IMAGE OF THE ISSUE

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An Unusual Cause of Gastrointestinal Bleeding in a HIV-infected Patient: Gastric Plasmablastic Lymphoma

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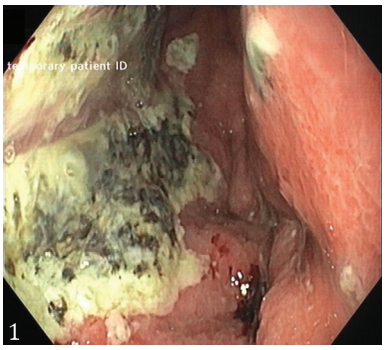

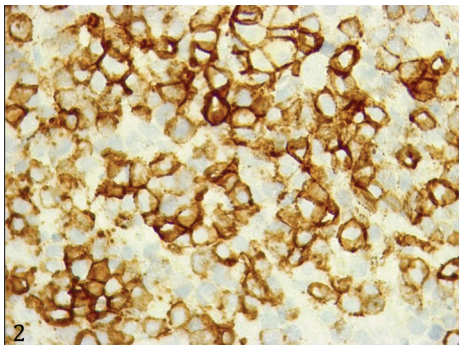

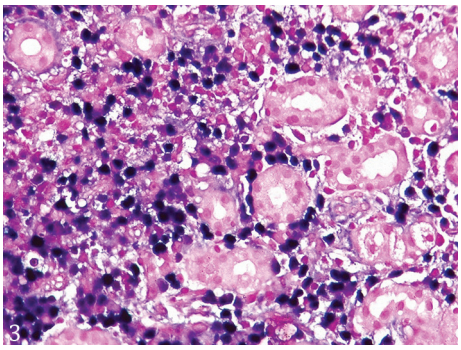

A 50-year-old male with alcohol and hepatitis C virus (HCV) related cirrhosis and human immunodeficiency virus (HIV), was admitted to the hospital due to a constitutional syndrome and anemia. A significant gastric wall thickening was detected on computed tomography. During hospitalization, the patient developed gastrointestinal bleeding with melena. Esophagogastroduodenoscopy showed thickening and tortuosity of gastric body and fundus mucosa, with an indefinite margin between the folds, extensive irregular serpiginous ulcerations, and poor distensibility on air inflation (Fig. 1).

Histopathologic analyses from biopsies revealed gastric lymphoproliferative involvement by a plasmablastic lymphoma (PBL). The gastric mucosa presented a diffuse infiltration of intermediate-sized cells with hyperchromatic and pleomorphic nuclei. The immunocytochemistry study revealed immunopositivity of the neoplastic cells for plasma cell markers such as CD138 (Fig. 2) and, by in situ hybridization, positive for Epstein-Barr encoding region (EBER) (Fig. 3). Unfortunately, the patient died on day 10 of hospitalization due to multiple organ failure in context of sepsis.

Plasmablastic lymphoma is a rare and aggressive subtype of diffuse large B-cell lymphoma. It mainly affects HIV patients and it is typically present in the oral cavity/jaw [1, 2].

Although PBL rarely affects the gastrointestinal tract, this is the most common extraoral site, accounting for approximately 30% of extraoral PBLs. As other lymphoma, PBLs generally presents with fever, night sweats and weight loss. According to the literature, the typical endoscopic findings include multiple dish-like lesions, ulcerations, blood-stained spots, or even nodular masses with active bleeding in the stomach, and erythematous flat lesions in the duodenum. The diagnosis of PBL is challenging as its features overlap with lymphoma and myeloma. Although its pathogenesis is still not fully understood, Epstein-Barr virus has been shown to be present in most cases [1, 3, 4]. Due to its rarity, the chemotherapy regimen is not standardized. Plasmablastic lymphoma has an aggressive course comprising relapses, refractoriness to chemotherapy and very poor survival [1, 5].

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Conflicts of interest: None to declare.

REFERENCES

1. Diego ABO, Johanna CE, Mauro ERS, Angélica IHG. Gastric Plasmablastic Lymphoma, A Very Rare Tumor. Adv Res Gastroentero Hepatol 2020;16:555934. doi:10.19080/ARGH.2020.16.555934
2. Pokhrel A, Yuldasheva O, Mirashi E, et al. Plasmablastic Lymphoma Presenting as Extensive Peritoneal and Retroperitoneal Nodules in an HIV-Positive Patient. J Investig Med High Impact Case Rep 2022;10:23247096211065633. doi:10.1177/23247096211065633
3. Moreno SM, Medina ARG, Pinilla SMR, et al. Aggressive large B-cell lymphoma with plasma cell differentiation: immunohistochemical characterization of plasmablastic lymphoma and diffuse large B-cell lymphoma with partial plasmablastic phenotype. Haematologica 2010;95:1342-1349. doi:10.3324/haematol.2009.016113
4. Castillo JJ, Bibas M, Miranda RN. The biology and treatment of plasmablastic lymphoma. Blood 2015;125:2323-2330. doi:10.1182/blood-2014-10-567479
5. Johan S, Khairuddin A, Zuki AM, et al. Malignant ulcer: a great mimicker of gastric plasmablastic lymphoma. Clin J Gastroenterol 2021;14:1027-1030. doi:10.1007/s12328-021-01409-3