Chirurgia (Bucur). 2017;112(4):477-481
http://dx.doi.org/10.21614/chirurgia.112.4.477

Diffuse Large B Cell Lymphoma in a Male Breast – A Rare Case Report

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Abstract
Primary breast diffuse large B cell lymphoma (PBL) in male patients represents a rare clinical phenomenon and can imitate a breast carcinoma in its clinical presentation, so, therefore, the initial treatment for most patients remains surgery. Prompt diagnosis associating subsequent treatment combining chemotherapy and radiotherapy are of the utmost importance. We herein report a 56 year’s old male patient diagnosed with diffuse large B cell lymphoma, after clinically presenting with a visible tumor in the left breast and showing no axillary lymphadenopathy. Following clinical diagnosis we performed a breast biopsy with subsequent immunohistochemistry testing. The results showed that the malignant cells stained positive for CD 20, CD 10, and negative for BCL 2, myc and BCL 6, ER/PR with a high proliferation index (Ki 67 90%). The immunohistochemical tests were suggestive for primary large B cell lymphoma of the breast, germinal center type. The patient was submitted to three cycles of R-CHOP (cyclophosphamide, adryamicin, vincristine and prednisolone) and rituximab chemotherapy. Primary diffuse large B cell lymphoma is an extremely unique disease that involves a rather difficult differential diagnosis with a breast carcinoma. A strong index of clinical suspicion is necessary with early diagnosis and treatment.
Key words: diffuse large B cell lymphoma, breast, male, treatment