A 35-year old man was referred to our hospital because of fever. At clinical evaluation a cerebriform neoformation was found in the right breast (Figure 1); there was no superficial lymphadenopathy. Routine laboratory tests showed only elevated serum lactate dehydrogenase (750 U/L). Abdominal and chest CT scans were normal as was a bone marrow biopsy. A diagnosis of anaplastic large cell lymphoma, with B-immunophenotype, was made after biopsy of the neoformation. The lymphoma expressed CD30 antigen and carried cytogenetic marker t(2;5)(p23;q35). The patient was treated with 12 cycles of VACOP-B and local radiotherapy with complete remission (Figure 2).

References


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