

# Primary cutaneous centrofollicular lymphoma associated melanoma

Rigas Haris Marios<sup>1</sup>, Papageorghe Laura<sup>3</sup>, Nitu Lavinia<sup>1</sup>, Rosca Gabriel<sup>1</sup>, Popescu C.D. Teodora<sup>1</sup>, Giurcaneanu Calin<sup>1,2</sup>, Mihai Mara Madalina<sup>1,2</sup>, Popa Liliana Gabriela<sup>1,2</sup>

<sup>1</sup> Department of Dermatology, Elias Emergency University Hospital, Bucharest, Romania

<sup>2</sup> Department of Dermatology, "Carol Davila" University of Medicine and Pharmacy, Bucharest, Romania

<sup>3</sup> Department of Dermatology, Coltea Clinical Hospital, Bucharest, Romania



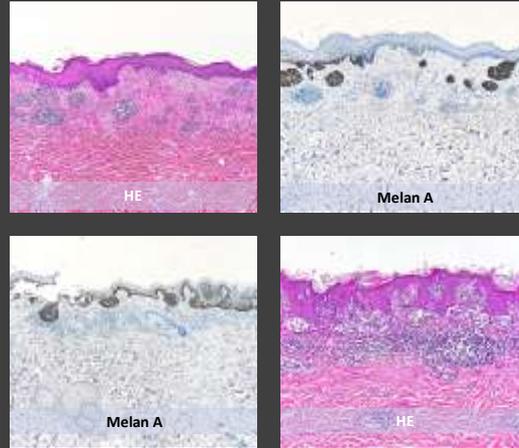
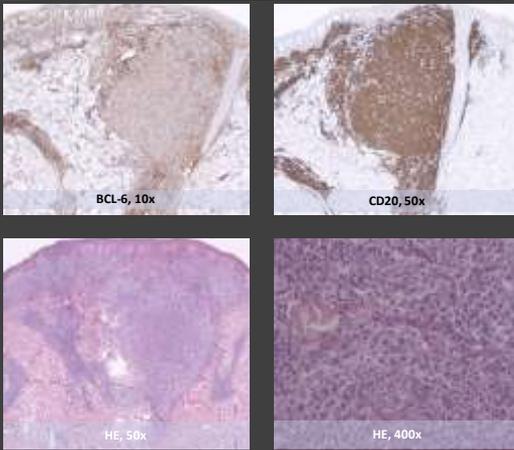
## Introduction & Objectives

Non-Hodgkin lymphoma patients carry a considerably increased risk for the development of secondary malignancies, including melanoma. The latter often follows a more aggressive course compared to melanoma arising in the general population. Conversely, lymphoproliferative disorders have been frequently reported in patients previously diagnosed with melanoma. The relationship between these two malignancies may be at least partly explained by common genetic and immune response aberrations.



## Results

The histopathologic examination confirmed the clinical diagnosis of melanoma, with a Breslow index of 0.5 mm, Clark II and 0 mitoses/field, after narrow margin excision. The treatment consisted into wide local excision for the melanoma site and radiation therapy for the centrofollicular lymphoma which presented very good therapeutic response.



## Materials & Methods

We present the case of a middle-aged male patient who was referred to our clinic for the presence of a slowly growing, asymptomatic, poorly circumscribed, erythematous, infiltrated plaque located on the posterior thorax, evolving for 3 years. Regarding differential diagnosis, lymphomatous origin and sarcoidosis have been taken in account. Histopathologic evaluation evidenced, marked inflammatory infiltrate with lymphocytes and histiocytes on dermis, dense perivascular and peri-adnexal infiltrate and medium/large lymphoid type of cells, outlining "V" letter. Epidermis presented mild atrophy and defacement of dermal papillae. Epidermotropism with lymphoid elements was not present at the dermal level. Immunohistochemistry showed positive stains for CD20 and BCL-6. Based on the clinical examination, histopathologic findings, laboratory analyses, and imaging studies the patient was diagnosed with primary cutaneous centrofollicular lymphoma. Hematology department guided further investigations and treatment options, CT scan (brain, thorax, abdomen, pelvis) showed normal values without systemic involvement. Furthermore physical examination, a suspicious pigmented skin lesion was identified on the patient's left arm. The lesion was 1.5 cm in diameter and showed marked asymmetry, irregular borders, and color variation.

## Conclusions

To conclude, awareness should be raised regarding the link between, hematologic malignancies and secondary skin cancers. Moreover, we underline the importance of regular and thorough dermatological examinations in such high-risk patients. Vice versa, physicians should consider the possibility of lymphoma occurrence in melanoma patients who present with enlarged lymph nodes in sites distant from those of regional lymphatic drainage of the primary melanoma or other suggestive clinical findings.

## References

- Allam MF, Serrano PF, Serrano JL, Abd Elaziz KM, Del Castillo AS, Navajas RF. Cutaneous Melanoma, Hodgkin's Lymphoma and non-Hodgkin's Lymphoma: Common Risk Factors?. *Cent Eur J Public Health.* 2015;23(2):119-121. doi:10.21101/cejph.a4090
- Herr MM, Schonfeldt SJ, Dares GM, et al. Mutual Risks of Cutaneous Melanoma and Specific Lymphoid Neoplasms: Second Cancer Occurrence and Survival. *J Natl Cancer Inst.* 2018;110(11):1248-1258. doi:10.1093/jnci/djy052
- Lam CJ, Curtis RE, Dares GM, et al. Risk Factors for Melanoma Among Survivors of Non-Hodgkin Lymphoma. *J Clin Oncol.* 2015;33(28):3096-3104. doi:10.1200/JCO.2014.60.2094
- Lens MB, Newton-Bishop JA. An association between cutaneous melanoma and non-Hodgkin's lymphoma: pooled analysis of published data with a review. *Ann Oncol.* 2005;16(3):460-465. doi:10.1093/annonc/mdl080