DIFFUSE LARGE B-CELL LYMPHOMA

(DLBCL)

- most common form of NHL
- median age of diagnosis = 60 yrs

Pathogenesis :-

(i) Dysregulation of BCL6

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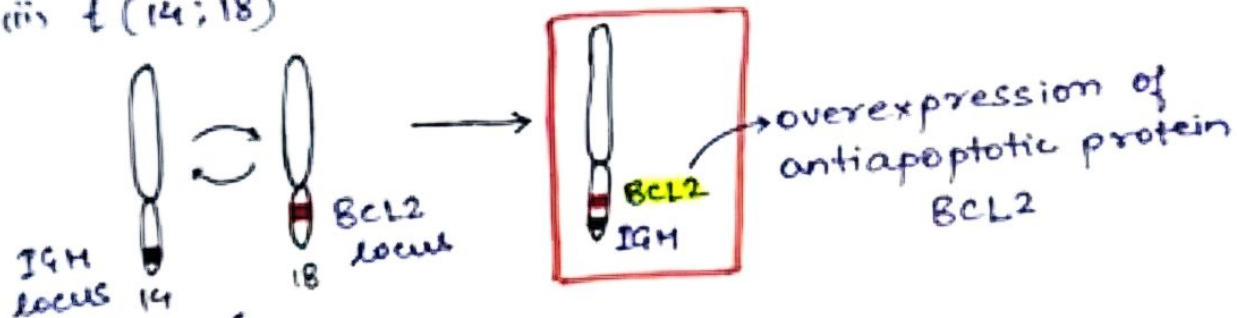
Abnormal germinal center

(ii) t (14; 18)



Similar translocation is seen in

Follicular lymphoma (30-50%) → transform → DLBCL

DIFFUSE LARGE B-CELL LYMPHOMA

→ WHO classification of Lymphoid Neoplasm

I.) Precursor B-cell Neoplasm
- → B-ALL (B-cell Acute Lymphoblastic Leukemia/Lymphoma)

II.) Peripheral B-cell Neoplasm
- → CLL/SLL (Chronic lymphocytic leukemia/small lymphocytic lymphoma)
- → B-cell prolymphocytic leukemia
- → Mantle cell lymphoma
- → Marginal zone lymphoma
- → Burkitt lymphoma
- → Diffuse large B-cell lymphoma
- → Hairy cell leukemia
- → Follicular lymphoma

III.) Precursor T-cell Neoplasm
- → T-ALL (T-cell Acute Lymphoblastic leukemia/Lymphoma)

Morphology :-

Diffuse Large B-cell lymphoma

- Diffuse → Diffuse effacement of LN
- Large → Large lymphocyte (4x - 5x of small lymphocyte)

Immunophenotyping :-

- CD10 +
- BCL6 +
- Surface Ig +

C/F :-

- Aggressive tumor
  - ↓
  - Rapidly enlarging @ mass
    - Nodal site → Waldeyer's ring, Tonsils, oropharyngeal lymphoid tissue, adenoids
    - & Extranodal site → GIT, skin, bone, brain.

Subtypes :-

Immunodeficiency associated DLBCL

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EBV infection in patients

[T-cell immunodeficient → AIDS, HSC transp.]

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DLBCL

Primary effusion DLBCL

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HHV8 infection in patients

[HIV infection, older age]

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DLBCL

↓ presents as

Malignant pleural & ascitic effusion.