Conference Abstracts

Large B Cell Bone Lymphoma: A Monocentric Experience

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BACKGROUND

Primary lymphoma of the bone is defined by the World Health Organization as a single bone lesion with or without regional lymph node involvement. It is a rare entity. Primary bone lymphomas represent 1 to 3% of non-Hodgkin lymphomas, 5% of non-Hodgkin's extra-node lymphomas, and 3% primary bone tumors.

AIM

Our study aimed to study the therapeutic results of localized primary bone lymphoma.

METHODS

Between 2010 and 2020, six patients were treated for localized primary bone lymphoma. Treatment was decided based on the age of the patient, performance status, stage of the disease, and lactate dehydrogenase (LDH). The therapeutic evaluation was done after completion of chemotherapy. Post-treatment monitoring was clinical, biological, and radiological evaluations, every three months for two years, then every six months for three years, and then once a year.

RESULTS

The mean age was 58.5 years. The sex ratio was 2.5. Bone localizations were clavicle, femur, humerus, sternum, orbit and mandible. All patients had stage I large-cell B lymphoma. In 4 patients, imaging showed osteolytic lesions with cortical destruction and extension to soft tissues. One patient had a fracture of the humerus. Treatment consisted of cyclophosphamide, doxorubicin, vincristine, and prednisone (CHOP) chemotherapy in five patients. One patient received doxorubicin, cyclophosphamide, bleomycin, vincristine, and prednisone (ACVBP) chemotherapy. Rituximab was combined with chemotherapy in four patients. This chemotherapy was followed by radiotherapy in 4 patients. Five patients are alive with complete remission after a mean follow-up of 96 months. The five and 10-year overall survival (OS) was respectively 90% and 50%.

CONCLUSION

The treatment of primary bone lymphoma is based on a combination of chemotherapy, rituximab and radiotherapy. The 5-year OS was similar to that described in the literature.