Primary cutaneous large B-cell lymphoma of the leg with bad evolution

A 77-year old man was referred for a 3-month history of three nodules on his right lower leg (Figure 1). Histopathologic examinations revealed a lymphoid infiltrate throughout the dermis, non-epidermotropic, with predominance of large cells (Figure 2), expression of CD20 (Figure 3) and strong reaction for bcl-2. The diagnosis of a primary cutaneous large B-cell lymphoma (PCLBCL) of the legs was made. There were no signs of systemic involvement (physical examination, computed tomography of thorax and abdomen at diagnosis and six months later, and bone marrow biopsy). The patient was treated with local radiotherapy and responded favorably but nine months later he presented with nodal spread of disease not responding to the CHOP protocol. PCLBCL of the legs is considered in the EORTC classification of B-cell cutaneous lymphomas as an entity with an intermediate clinical behavior although some authors do not share this view.

Francisco José Jiménez-Gonzalo,*
Manuel Medina-Pérez,* Eduardo Ríos-Herranz,*

*Unidad de Hematología y Hemoterapia, and °Servicio de Anatomía Patológica, Hospital de la Merced, Sevilla, Spain.

#Servicio de Hematología y Hemoterapia, Hospital Universitario Virgen del Rocío, Spain

Correspondence: Dr. Francisco José Jiménez Gonzalo. Unidad de Hematología y Hemoterapia, Hospital de la Merced, Avenida de la Constitución, 2 41640 Osuna, Sevilla, Spain.
Phone international: +34 955 077 200. Fax: international +34 955 82 05 44. E-mail: fjjimenezg@aehh.org

References

Figure 1. Reddish tumors, the largest with necrotic center, on the right leg.

Figure 2. Primary cutaneous large B-cell lymphoma. Mixture of centrocytic and centroblastic infiltrates, extending to the dermis. (Hematoxylin-eosin, \( \times 100 \)).

Figure 3. Immunohistochemistry. Strong reaction to CD20.