To the Editor,

A 21-year-old female was examined for an incidentally detected left parahilar mass on chest radiograph which was taken at the time of job application (Figure 1a). Thoracic CT revealed a mass of 10x9x5 cm with irregular lobulated borders in the anterior mediastinum invading the pericardium (Figure 1b). Histopathological examination of the anterior mediastinotomy material revealed large neoplastic B cells staining positive for CD20 and MUM-1, negative for CD10, and with a high Ki-67 proliferation index (80%-90%) (Figure 2). On PET scan, only the mediastinal mass showed increased FDG uptake (SUVmax: 18) (Figure 1c). Final diagnosis was stage 1A primary mediastinal large B-cell lymphoma (PMBCL). After 6 cycles of R-CHOP, PET scan showed partial anatomical and metabolic response. R-CHOP was completed to 8 cycles followed by mediastinal radiation. She has now been disease-free for 2 years.

PMBCL, accounting for 2%-4% of all non-Hodgkin lymphomas, often presents as a bulky anterior mediastinal mass and often invades surrounding structures such as the heart, lungs, pleura, and superior vena cava [1,2]. Patients often present with cough, dyspnea, chest pain, and superior vena cava syndrome [3]. R-CHOP plus consolidative mediastinal radiation is often an option [4]. Herein, we report a rare case of asymptomatic PMBCL with bulky mediastinal mass in which the patient achieved complete remission after R-CHOP and mediastinal radiation.
Figure 1. Radiological findings of primary mediastinal B-cell lymphoma. a) Appearance of the left parahilar mass on chest plain film. b) Thorax CT depicts a mass of 10x9x5 cm in the anterior mediastinum with irregular lobulated borders invading the pericardium. c) PET scan shows increased FDG uptake in the tumor.

Figure 2. Histopathological examination of the mass. a) Diffuse neoplastic infiltration on a partially sclerotic background (H&E stain, 40x). b) The clear-cell appearance of the tumor cells (H&E stain, 100x). c) The appearance of round nuclei (centroblast-like) and clear cytoplasm (H&E stain, 400x). d) Infiltrated cells with CD20 expression (H&E stain, 400x).

Conflict of Interest Statement
The authors of this paper have no conflicts of interest.

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