



Coexisting Primary Malignant Lymphoma and Adenocarcinoma of the Intestinal Tract

İntestinal Kanalin Eş Zamanlı Primer Malign Lenfoma ve Adenokarsinomu

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Dear Editor;

Synchronous occurrence of malignant lymphoma and carcinoma, both located in the intestinal tract is unusual.¹ We present an unusual case of synchronous adenocarcinoma of the sigmoid colon and T-cell lymphoma of the terminal ileum with involvement of the regional lymph nodes.

An 88-year-old woman was admitted to the hospital with anorexia and weight loss. Abdominal computed tomography revealed wall thickening surrounding the terminal ileum (Figure 1a). Also splenomegaly and splenic multiple hypodens lesions and lymphadenopathies in thorax and abdomen were detected. Colonoscopy revealed ulcerated mass in both terminal ileum and sigmoid colon (Figure 1b, 1c). Adenocarcinoma in the sigmoid colon and diffuse large B cell lymphoma in the terminal ileum were detected on permanent pathology report. In the exploration, there was a massive lesion occluding the terminal ileal lumen adherent to the abdominal wall (Figure 1d). The patient underwent sigmoid colon and ileocecal resection. Lymph node metastasis was detected in 24 lymph nodes in the ileocecal resection material. Fifteen lymph nodes were negative in sigmoid colon resection (T3N0). The patient was discharged without any problems on the post-operative 6th day. Chemotherapy for lymphoma was initiated by medical oncologist.

Approximately 2-7% of colorectal carcinomas present with synchronous or metachronous tumors.² Synchronous colonic carcinoma and lymphoma in the same patient is a rare occurrence. Probability was estimated at 0.0002%.³ Lee et al.¹ consider that old age and decreased immunity may be the risk factors for coexisting primary malignant lymphoma and colon adenocarcinoma in one patient. Cornes⁴ reported that coexisting adenocarcinomas either occur synchronously or follow, but never precede lymphoma. In addition, the current lymphoma extended systemically and occupied the regional lymph node, thus suggesting that lymphoma preceded the adenocarcinoma and was predominant. Malignant lymphoma was clinically dominant in the current case and the initial systemic chemotherapy was directed against malignant lymphoma.

Ethics

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Authorship Contributions

Surgical and Medical Practices: A.E., Concept: A.P., Design: A.E., Data Collection or Processing: A.E., Analysis or Interpretation: A.P., Literature Search: A.E., Writing: A.P.

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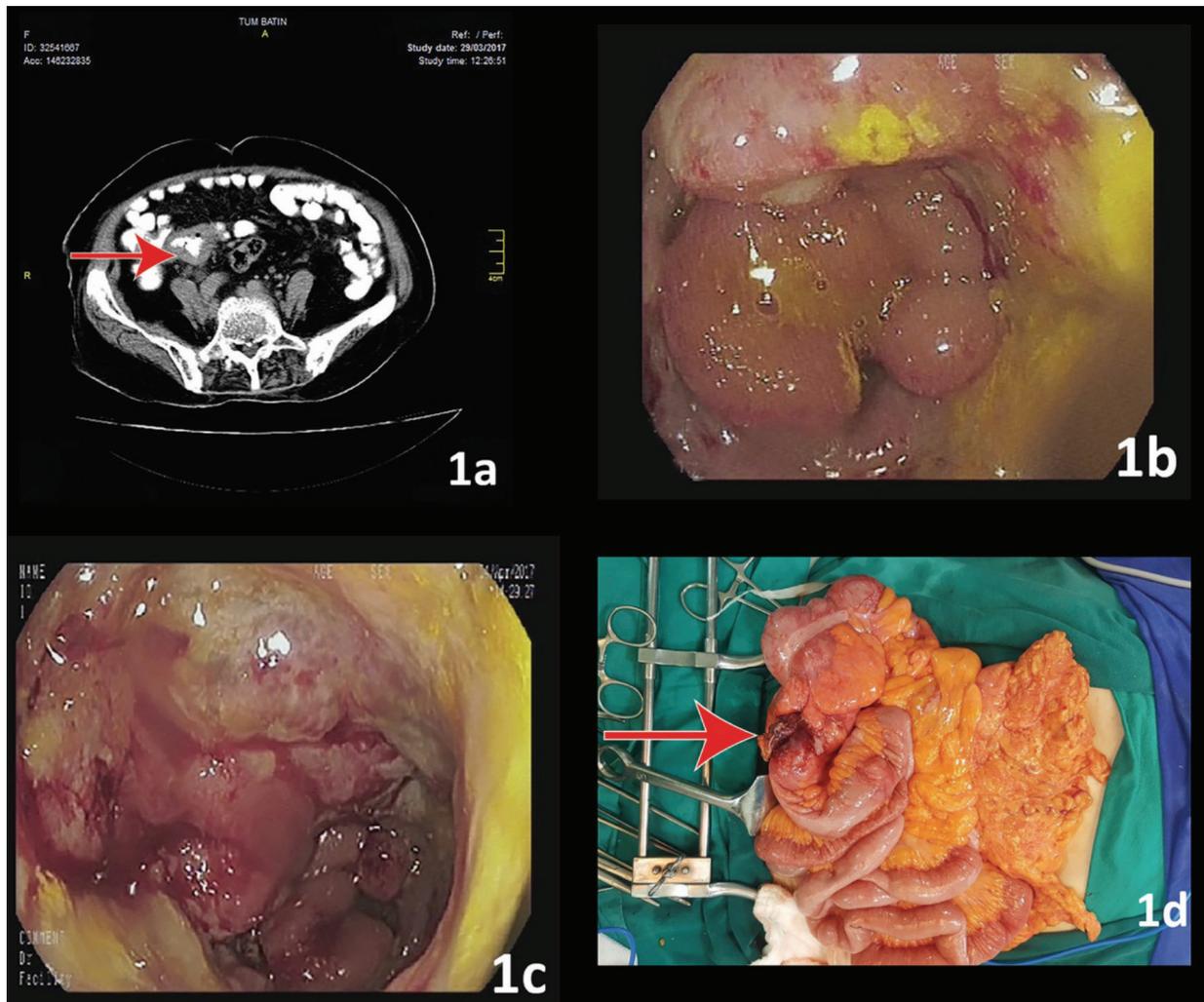


Figure 1. a) Abdominal computed tomography revealing the wall thickening surrounding the terminal ileum (red arrow), b) Colonoscopy revealing ulcerated mass in terminal ileum, c) Colonoscopy revealing ulcerated mass in sigmoid colon, d) Massive lesion occluding the terminal ileal lumen adherent to the abdominal wall (red arrow)

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