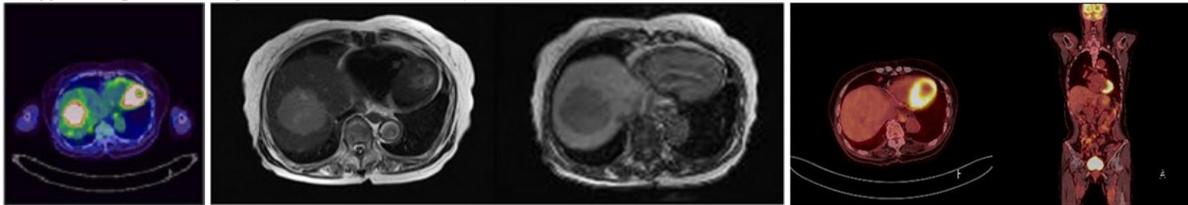


Spontaneous regression of a primary hepatic diffuse large B-cell lymphoma

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Background: Spontaneous regression (SR) of malignancy, defined as natural regression of a tumor without any treatment, is believed to have several underlying mechanisms. There is thought to be a relationship between escape from immune surveillance and SR of lymphoma. We report the first case of SR of a primary hepatic lymphoma. **Case presentation:** A 79-year-old woman was diagnosed with a diffuse large B-cell lymphoma of the liver; A computed tomography (CT) scan detected two lesions. One lesion, located in liver segment 8, was 2 cm in size; it showed arterial enhancement and washout. The other, a central, low density, 6.7 cm mass located in the right lobe of the liver, showed maximal enhancement in the portal phase, suggestive of a haemangioma or hepatocellular carcinoma. Laboratory examination indicated no abnormal findings in terms of hepatitis or tumor markers. Pathological examination confirmed a diagnosis of diffuse large B-cell lymphoma and a surface light chain restriction of lambda was present. We performed immunohistochemistry of bcl-6, CD3, CD5, CD45(Leukocyte Common Antigen), CD10, CD20, CD 23, CD79a, Cyclin D1 and Ki-67. Among those, CD45, CD 20, CD79a were positive and Ki-67 index was 60%. Considering the patient's clinical condition, R-CHOP chemotherapy was recommended. The patient refused treatment. Three years later, she was admitted with abdominal pain. A computed tomography scan revealed that the size of the lymphoma lesion had markedly decreased. Programmed cell death ligand 1 (PD-L1) immunohistochemistry assays were performed on the stained slides produced for the initial pathological evaluation; the results were 12% of tumor proportion score, which means her PD-L1 expression was positive. **Conclusions:** SR of lymphoma is believed to occur via various mechanisms. In the case of our patient, external trauma caused by the biopsy and consequent immunological modulation seems to have led to SR. Our examination of PD-L1 receptors provides further evidence for the contribution of an immune mechanism in SR. The positive PD-L1 result suggests the possible strong evidence for the immune system's involvement in SR.



FOLFIRI에 유효한 반응을 보인 위신경내분비암종 1예

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위에서 발생한 신경내분비암종(neuroendocrine carcinoma)은 드물게 발생하는 질환으로 특성상 화학 요법 및 방사선 요법의 효능이 제한되어있어 예후가 나쁜 것으로 알려져 있다. 59 세 남자가 심한 설사로 병원에 내원하였으며, 위내시경 검사로 위 전정부 후벽에 국소화된 궤양성 병변(직경 3cm)을 확인하였다. 생검을 시행하였고, 조직에 대한 면역염색에서 synaptophysin과 chromogranin A에 대해 양성이었으며, Ki-67 라벨링 지수는 70 % 였다. 복부 전산화단층촬영상 다발성 간전이 및 림프절의 전이를 확인하였다. 환자는 6주기의 etoposide /cisplatin으로 치료를 받았고 stable disease의 반응을 보이다가 중단 6 개월 후에는 진행하였다. 그 후 FOLFIRI(irinotecan / leucovorin / 5FU)로 partial response를 보였으며, 27주기 및 14개월간의 무진행생존기간을 획득하였다. 저자는 FOLFIRI 에 대해 현저한 반응을 보인 위 신경내분비암종 1 예를 보고하는 바이다.

FOLFIRI 투여 전

FOLFIRI 27주기 투여 후

