributing to the oncogenesis of pleural

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Received: July 13, 2018; Accepted: September 2, 2018; Advance Publication by J-STAGE: November 19, 2018

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Picture 2.

MALT lymphoma (2).

The authors state that they have no Conflict of Interest (COI).

References

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