ACCLM 2021;4 (1):4-5 Case Report

Heaviness in the chest and Hodgkin Lymphoma: An unusual presentation

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Received: 5 July, 2021 Accepted: 25 August, 2021

How to cite this Article:

Sujan S, Chokhani R, Deo P, Chalise S. Heaviness in the chest and Hodgkin Lymphoma: An unusual presentation. *Ann. Clin. Chem. Lab. Med.* 2021:4(1);4-5

DOI: https://doi.org/10.3126/acclm.v4i1.42673

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Abstract

Hodgkin lymphoma (HL) usually presents as nodal disease and may involve extranodal sites during the progression of the disease. Here we report a unusual case of Hodgkin's lymphoma (HL) in an otherwise healthy 26-year-old young male who came to the Pulmonology OPD with heaviness in the chest. An ultrasound shows mediastinal enlargement. The diagnosis of Hodgkin's lymphoma was made on a trucut biopsy of mediastinal swelling.

Key words

Hodgkin's lymphoma (HL), Chest heaviness

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INTRODUCTION

Hodgkin's lymphoma (HL) is a common B-cell derived lymphoma and may sometimes encountered with unusual presentations. This lymphoid malignancy involved various organs frequently it presents as cervical or supraclavicular painless lymphadenopathies and also it presents as mediastinal mass. 1,2

CASE REPORT

A 26 years young male presented to Pulmonology OPD with chief complain of heaviness of chest which was progressive over the 10 days in addition to it he also complain of back pain. He denied fever and cough but he noticed mild fatigue and shortness of breath. On examination patient was comfortable without pain and respiratory distress, vital signs were within normal limit.

On further radiological examination anterior mediastinal swelling was noticed. USG guided trucut biopsy was sent for histopathological examination with clinical diagnosis of Germ cell tumor or Thymoma.

Gross evaluation revealed three tiny mucosa covered tissue. On microscopic focal lymphocytic collection with few large tumor cells along with eosinophils and degenerating cells were seen, However RS cells were not seen. Immunohistochemistry CD 15, CD30 and PAX 5 was positive.

DISCUSSION

The present case would like to describe diagnostic approach to young patient. Heaviness of the chest radiating to back could be a symptom referred by HL patients. On biopsy presence of eosinophils with lymphoid population without RS cells can be a case of HL.

Hodgkin's disease is a B-cell-derived lymphoma characterized by the presence of RS cells. Hodgkin's disease typically arises in a node or chain of nodes and spreads to other sites through contiguous lymph node, however extra nodal involvement have been reported and usually occurred at advanced stage of disease.³ Patient generally complain of chest pain, fever, dyspnea and cough. However in our case he only complain chest heaviness radiating to

back. There was no fever, cough and dyspnea. Hodgkin's lymphoma occurs in the mediastinum presentation may be insidious. ^{4,5} Therefore the diagnostic approach should be in careful manner. Because it is a curable malignancy and failure to diagnose the disease may lead to many problems.

CONCLUSION

This case highlights the unusual presentation of HL clinically and histopathologically. As this neoplasm have aggressive features with bad prognosis. Diagnostic approach in proper manner could lead to better prognosis of the patient.

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