COMPLETE RESOLUTION OF METACARPAL LYMPHOMA

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INTRODUCTION:

Lymphoma comprises heterogeneous malignancies that arises from the clonal proliferation of lymphocytes. It represents approximately 5% of malignancies. It further classifies into; Hodgkin lymphoma (HL), 10% and Non- Hodgkin lymphoma (NHL), 90%. Primary extranodal lymphomas constitute 25% to 30% of non-Hodgkin lymphomas with the most common locations are gastrointestinal tract, the central nervous system, the skin, the testes, and the bones. In this case report, the author is keen to present a case of NHL of the 3rd Metacarpal with complete resolution of hand function through Chemotheraphy.

REPORT:

64 year old man with underlying Gout and dyslipidemia, presented with swelling over the dorsum of right hand and right thigh for 2 months prior to visit.

Sudden onset of painless swelling that is not increasing in size. However complaint of pain over right hand upon wrist flexion. Patient also has constitutional symptoms and lethargy.

On examination, Swelling over the dorsum aspect of right hand measuring 3x3cm, non tender, with pain upon flexion of the wrist and fingers.

Swelling over anterolateral aspect of proximal leftt thigh, measuring 10x7cm, non tender, non pulsatile, not warm firm and skin not pinchable. X-ray of femur and pelvis was unremarkable.

X-ray of the right hand showed expansile lytic lesion over the 3rd metacarpal.

MRI of left femur and right hand was done reported intramuscular lesion over left proximal thigh measuring 6.1x4.8x10.2cm and two other lesion within vastus lateralis and intermedius 3.9x1.4 and 0.9x2.1x2.3cm.

Histopathological examination report Diffuse large B-cell lymphoma ,Germinal Center B-Cell Subtype.



Figure 1: Pre-chemotheraphy right hand.



Figure 2: Post ChemotheraphySubsequently patient underwent 6 cycle of Chemotheraphy.

Post chemotheraphy, swelling over the left thigh and the right hand resolved with no impairment of hand function despite shortening of the middle finger seen. Patient have return back to normal daily activities.

CONCLUSION:

Malignant lymphoma of bone accounts for 7% of all bone malignancies. Reported bone involvement of diffuse large B-cell lymphoma (DLBL) in the hands are uncommon. Initiation of chemotheraphy and frequent follow up may avoid surgical excision.

REFERENCES:

1. Virginia et al., A Rare Manisfestation of Primary bone Lymphoma:solitary Diffuse Large B-Cell Lymphoma of the little finger, Journal of Hand Surgery 2018.