Diffuse Large B-Cell Lymphoma with Axillary Cutaneous Invasion in a HIV Positive Patient

Linfoma Difuso de Grandes Células B com Invasão Cutânea Axilar num Doente com Infeção VIH

André DIAS, Filipa SARAIVA, Fernando MALTEZ
Acta Med Port (In Press) • https://doi.org/10.20344/amp.16873

Keywords: HIV Infections; Immunoproliferative Disorders; Lymphoma, Large B-Cell, Diffuse
Palavras-chave: Infecções por HIV; Linfoma Difuso de Grandes Células B; Síndrome de Imunodeficiência Adquirida; Transtornos Imunoproliferativos

A 34-year-old man with untreated HIV-1 infection was admitted due to obstructive jaundice and progressive, non-tender swelling in the left axillary region. The HIV viral load was 412 000 copies/mL and CD4{\textsuperscript{+}} T-cell count was 133 cells/mm\textsuperscript{3} (11.8%). The computed tomography (CT) scan showed an expansive 3.2 cm lesion in the pancreatic head along with multiple hypodense liver lesions. Both a therapeutic endoscopic retrograde cholangiopancreatography (ERCP) and a liver biopsy were performed, confirming stage IV diffuse large B-cell lymphoma NOS, type CCG, MYC and BCL6 double expression, with a R-IPI score of 3.\textsuperscript{1}

The antiretrovirals tenofovir/emtricitabine plus dolutegravir and prophylactic trimethoprim-sulfamethoxazole with acyclovir were started, along with R-CHOP chemoimmunotherapy. The CD4{\textsuperscript{+}} T-cell count increased to 371 cells/mm\textsuperscript{3} (16.9%).

The PET-CT showed complete metabolic response after six cycles, and the patient remains on follow-up.

The risk of mature B-cell neoplasms is increased in HIV patients.\textsuperscript{1,2} Treatment relies on the selection of antiretrovirals\textsuperscript{3} and chemotherapy protocols, and prophylaxis against other opportunistic diseases must be ensured, since it leads to better outcomes for HIV patients.\textsuperscript{3,4}

AUTHORS CONTRIBUTION
AD: Responsible for the intellectual integrity of the manuscript; evaluation of the patient; draft of the paper.
FS: Evaluation of the patient; critical review of the manuscript.
FM: Critical review of the manuscript.

\textsuperscript{#}Autor correspondente: André Dias. andferreiradias@gmail.com

Received/Received: 12/08/2021 - Accepted/ACEITE: 05/01/2022 - Published Online/Published Online: 22/06/2022
Copyright © Ordem dos Médicos 2022
PROTECTION OF HUMANS AND ANIMALS

The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in 2013.

DATA CONFIDENTIALITY

The authors declare having followed the protocols in use at their working center regarding patients’ data publication.

PATIENT CONSENT

Obtained.

COMPETING INTERESTS

The authors have declared that no competing interests exist.

FUNDING SOURCES

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

REFERENCES