Enteropathy-associated T-cell lymphoma: involvement of the gastrointestinal tract from the duodenum to the rectum

Enteropathy-associated T-cell lymphoma (EATL) is a rare type of non-Hodgkin’s lymphoma that is commonly associated with celiac disease. The disease is very aggressive with a poor prognosis, and no standardized treatment protocol has been established [1]. An early diagnosis and effective therapy may not be achieved because of the nonspecific clinical and endoscopic findings [2]. The radiologic features of the disease include wall thickening, ulceration, and perforation of the jejunum [3]. 

18F-fluorodeoxyglucose (18F-FDG) positron emission tomography/computed tomography is a useful tool for the staging, management, and prognostication of T-cell lymphoma [4]. Here, we present a unique case of EATL with diffuse involvement of the intestine and colon. A 41-year-old woman was admitted to the hospital with abdominal pain and vomiting in September 2014. Her medical history included celiac disease. Free intra-abdominal fluid and liver heterogeneity were detected by ultrasound. Computed tomography revealed multiple hypodense lesions without contrast enhancement in the liver and contrast-enhanced nodularity, which supported the diagnosis of peripheral...
tonitis carcinomatosa. The results of endoscopy and rectoscopy were compatible with gluten enteropathy. Owing to her worsening clinical condition, the patient underwent laparoscopy, which revealed multiple nodular peritoneal lesions. A biopsy revealed EATL (Fig. 1).

18F-FDG positron emission tomography/computed tomography performed for staging showed wall thickening in the gastrointestinal tract and intense FDG uptake, beginning in the duodenum and extending to the rectum (Fig. 2). In addition, nodularity and a high rate of 18F-FDG uptake were detected at peritoneal sites, and FDG uptake was increased in and around the liver. Repeat endoscopy and colonoscopy showed multiple nodular lesions in the duodenum and various locations within the colon (Fig. 3). The patient died 1 month after the initiation of chemotherapy.

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Competing interests: None

Yusuf Demir¹, Şehmus Ölmez², Erdem Sürücü¹, Cengiz Demir¹, Funda Çalışkan Şenköy³, İrfan Bayram³

1 Yüzüncü Yıl University, School of Medicine, Department of Nuclear Medicine, Van, Turkey
2 Yüzüncü Yıl University, School of Medicine, Department of Gastroenterology, Van, Turkey
3 Yüzüncü Yıl University, School of Medicine, Department of Hematology, Van, Turkey
4 Yüzüncü Yıl University, School of Medicine, Department of Pathology, Van, Turkey

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Corresponding author
Yusuf Demir, MD
Yüzüncü Yıl University
School of Medicine
Department of Nuclear Medicine
Van, Turkey
Fax: +90-432-486-54-13
dryusufdemir@gmail.com